

# ALLERGY POLICY



Blundell's

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FOUNDED 1604

# ALLERGY POLICY

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## POLICY AMENDMENTS

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# ALLERGY POLICY

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## Aims and Objectives

1. This policy outlines Blundell's School's approach to allergy management, including how the whole-school community works to reduce the risk of an allergic reaction happening and the procedures in place to respond if one does.
2. It also sets out how we support our pupils with allergies to ensure their wellbeing and inclusion, as well as demonstrating our commitment to being an Allergy Aware School.
3. This policy applies to all staff, pupils, parents and visitors to the school and should be read alongside these other policies:
  - a. First Aid Policy
  - b. Safeguarding Policy

## What is an Allergy?

4. Allergy occurs when a person reacts to a substance that is usually considered harmless. It is an immune response and instead of ignoring the substance, the body produces histamine which triggers an allergic reaction.
5. Whilst most allergic reactions are mild, causing minor symptoms, some can be very serious and cause anaphylaxis, which is a life-threatening medical emergency.
6. People can be allergic to anything, but serious allergic reactions are most commonly caused by food, insect venom (such as a wasp or bee sting), latex and medication.

## Key Definitions

7. **Anaphylaxis.** Anaphylaxis is a severe allergic reaction that can be life-threatening and must be treated as a medical emergency.
8. **Allergen.** A normally harmless substance that, for some, triggers an allergic reaction. You can be allergic to anything. The most common allergens are food, medication, animal dander (skin cells shed by animals with fur or feathers) and pollen. Latex and wasp and bee stings are less common allergens.

Most severe allergic reactions to food are caused by just 9 foods. These are eggs, milk, peanuts, tree nuts (which includes nuts such as hazelnut, cashew nut, pistachio, almond, walnut, pecan, Brazil nut, macadamia etc), sesame, fish, shellfish, soya and wheat.

There are 14 allergens required by law to be highlighted on pre-packed food. These allergens are celery, cereals containing gluten, crustaceans, egg, fish, lupin, milk, molluscs, mustard, peanuts, tree nuts, soya, sulphites (or sulphur dioxide), and sesame.

9. **Adrenaline Auto-Injector.** Single-use device which carries a pre-measured dose of adrenaline. Adrenaline auto-injectors are used to treat anaphylaxis by injecting

adrenaline directly into the upper, outer thigh muscle. Adrenaline auto-injectors are commonly referred to as AAls, adrenaline pens or by the brand name EpiPen. There are two brands licensed for use in the UK: EpiPen and Jext Pen. For the purposes of this Policy, we will refer to them as Adrenaline Pens.

10. **Allergy Action Plan.** This is a document filled out by a healthcare professional, detailing a person's allergy and their treatment plan. We use the BSACI Allergy action plan for anaphylactic pen carriers.
11. **Risk Assessment.** A detailed document outlining an activity, the risks it poses, and any actions taken to mitigate those risks. Allergy should be included on all risk assessments for events on and off the school site.
12. **Spare Pens.** Blundell's holds a number of spare Adrenaline pens. These are held in the locations outlined in Paragraph 83 below.

## **Roles and Responsibilities**

### **Whole School Approach**

13. Blundell's School takes a whole-school approach to allergy management.
14. The school recognises that we have staff as well as pupils on our roll who suffer from an identified allergy; most commonly these include peanut, tree, nut, milk, egg, soy, wheat, fish, shellfish.
15. Staff need to be aware that other members of staff and some pupils may be allergic to certain other foods. It is the responsibility of our staff to gain an understanding of the individual needs of the pupil in their care.
16. It is not however, possible to remove all risk from the school. Food provided by the school kitchens for pupils with allergies will be appropriate for their needs, however pupils themselves need to take some responsibility for managing their condition, particularly when consuming food not provided by the kitchens.
17. This policy will be promoted to staff, parents and pupils using the following means:
  - a. Initial circulation of its contents;
  - b. Inclusion in the PHSCE syllabus;
  - c. Making the policy available on the School Website;
  - d. Making the policy available in the School Policy Library;
  - e. Making the policy available on request;
  - f. Reference will be made to it in the new parent information;
  - g. Meetings will be offered to parents of new children with allergies;
  - h. Staff being informed and provided with training opportunities;

- i. Maintaining awareness of catering department staff of school staff and pupils with allergies.

