



## Food Allergy Policy

### Introduction

The School welcomes all children with food allergies to be part of our community. We aim to maintain the school as a nut-aware zone and all parents and carers are made aware of this when their child is admitted to the school.

The School's position is not to guarantee a completely allergen free environment as this would be impossible but rather to minimise the risk of exposure, encourage self-responsibility, and plan for an effective response to possible emergencies. Please refer to the **Schools Nut policy** for further details.

### Policy Aims

- We aim to ensure that the school has considered the needs of food-allergic pupils and has developed appropriate procedures.
- We aim to work in partnership with the parents/carers of children with food allergies, building excellent levels of trust, communication and individualised care around their child's specific needs.
- We aim to do all we can to minimise the risk of any child experiencing food allergy-induced reactions especially anaphylaxis.
- We aim to ensure that affected children are not unknowingly exposed to food allergens like nuts during school hours.
- We aim to extend these policies to all meals and food consumed in school and during any trips organised by the school.
- We aim to ensure staff are properly prepared to manage emergency situations should they arise.
- We aim to consider the needs of food-allergic pupils when handling foods as part of the school curriculum.
- We aim to educate children to eventually become more responsible for managing their own allergy as is appropriate to their age and development.
- We aim to educate a child's peers to be aware of food allergy and to know what to do in an emergency.

## Background

True food allergies are reproducible adverse reactions to a particular food that involve the immune system. Virtually all known food allergens are proteins. They can be present in the food in large amounts and often survive food-processing conditions.

Allergic reactions are characterised by the rapid release of chemicals in the body that cause symptoms, which can occur within minutes or up to an hour or more after ingestion of the allergen. Whilst almost any food protein can cause an allergic reaction in some people, the most common food allergens in Europe include:

### The 14 allergens are:

1. Celery and celeriac
2. Cereals containing gluten – wheat, rye, barley, oats, spelt or kamut
3. Crustaceans (e.g. prawns, lobster, scampi, crab, shrimp paste)
4. Egg
5. Fish
6. Lupin (seeds and flour used in Europe for pastries and breads)
7. Milk
8. Molluscs - mussels, whelks, squid, land snails, oyster sauce
9. Mustard
10. Nuts and nut oil
11. Peanuts
12. Sesame
13. Soya
14. Sulphur dioxide and sulphites

Many allergens are hidden where you would least expect them to be. We ensure that our staff are familiar with the constituents of EVERY ingredient (e.g. Worcester sauce usually contains anchovies (fish), many gravy mixes contain milk, celery and gluten). Our staff examine the ingredients list on the packaging carefully and check with the supplier if necessary.

The proportion of the population with true food allergy is approximately 1-2% of adults and about 5-8% of children, which equates to about 1.5 million people in the UK.

**N.B. Coeliac disease** is not an allergy. Whilst it is classified as food intolerance it is not like other intolerances in that it is an autoimmune disease, which means that the body produces antibodies that attack its own tissues. In coeliac disease this attack is triggered by gluten, a protein found in wheat, rye and barley. This intolerance to gluten causes an inflammatory response that damages the gut. Villi (tiny, finger-like projections that line the gut) become inflamed and then flattened (villous atrophy), leading to a decreased surface area for absorption of nutrients from food. People with undiagnosed coeliac disease can, as a result, have a wide range of digestive symptoms and can suffer from nutritional deficiencies.

## Procedures

### Parental responsibilities

- We require parents to provide detailed information about their child's allergy. This is to include past reactions, triggers and recommended treatments. We also require copies of letters from their doctor/allergy consultant.
- We require parents to provide an annual medical update at the beginning of each academic year or earlier if necessary.
- We require parents to register their child's EpiPen expiry date with the EpiPen text alert system accessed via the EpiPen website to act as a back up to the alerts also sent by the school nurses. New EpiPens will need to be provided promptly.

