



Edgeborough

CHARTERHOUSE FAMILY OF SCHOOLS

Allergen and Anaphylaxis Policy
(including EYFS and Boarding)

Table of Contents

1. AIMS & OBJECTIVES:	4
Related Policies:	4
2. WHAT IS AN ALLERGY?	4
3. DEFINITIONS:	4
Please note that the skin changes do not always happen with an anaphylaxis.	4
3.1a WHAT CAN CAUSE ANAPHYLAXIS?	4
3.1 b EXPLANATION OF THE BODY'S REACTION.	5
3.1 c MANAGING ANAPHYLAXIS.....	5
Please note that a person would have any of the above symptoms but not necessarily all of them at the same time.	5
Jext/Epipen:	6
Emerade:	6
Remember a second injection may be given after five minutes (minimum) if there are no significant improvement of symptoms.	6
4. ROLES AND RESPONSIBILITIES:	7
4.1 DESIGNATED ALLERGY LEAD.....	7
4.2 Matron Team.....	8
Responsibilities delegated by Designated Allergy Lead:.....	8
4.3 ADMISSIONS TEAM:	8
4.4 ALL STAFF:.....	9
4.5 ALL PARENTS:.....	9
4.6 PARENTS OF CHILDREN WITH ALLERGIES:	9
4.7 ALL PUPILS:	10
4.8 PUPILS WITH ALLERGIES:	10
5. REGISTER OF PUPILS WITH ALLERGIES:	10
6. ASSESSING RISK:	11
7. MINIMISING THE RISKS OF AN ANAPHYLAXIS:	11
7.2 MANAGING AAls:	11
8. CATERING IN SCHOOL:	11
List of Major Allergens.....	12
8.1 FOOD BANS OR RESTRICTIONS	14
8.2 FOOD HYGIENE FOR PUPILS	14
8.3 ORGANISERS OF EVENTS SERVING FOOD.....	15
9. BOARDING HOUSE:	15
9.1 BOARDING HOUSE: PUPILS WITH FOOD ALLERGIES:	16
10. SCHOOL TRIPS AND SPORTS FIXTURES:	16
11. INSECT STINGS:	17
12. ANIMALS:	17

13. ALLERGIC RHINITIS/ HAYFEVER: 17

14. ASTHMA:.....17

15. INCLUSION AND MENTAL HEALTH:.....17

16. VISITORS TO THE SCHOOL:.....17

17. TRAINING:.....17

1. AIMS & OBJECTIVES:

This policy outlines Edgeborough'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. 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.

This policy applies to all staff, pupils, parents and visitors to the school and should be read alongside these other policies:

Related Policies:

- **Boarding House Staff Handbook**
- **EYFS Supplementary Policy**

2. WHAT IS AN ALLERGY?

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.

Whilst most allergic reactions are mild, causing minor symptoms, some can be very serious and cause anaphylaxis, which is a life-threatening medical emergency.

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.

3. DEFINITIONS:

3.1 ANAPHYLAXIS: Anaphylaxis is a severe allergic reaction that can be life-threatening and must be treated as a medical emergency.

Anaphylaxis is a severe, life-threatening, generalised or systemic (whole body) hypersensitivity reaction. It occurs when a person has contact with something they are allergic to (allergen) either by eating it or breathing it in or through contact with the skin.

It is characterised by rapidly-developing, life-threatening problems involving: swelling of the airways (either mouth or throat) and/or breathing problems (loud raspy breathing or rapid breathing) and/or circulation difficulties (low blood pressure and/or fast pounding heart beat). In most cases, there are associated skin and mucosal changes. These are most commonly: body redness with rashes or hives, facial swelling especially around the eyes and lips, tongue swelling.

Please note that the skin changes do not always happen with an anaphylaxis.

3.1a WHAT CAN CAUSE ANAPHYLAXIS?

In short, any substance a person is allergic to. Most common causes include foods such as peanuts, tree nuts (i.e. almonds, hazelnuts, walnuts, cashews, Brazil nuts), seeds such as sesame and mustard, fish, shellfish, dairy products and eggs. Non-food causes include wasp or bee stings, latex (rubber), medications and chemicals. In some people, exercise or cold water can trigger a severe reaction - either on its own or in combination with other factors such as food or drugs.