### **Designated Allergy Lead**

18. The Designated Allergy Lead is the Senior Nurse who reports to the School Doctor and the Second Master.
19. They are responsible for:
  - a. Ensuring the safety, inclusion and wellbeing of pupils and staff with an allergy;
  - b. Taking decisions on allergy management across the school;
  - c. Championing and practising allergy awareness across the school;
  - d. Being the overarching point of contact for staff, pupils and parents with concerns or questions about allergy management;
  - e. Ensuring allergy information is recorded, up-to-date and communicated to all staff;
  - f. Making sure all staff are appropriately trained, have good allergy awareness and realise their role in allergy management (including what activities need an allergy risk assessment);
  - g. Ensuring staff, pupils and parents have a good awareness of the school's Allergy and Anaphylaxis Policy, and other related procedures;
  - h. The Medical Centre is responsible for reviewing the stock of the school's spare adrenaline pens and ensuring staff know where they are;
  - i. The Medical Centre keep a record of any allergic reactions or near-misses and ensure an investigation is held as to the cause and to update the policy in the light of these experiences;
  - j. Regularly reviewing and updating the Allergy and Anaphylaxis Policy.
20. At regular intervals the Designated Allergy Lead will check procedures and report to the Second Master.

### **Medical Centre**

21. The Medical Centre is responsible for:
  - a. The Medical Centre is responsible for reviewing the stock of the school's spare adrenaline pens and ensuring staff know where they are;
  - b. The Medical Centre keep a record of any allergic reactions or near-misses and ensure an investigation is held as to the cause and to update the policy in the light of these experiences;
  - c. Regularly reviewing and updating the Allergy and Anaphylaxis Policy;

- d. Collecting and coordinating the paperwork (including Allergy Action Plans) and information from families (this is likely to involve liaising with the admissions team for new joiners);
- e. Support the Designated Allergy Lead on how this information is disseminated to all school staff, including the Catering Team, occasional staff and staff running clubs;
- f. Coordinating medication with families and ensuring medication is in date. (Whilst it's the parents and carers responsibility to ensure medication is up to date, the nursing team should also have systems in place to check this and notify the parents when they see the expiry date is approaching);
- g. Keeping an Adrenaline Pen Register to include Adrenaline Pens prescribed to pupils and Spare Pens, including brand, dose and expiry date. The location of Spare Pens should also be documented;
- h. Regularly checking spare pens are where they should be, and that they are in date;
- i. Replacing the spare pens when necessary;
- j. Providing on-site adrenaline pen training for other members of staff and pupils and refresher training as required e.g. before school trips; and
- k. Maintaining and disseminating the Critical Need to Know List which will include all pupils with serious allergic reactions.

### **The Admissions Team**

- 22. The admissions team is likely to be the first to learn of a pupil or visitor's allergy. They will work with the Designated Allergy Lead and school nursing team to ensure that:
- 23. There is a clear method to capture allergy information or special dietary information at the earliest opportunity. This is usually done via the Medical Form;
- 24. This will be communicated to the Medical Centre; and
- 25. This is done for pupil taster days.