### School Nurse Responsibilities

- All staff will be alerted to which children in school have an identified food allergy. Each child's photograph (with parent's permission) will be displayed in the kitchen area for reference.
- Relevant information can be found in the kitchen, work room and staff room displays and by accessing a Pupil Medical Condition report/special diets (tick all 6 categories) via Schoolbase. Allergy care plans are stored on the school intranet (School policies (M)/Medical/Highfield or Brookham.
- All staff, including catering staff, will work in partnership with the domestic manager and school nurses to ensure that they have the knowledge and skills to **CARE** for a child with a food allergy:

**Comprehending** the basic medical facts about food allergies.

**Avoiding** the Allergen.

**Recognizing** a Reaction.

**Enacting** Emergency Care Plan.

- There is a template care plan in place for the care of all children with a mild-moderate food allergy that does not require the administration of an adrenalin auto-injector device (AAI) such as an EpiPen.
- There is an individual health care plan (IHCP) in place for all children with a severe food allergy that may cause anaphylaxis and require the administration of an Automatic Adrenaline Injector (AAI). All AAIs are kept in an orange bag along with a copy of the IHCP, these are stored in the Health Centre or Brookham office and are accessible at all times.
- The school nurses will ensure that staff have access to all relevant information about any child with a food allergy in the school. Staff are encouraged to check the school's medical database for any child in their care who may have a food allergy.
- On collection of First Aid bags for off-site matches/trips staff are asked to ensure they know the significant medical issues (SMIs) of the group they are taking, and to confirm in writing that they are aware of any child in their care with a food allergy.
- The school nurses contact all schools providing match teas to inform them of any visiting Highfield child with a food allergy.

- As part of residential trips planning, the school nurses ensure that the staff arranging the trip have liaised with the hosts concerning any pupils with food allergies to ensure special diets are provided..
- All staff will be trained in first aid and be offered the opportunity to learn how to administer an AAI.

### **Catering Staff and Domestic Manager's responsibilities**

- Catering staff will do their best to ensure that foods prepared and served are allergen-free for each individual. It is understood that some foods are labelled as having been prepared or manufactured in an environment that may previously have been used for preparing products containing nuts.
- Catering staff will ensure that they are able to support children with food allergies by being able to help a child to identify the foods they should/should not eat. If they are not able to do so they will make sure they ask someone who can.
- Each child with a food allergy will be shown where the alternative food choices are located and taught that all serving implements are to be kept for that food only.
- The Domestic Manager will liaise with parents, catering staff and the school nurses with regard to any changes in a child's dietary needs and the school medical database updated accordingly.

### **Deliveries**

Any foods which are delivered as substitute products are double checked as they may not have the same ingredients as the usual product.

### **Product labelling**

On the 1st October 2021, the new Allergen Regulations came into effect. The new **"Natasha's Law"** requires all **pre-packaged foods prepared on site** to be labelled with a full list of ingredients highlighting any of the 14 main allergens that are present in the ingredients.

Pre-packaged foods include any items that are prepared on site, packaged up and displayed on a shelf or in a chiller. This includes items such as sandwiches, salads, pasta pots baguettes, cakes etc.

Here is the list of Information required on any food item packaged on site.

- **Product Description** – This must be an accurate description of what the product is made from, e.g. Cheese and Chutney Sandwich
- **Use by Date**
- **Full list of ingredients** – This includes listing all ingredients contained in the finished product. So, in the Cheese & Chutney Sandwich for example, all the ingredients would need to be listed that are contained in the sandwich – bread, chutney, cheese, spread and any other foods added. Staff are careful to include all ingredients that may have been added to the finished product – for example chicken marinated in buttermilk will contain **milk**

- **Identification of any of the 14 main allergens.** These should be identified as follows – flour (gluten), prawns (crustaceans), tahini (sesame), cheese (milk) etc., so it is clear which ingredient is the allergen.
- **Nutritional Value** – this is not currently a requirement, however it may become so in the future. If the labelling system used includes the ability to detail the nutritional information on the label, it may be a good idea to add this now rather than revisiting it at a later date.

#### **Products that do not require labelling**

- Toasties/paninis etc. that are pre-made ready for toasting but not packaged but are then put in a takeaway bag when cooked do not require a label.
- Sandwiches that are made to order do not require full labelling – such as rolls for the allergen children in their packed lunches if pre-ordered.
- Items that are not pre-packaged.
- Any foods that are on display (i.e. Sausage Roll or Cakes) that are displayed unpackaged.