3.1b EXPLANATION OF THE BODY'S REACTION.

An anaphylactic reaction is caused by the sudden release of chemical substances (including histamine) when the allergen enters the body. This triggers a reaction between the antibodies and the allergen. In those who are anaphylactic, this mechanism is so sensitive that even minute quantities of the allergen can cause a severe reaction. The released chemicals act on the blood vessels in the body causing them to swell. This causes the swelling in the mouth, throat, anywhere on the skin, and within the heart and lungs. In turn this causes the blood pressure to drop and heart rate to rise leading to dizziness and breathing difficulties.

Adrenaline (which is found in auto-injectors, that are given to anaphylactic people) is a hormone which occurs naturally in the body and is used to reduce the symptoms of an anaphylaxis. It acts quickly to constrict blood vessels, which in turn reduces the swelling within them. It also relaxes smooth muscles in the lungs which then helps improve breathing. It also stimulates the heart to beat more strongly which in turn all lead to reducing swelling both internally and externally in the body.

3.1c MANAGING ANAPHYLAXIS

SIGNS AND SYMPTOMS OF ANAPHYLAXIS:

- o Generalised flushing of the skin
- o Rash (hives) anywhere on the body
- o Loud, wheezy or raspy breathing
- o Swelling of throat, lips, eyes or mouth
- o Itching
- o Difficulty in swallowing or speaking
- o Alterations in heart rate
- o Abdominal pain, nausea and vomiting or sudden diarrhoea
- o Sudden feeling of weakness, dizziness and light-headedness (drop in blood pressure)
- o Sense of impending doom
- o Collapse and unconsciousness

Please note that a person would have any of the above symptoms but not necessarily all of them at the same time.

3.1d WHAT TO DO WHEN A PERSON IS HAVING AN ANAPHYLAXIS

- o Dial 999 immediately
- o Check identity – ask name
- o Check if the person is a known Anaphylactic and ask what they are allergic to, if known
- o Check what medication the person has taken already prior to your arrival
- o If they are a known Anaphylactic with prescribed AAls and have any of the symptoms above, the person will need to give themselves their auto-adrenaline injector (AAI). If they are unable to, then you must do it.
- o If they are a previously unknown anaphylactic, regulation 238 of the MHRA (Medicines and Healthcare products Regulatory Agency) permits the use of a generic AAI for the purpose of saving their life, even if there is no medical authorisation/consent in place for use of the AAI.

3.1e HOW TO GIVE AN AUTO-INJECTOR PEN

There are three types of auto-injector pens: Epipen, Jext and Emerade.

Epipen and **Jext** are colourful and are stored within clear outer casings, which need to be removed prior to use. They also have a safety cap in place which will need to be removed before administration.

Emerade is a plain white case where only the cap needs removing before administering.

Jext/Epipen:

1. Open the clear outer casing and remove the pen
2. Hold the pen firmly in your hand with all fingers wrapped around the main body of the pen (little finger nearest to the needle end, thumb at the top)
3. With your thumb, flick off the end cap (which is blue on Epipen, yellow on Jext)
4. Press the auto-injector firmly against the outer thigh (upper third). There can be quite a recoil so hold it tightly in place
5. AAls may be given through clothing so no need to undress the person at all
6. Hold the auto-injector in place against the thigh for 10 seconds
7. Remove the auto-injector from the leg (the needle will automatically go back inside the pen on removal)
8. Rub the area in a circular motion for 10 seconds

Emerade:

1. Hold the pen firmly with all fingers wrapped round body of pen, thumb to the top
2. Remove the cap / needle shield with your other hand
3. Press the auto-injector firmly against the outer thigh (upper third). There may be some recoil so hold it tightly
4. Hold it in place for 5 seconds
5. Remove the auto-injector from the leg
6. Rub the area in a circular motion for 10 seconds

Remember a second injection may be given after five minutes (minimum) if there are no significant improvement of symptoms.

Ensure 999 has been called as the person must always be taken to A&E for further assessment and follow up care, even if showing signs of improvement.