### **All Staff**

- 26. All school staff, including teaching staff, support staff, and occasional staff are responsible for:
  - a. Championing and practising allergy awareness across the school
  - b. Understanding and putting into practice the Allergy and Anaphylaxis Policy and related procedures, and asking for support if needed
  - c. Being aware of pupils (and staff, when necessary) with allergies and what they are allergic to

- d. Considering the risk to pupils with allergies posed by any activities and assessing whether the use of any allergen in activity is necessary and/or appropriate
- e. Ensuring pupils always have access to their medication and to check that they are carrying their Adrenaline injector.
- f. Being able to recognise and respond to an allergic reaction, including anaphylaxis
- g. Considering the safety, inclusion and wellbeing of pupils with allergies at all times
- h. Preventing and responding to allergy-related bullying, in line with the school's anti-bullying policy
- i. Staff embarking on food projects MUST take responsibility for checking for allergens in their class.
- j. Year 7 & 8 are escorted to the dining hall and can be assisted in their choice of appropriate food by staff.

### **All Parents & Carers**

27. All parents and carers (whether their child has an allergy or not) are responsible for:
- a. Being aware of and understanding the school's Allergy and Anaphylaxis Policy and considering the safety and wellbeing of pupils with allergies;
  - b. Providing the school with information about their child's medical needs, including dietary requirements and allergies, history of their allergy, any previous allergic reactions or anaphylaxis. They should also inform the school of any related conditions, for example asthma, hay fever, rhinitis or eczema;
  - c. Considering and adhering to any food restrictions or guidance the school has in place when providing food, for example in packed lunches, as snacks or for fundraising events;
  - d. Refraining from telling the school their child has an allergy or intolerance if this is a preference or dietary choice;
  - e. Encouraging their child to be allergy aware; and
  - f. Educating their child and encouraging independence in the child's awareness and management of their allergy.
28. If an allergy is not declared to the Medical Centre by a parent, the child is assumed not to have any allergies.

### **Parents of Children with Allergies**

29. In addition to the general responsibilities of all parents, outlined above, parents and carers of children with allergies should:
- a. Work with the school to fill out an Allergy Action Plan;

- b. If applicable, provide the school or their child with two labelled adrenaline pens and any other medication, for example antihistamine (with a dispenser, i.e. spoon or syringe), inhalers or creams;
- c. Ensure medication is in-date and replaced at the appropriate time;
- d. Update school with any changes to their child's condition and ensure the relevant paperwork is updated too;
- e. Support their child to understand their allergy diagnosis and to advocate for themselves and to take reasonable steps to reduce the risk of an allergic reaction occurring e.g. not eating the food they are allergic to; and
- f. Educate their child and encourage independence in the child's awareness and management of their allergy.

### **All Pupils**

30. All pupils at the school should:
- a. Be allergy aware;
  - b. Understand the risks allergens might pose to their peers;
  - c. Learn how they can support their peers and be alert to allergy-related bullying;
  - d. Older pupils will learn how to recognise and respond to an allergic reaction and to support their peers and staff in case of an emergency;
  - e. Be sensitive to the needs of those with allergies; and
  - f. When preparing food in house, pupils need to be meticulous in cleaning utensils, surfaces etc. Food placed in fridge should be covered.
31. The topic of allergens will be covered in the PSHCE, so that pupils are aware of allergies and the importance of hand washing. They will be encouraged NOT to share food and to avoid the unintended spread of allergens through left over food.

### **Pupils with Allergies**

32. In addition to the general responsibilities for all pupils, outlined above, pupils with allergies are responsible for:
- a. Avoiding their allergen as best as they can;
  - b. Understanding that they should notify a member of staff if they are not feeling well, or suspect they might be having an allergic reaction
  - c. Always carrying (if age-appropriate) one adrenaline auto-injector with them and one kept in house. They must only use them for their intended purpose;
  - d. Understanding how and when to use their adrenaline auto-injector;

- e. Talking to the Designated Allergy Lead or a member of staff if they are concerned by any school processes or systems related to their allergy;
  - f. Raising concerns with a member of staff if they experience any inappropriate behaviour in relation to their allergies;
  - g. Knowing what to do if they have an allergic reaction off the school premises. This should include how to treat themselves and raise the alarm to get help;
  - h. Knowing what their allergies are and how to mitigate personal risk;
  - i. Checking the labels on food packaging and to avoid any foods which they are unsure;
  - j. Taking particular care in houses as there is the possibility of other pupils having brought in food containing allergens;
  - k. Considering whether to inform their friends and housemates of their condition and educating them about it; and
  - l. Recognising that events such as cake sales may present a particular risk, and they should make as informed a decision as possible before consuming home-made items. If in doubt, these should be avoided.
33. Pupils leaving Blundell's will need to be capable of living in a world in which they need to manage their exposure to allergens. Therefore, we expect that they will take increasing responsibility for managing their exposure to foods to which they are allergic.