### **Managing Allergy Information**

- All Catering staff are trained in Allergen Awareness.
- Allergens are clearly displayed on blackboards at every service time for each dish. This includes all foods which manufacturers state “may contain” certain allergens.
- A daily staff briefing informs all catering staff of any allergens in the lunch dishes for that day. This includes cooking processes (potential cross contamination in the fryers for example), the oil that food is cooked in, dressings and sauces.
- Stringent preparation procedures are in place as it is important to prevent cross contamination when preparing foods that can cause allergic reactions.
- The Catering Team are informed in writing by the school with full details of students with allergies or those needing special diets. The catering department are notified of any changes throughout the term.

#### **For students under 12 years**

- Details of all students with food allergies or intolerances are provided to the Catering Manager by the school and the Catering Manager is able to access these lists frequently via the school database.
- If appropriate, the catering team will prepare dishes specific to the student’s needs.
- All pre-prep children have mats on their trays which show what their allergies are. Children in the prep school read the menus, where the allergens are highlighted and if unsure they will ask a member of the service team who have all been briefed on the daily food choices and allergies

- All service staff are fully briefed in the students' specific needs
- All catering service staff are able to confirm students' requirements and appropriate food selections
- If a student has a severe allergy their lunch is made separately (made specifically for the individual, covered, labelled and stored separately from other foods). Their meal is checked by the Dining Supervisor before being handed over.

#### **For students above the age of 12 years**

- Details of all students with food allergies or intolerances are provided to the Catering Manager by the school and can be checked daily by the Catering Manager by referring to the school database.
- If appropriate we will prepare dishes specific to the student's needs. In this case the student's food will be prepared separately from the main menu and will be individually plated, covered, labelled and stored separately from other foods. The student is able to speak to any member of the service team or a supervisor about their allergy at lunch time.
- For students that make their own lunch choices without being supervised by school, and for school staff and visitors, there is a clear notice in the dining room advising them to inform a member of the Catering Team if they have any food allergies or intolerances. The service staff can then advise on any allergens in the dishes.
- There are menus displayed on all counters highlighting the allergens in each dish.

#### **Teaching, sports and boarding staff**

- In addition, any teachers who have an AAI user in their care will be responsible for familiarising themselves with the child's allergy status and care plan.
- Staff needs to be pro-active in ensuring that they hold a current first aid qualification and seek further training in the administration of an AAI if necessary.
- Staff taking an AAI user off-site for matches or school trips will need to check that the child has remembered to collect their yellow bag from the Health Centre prior to leaving the school.

#### **Administrative responsibilities**

- The school will have adequate insurance.
- Relevant health forms will be sent by the school to be completed by parents as part of their child's school admission process.

## Resources

<https://www.anaphylaxis.org.uk/information-training/allergywise-training/for-schools/>

Coeliac UK: <http://www.coeliac.co.uk/>

[www.kidswithfoodallergies.org/resourcespre.php?id=68&](http://www.kidswithfoodallergies.org/resourcespre.php?id=68&)

Useful allergy resources for schools:

<https://www.allergyuk.org/information-and-advice/for-schools/useful-allergy-resources-for-schools>

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## Appendices

### Appendix 1: ALLERGIC REACTIONS GENERAL CARE PLAN

#### Signs and Symptoms:

#### Mild to Moderate Allergic Reaction NOT involving airway, breathing or circulation – antihistamine

- Redness or flushing of skin
- Skin rash (urticaria) - red blotchy, skin looks like nettle rash/wheals
- Itchiness
- Swelling of eyes, lips, and face
- Tingling, burning, or itching in mouth (may paw at tongue)
- Vomiting

#### Severe Allergic Reaction involving airway, breathing or circulation – AAI

- **Airway**
  - Swollen tongue
  - Hoarseness, feeling of lump in throat
  - Difficulty swallowing, drooling
  - Recurrent coughing or choking
- **Breathing**
  - Noisy or difficult breathing, wheezy
  - Breathlessness, unable to speak in sentences
- **Circulation**
  - Pale, clammy skin
  - Blue around lips & mouth
  - Persistent crampy abdominal pain & vomiting
  - Floppy, dizzy or feeling faint
  - Sense of impending doom, agitation
  - Unconsciousness & collapse