### **Allergy Records and Documentation**

34. **Allergy Register.** The school has a register of pupils who have a diagnosed allergy. This includes children who have a history of anaphylaxis or have been prescribed adrenaline pens, as well as pupils with an allergy where no adrenaline pens have been prescribed.
35. **Allergy Action Plan?** Mentioned above.
36. **Adrenaline Pen Register.** Mentioned above.
37. **Critical Need to Know List.** Mentioned above.
38. **Incident Log.** The Medical Centre will log allergic reaction incidents and near-misses.

### **Assessing and Mitigating Risk**

39. Allergens can crop up in unexpected places.
40. Staff will consider allergies in all activity planning and include it in risk assessments. Some examples include:
- a. Classroom activities, for example craft using food packaging, science experiments where allergens are present, food tech or cooking

- b. Bringing animals into the school, for example a dog or hatching chick eggs can pose a risk.
  - c. Running activities or clubs where they might hand out snacks or food "treats". Ensure safe food is provided or consider an alternative non-food treat for all pupils.
  - d. Planning special events, such as cultural days and celebrations
41. Inclusion of pupils with allergies must be considered alongside safety but all efforts will be made to ensure that they are not excluded and, where possible, staff will adapt the activity.
42. Further, risks related to allergies will be risk assessed, recorded and - where possible - mitigated such as:
- a. Lists of ingredients not explicitly naming the allergen (e.g. casein and whey as milk derivative, arachis oil is another name for peanut oil).
  - b. Misinterpretation or a lack of understanding of the differences between a life threatening 'allergy' or an 'intolerance' which may produce milder symptoms;
  - c. Foodstuffs being used that do not contain allergens, but which are labelled as being produced in factories that cannot be guaranteed to be allergen free due to the potential for cross contamination in preparation. It cannot reasonably be expected that all these items be kept out of school; and
  - d. Pupils bringing food on to the school site.
43. Whilst the catering department can provide plated meals that do not include the nominated allergens, they cannot guarantee that dishes do not contain traces of allergens as they may be stored and prepared in the same areas as known or identified allergens.

## **Food, Mealtimes & Snacks**

### **School Catering**

- 44. The school is committed to providing a safe meal for all pupils, staff and visitors, including those with food allergies.
- 45. The school has robust procedures in place to identify pupils with food allergies.
- 46. New pupils with allergies will have an induction with the catering manager.
- 47. A meeting can be set up at any time between the school nurses, parents and the catering manager to discuss an allergy if desired, and is encouraged.
- 48. The catering department places staff and pupils into three distinct categories to identify special diets:

- a. Pupil/Staff member has had a severe reaction/anaphylactic shock or has been medically diagnosed.
  - b. Pupil/Staff member has an allergy or intolerance.
  - c. Pupil/Staff member excludes food due to preferences or because of religious beliefs.
49. Pupils and staff within these categories may ask a member of the catering department catering team for any allergy information and this will be provided using the daily allergen checker.
50. For Pupils in the 'severe reaction' category, a pre-plated meal can always be provided upon request. We strongly recommend this as a course of action.
51. The following measures are taken to ensure catering staff are appropriately trained:
- a. Due diligence is carried out regarding allergen management when appointing catering staff;
  - b. All catering staff and other staff preparing food will receive relevant and appropriate allergen awareness training;
  - c. Anyone preparing food for those with allergies will follow good hygiene practices, food safety and allergen management procedures;
  - d. The catering team will endeavour to get to know the pupils and staff with allergies and what their allergies are, supported by school staff.
  - e. Catering staff will participate regularly in appropriate training to understand what to do when a child is suspected of having been exposed to an allergen (even if no symptom is shown) and how to identify and deal with the allergic reactions including anaphylaxis shock, as well as milder reactions.
52. Further, the catering team:
- a. Are mindful of all of those who have allergies, whether producing food cooked on site or in the supply of packed lunches;
  - b. Will endeavour to provide varied meal options to all those with allergies;
  - c. Will help anyone in the choice of appropriate food using the allergen checker;
  - d. Will avoid nut-based dishes on the menu;
  - e. Will ensure that food with precautions or allergy warnings are recorded on the allergen matrix as 'May Contain'.
  - f. Will ensure that food containing the main 14 allergens (see 'allergens' definition above) will be clearly identified for all to see. Other ingredient information will be available on request;

- g. Will ensure that food packaged to go will comply with PPDS legislation (Natasha's Law) requiring the allergen information to be displayed on the packaging; and
- h. Will ensure that, where changes are made to ingredients, this will be communicated to pupils and staff with dietary needs.

### **Food Brought Into School**

- 53. It is recognised that preventing any food containing allergens being brought on site is impossible. We therefore educate pupils through the PSHCE programme of the risks posed by such food. Pupils are asked to exercise common sense, consideration and restraint when bringing food into school and to avoid bringing food containing allergens into school.

### **School Trips & Sports Fixtures**

- 54. Staff leading a School Trip will have a register of pupils with allergies with medication details. They should also be aware of any members of staff with allergies who are accompanying the trip. This will be detailed on the risk assessment.
- 55. External residential trip organisers will be notified in advance of our visit of pupils in the group with allergies or intolerances.
- 56. Allergies will be considered on the risk assessment and catering provision put in place.
- 57. Staff accompanying the pupils will be aware of pupils with allergies and be trained to recognise and respond to an allergic reaction.
- 58. Parents may be consulted if considered necessary, or if the trip requires an overnight stay.
- 59. No child with a prescribed adrenaline pen will be able to go on a school trip without one of their own pens.
- 60. Adrenaline pens will be always kept close to pupils e.g. not stored in the hold of the coach when travelling or left in changing rooms.
- 61. Adrenaline pens will be protected from extreme temperatures.
- 62. Consideration will be given to whether to take spare pens to sporting fixtures and on trips.
- 63. Overnight trips require two pens It is the trip leader's responsibility to check they have them.
- 64. Allergens will be clearly labelled on catered packed lunches.
- 65. If attending Match Tea at another school, details of pupils' dietary requirements will be sent ahead to ensure they have a safe meal.

## **Insect Stings**

66. Those with a known insect venom allergy should:
  - a. Avoid walking around in bare feet or sandals when outside and when possible, keep arms and legs covered;
  - b. Avoid wearing strong perfumes or cosmetics; and
  - c. Keep food and drink covered.
67. The school grounds and maintenance will monitor the grounds for wasp or bee nests. Pupils (with or without allergies) should notify a member of staff if they find a wasp or bee nest in the school grounds and avoid them. Pupils at risk should take special care around the bee hives in the school garden.

## **Animals**

68. Precautions advised to limit the risk of an allergic reaction to animals include:
  - a. A pupil with a known animal allergy should avoid the animal they are allergic to;
  - b. Areas visited by animals will be cleaned thoroughly;
  - c. Anyone in contact with an animal should wash their hands after contact;
  - d. If an animal lives on site, for example in a Boarding House, pupils, parents and staff will be made aware and consideration and adaptations will be made; and
  - e. School trips that include visits to animals will be carefully risk assessed.

## **Asthma**

69. It is vital that pupils with allergies keep their asthma well controlled, because asthma can exacerbate allergic reactions.
70. Asthma procedures are held in the Medical Centre.

## **Inclusion and Mental Health**

71. Allergies can have a significant impact on mental health and wellbeing. Pupils may experience anxiety and depression and are more susceptible to bullying.
72. No child with allergies should be excluded from taking part in a school activity, whether on the school premises or a school trip.
73. Pupils with allergies may require additional pastoral support including regular check-ins from their Tutor or House Parent.
74. Affected pupils will be given consideration in advance of wider school discussions about allergy and school Allergy Awareness initiatives.
75. Bullying related to allergy will be treated in line with the school's anti-bullying policy.

## Adrenaline Pens

76. Pupils prescribed with adrenaline pens must have easy access to two, in-date pens always.
77. Those at risk from anaphylaxis should carry their adrenaline pen at all times.
78. Spot checks will be made to ensure adrenaline pens are where they should be and in date.
79. Adrenaline pens must not be kept locked away.
80. Adrenaline pens should be stored at moderate temperatures (see manufacturer's guidelines), not in direct sunlight or above a heat source (for example a radiator).
81. Used or out of date pens will be disposed of as sharps.
82. The School has a number of spare adrenaline pens to be used in accordance with government guidance.
83. School Adrenaline Pens are clearly signposted and are stored in:
  - a. The houses of those with allergies
  - b. Garden Cabin
  - c. Amory Pavillion
  - d. The Medical Centre
  - e. The Dining Hall
84. The Senior Nurse is responsible for:
  - a. Deciding how many spare pens are required and their purchase.
  - b. What dosage is required, based on the Resuscitation Council UK's age-based guidance.
  - c. Which brands to buy.
  - d. Distribution around the site and clear signage.
85. Further details on the management and administration of adrenaline pens can be found in the First Aid Policy.

## Responding to an Allergic Reaction / Anaphylaxis

86. **See the First Aid Policy for Guidance on Recognising and Responding to an Allergic Reaction.**
87. If a pupil has an allergic reaction, they will be treated in accordance with their Allergy.
88. If anaphylaxis is suspected adrenaline will be administered without delay, lying the pupil down with their legs raised as described in the Appendix. They will be treated where they are, and medication brought to them.

89. A pupil's own prescribed medication will be used to treat allergic reactions if immediately available.
90. This will be administered by the pupil themselves (if age appropriate) or by a member of staff. Ideally the member of staff will be trained, but in an emergency, anyone will administer adrenaline.
91. If the pupil's own adrenaline pen is not available or misfires, then a spare adrenaline pen will be used.
92. If anaphylaxis is suspected but the pupil does not have a prescribed adrenaline pen or Allergy Action Plan, a member of staff will ensure they are lying down with their legs raised, call 999 and explain anaphylaxis is suspected. They will inform the operator that spare adrenaline pens are available and follow instructions from the operator. The MHRA says that in exceptional circumstances, a spare adrenaline pen can be administered to anyone for the purposes of saving their life.
93. If, after 5 minutes, there is no improvement, use a second adrenaline pen and call the emergency services to tell them you have done so.
94. The pupil will not be moved until a medical professional/ paramedic has arrived, even if they are feeling better.
95. Anyone who has had suspected anaphylaxis and received adrenaline must go to hospital, even if they appear to have recovered. A member of staff will accompany the pupil in an ambulance and stay until a parent or guardian arrives.

### **Training**

96. The school is committed to training all staff to give them a good understanding of how to handle allergies.
97. This training includes:
  - a. Understanding what an allergy is;
  - b. How to reduce the risk of an allergic reaction occurring;
  - c. Understanding food labelling;
  - d. How to recognise and treat an allergic reaction, including anaphylaxis;
  - e. How the school manages allergies (as outlined in the Policy);
  - f. Where adrenaline pens are kept (both prescribed pens and spare pens) and how to access them;
  - g. Taking part in an anaphylaxis drills; and
  - h. The importance of inclusion of pupils with food allergies, the impact of allergy on mental health and wellbeing and the risk of allergy related bullying.

**END**

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