#### *Pupil at risk of anaphylaxis (AAI has been prescribed)*

- ▶ Direct someone to get the Anaphylaxis kit & School Health Care Plan.
- ▶ NB: Two generic AAI's are available, 1 in a wall-mounted box behind the servery in the dining Room and one in the cricket pavilion, if person's own anaphylaxis kit not available. This is ONLY to be used for those already prescribed an AAI unless directly instructed by phone by an emergency 999 call operator.
- ▶ Give oral antihistamine as per care plan or instructions on bottle/box
- ▶ Stay with pupil to see if signs of breathing difficulty or circulatory problems develop and until signs and symptoms have resolved (30-60 minutes) or follow directions on care plan
- ▶ Make sure pupil knows to let someone know if symptoms return



### *Pupil without history of anaphylaxis*

- ▶ Give oral antihistamine as per instructions on bottle/box (liquid cetirizine is preferred)
- ▶ Stay with pupil for 30-60 minutes (signs and symptoms should be improving). If develops breathing difficulties or signs of shock: 999 (mobile 112)
- ▶ Make sure pupil knows to let someone know if symptoms return or become worse.

### **Severe Allergic Reaction in a pupil with an Epipen: problems with breathing or signs of shock**

- ▶ Follow care plan if available, otherwise follow general instructions below
- ▶ Stay Calm
- ▶ Stay with pupil & tell someone to call 999 (mobile 112) & say “anaphylaxis in a child”
- ▶ Direct someone to get pupil’s Anaphylaxis Kit/Care Plan
- ▶ Give the AAI (pupil lying down unless refuses)
  - Directions are on the pen, note time given
- ▶ If pupil is alert & able to swallow, give dose of oral antihistamine (unless he/she had it prior to the AAI)
- ▶ Pupil should remain lying down with legs elevated (unless refuses)
- ▶ **N.B: Some people have an asthma inhaler in their kit due to asthma symptoms present during allergic reaction. Give one puff per minute via a spacer device until ambulance arrives or symptoms ease.**
- ▶ If no better after 5 minutes, use second AAI & note time
- ▶ Wait with pupil until ambulance arrives
- ▶ Give empty AAI(s) and a brief history to paramedic
- ▶ Contact parents

## Appendix 2: **SPECIAL MEASURES**

### **Introduction**

The school recognises that there are some pupils whose allergies are more severe than others. They are more sensitive to their allergen(s) and they may have other atopic conditions such as asthma, eczema and hay fever which also intrude on normal daily living.

The impact of exposure to their allergens is complex and so extra measures need to be taken in the school community to avoid this. The following measures can be put in place to help a child in any particular year group (\*).

### **Staff, Children and Parents information/awareness**

#### **To include:**

#### **Initial consultations**

Close liaison by catering team, teaching staff and school nurses with pupil's parents/carers to identify specific issues and discuss alternative food options in school.

#### **Whole staff awareness raised**

- Online anaphylaxis training course completed by the beginning of term
- INSET session led by school nurse

#### **Pupil awareness of allergy**

- Whole school assembly
- Additional Year group assembly
- Re-education for the children about the expectations during sus

#### **Parent awareness**

- Parent and **staff** handbooks to be updated to include information on food in school before the start of next academic year

#### **Catering details**

- NO food to be brought into school at any point by anyone. If food is required it must be requested through the normal channels via a catering request form and issued via the catering department where we can check for allergens.
- NO food is to be removed from the Dining Room at any time, unless by the catering team who will transport food around site in a safe way.
- ALL sus to be eaten in the Dining Room with the children seated so as to avoid extra mess. Children will line up and not enter the Dining Room until the supervising member of staff is present.
- No food to be eaten around school at any time, unless being supplied and supervised as part of hospitality provision.
- ALL staff drinks carried around school to be in cups with lids to protect from accidental spillage.
- Yr \* sus to take place in the alcove at 10.30am.
- Yr \* children to enter and leave by the alcove door.

- Yr \* to wash hands before and after all food services using the upstairs bathrooms opposite the Matrons Workroom. Domestic manager will ensure that these are cleaned before 10.30am.
- Yr \* to eat lunch in the alcove at all times. Pupil with severe allergy to be served first.
- Yr \* afternoon sus to be served and eaten in the alcove.
- Yr \* to have designated play areas at break times.