3.1f POST ADMINISTRATION

- If adrenaline is used then the pupil MUST attend A&E afterwards. Always call 999
- The pupil should ideally be lying down with their legs raised. unless this causes them breathlessness. in which case they should be sat up
- Pupils should remain where they are until the ambulance arrives but staff must contact Matron to attend.
- Sharps: Please bring the used cartridge to Matron or A&E for safe disposal
- Document a record of events, including exact timings of auto-injector administration
- Inform a member of SLT of the event
- SLT or Matron should Inform the parents as soon as possible
- New AAls must be ordered for the pupil as replacement by parents

3.2 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 nine 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.

3.3 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 three brands licensed for use in the UK: EpiPen, Jext Pen and Emerade. Emerade is currently not available as it has been recalled due to misfiring incidences. For the purposes of this Policy we will refer to them as Auto-injector Pens.

3.4 ALLERGY ACTION PLAN: these are produced as part of a pupil's Individual Healthcare Plan (see below).

3.5 INDIVIDUAL HEALTHCARE PLAN: A detailed document outlining an individual pupil's condition, history, treatment, risks and action plan. This document is created by the school in collaboration with parents/carers and, where appropriate, pupils. All pupils with an allergy should have an Individual Healthcare Plan and it will contain their Allergy Action Plan. This is updated on an annual basis.

We have supported this with an individual risk assessment in some cases (where allergies extend to classroom materials/resources)

3.6 RISK ASSESSMENT: Allergy should be included on all risk assessments for events on and off the school site.

3.7 SPARE PENS: The dining room hold spare AAI pens through Kitt Medical. They can also be used to treat a person who experiences anaphylaxis but has not been prescribed their own adrenaline.

Epipens are kept with pupils in a named bag/pencil case (in classrooms and taken with the pupil to Forest School/site walks/lunch). Pens are regularly checked to ensure they are in date.

4. ROLES AND RESPONSIBILITIES:

Edgeborough takes a whole-school approach to allergy management.

4.1 DESIGNATED ALLERGY LEAD

The Designated Allergy Lead is the Deputy Head (Pastoral), reporting to the Head and Safeguarding Governor. They are responsible for:

- Ensuring the safety, inclusion and wellbeing of pupils with allergy
- Taking decisions (together with the Matron Team and Business Manager) on allergy management across the school
- Championing and practicing allergy awareness across the school

- Being the overarching point of contact (alongside the Matron and Business Manager) for staff, pupils and parents with concerns or questions about allergy management
- Ensuring allergy information is recorded, up-to-date and communicated to all staff. This responsibility is delegated to the Matron Team.
- 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)
- Ensuring staff, pupils and parents have a good awareness of the School's Allergy and Anaphylaxis Policy, and other related procedures
- Reviewing the stock of the School's spare auto injector pens (check the School has enough and the locations are correct) and ensuring staff know where they are. This process is delegated to the Matron Team
- Keep a record of any allergic reactions or near-misses and ensure an investigation is held as to the cause and put in place any learnings (alongside the Business Manager)
- Regularly reviewing and updating the Allergy and Anaphylaxis Policy. This is completed by Designated Allergy Lead, Matron and the Operations Manager

At regular intervals the Designated Allergy Lead will check procedures and report to the SLT & the Health and Safety Committee.

4.2 Matron Team

The Matron Team is responsible for:

- Collecting and coordinating the paperwork (including Allergy Action Plans and Individual Healthcare Plans) and information from families (this is likely to involve liaising with the Admissions Team for new joiners)
- 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
- Ensuring the information from families is up-to-date, and reviewed annually (at a minimum)
- Matron is to check expiry dates of AAls as part of their monthly checks and inform the Designated Allergy Lead if they need replacing. Kitt Medical AAI's are changed on an annual basis
- All staff undertake online training through Kitt Medical for adrenaline training

Responsibilities delegated by Designated Allergy Lead:

- Ensuring allergy information is recorded, up-to-date and communicated to all staff. This responsibility is delegated to the Matron Team
- Reviewing the stock of the School's spare auto injector pens (check the School has enough and the locations are correct) and ensuring staff know where they are. This process is delegated to the Matron Team
- Regularly reviewing and updating the Allergy and Anaphylaxis Policy

4.3 ADMISSIONS TEAM:

The Admissions team is likely to be the first to learn of a new pupil or visitor's allergy. They should work with the Designated Allergy Lead and Matron Team to ensure that:

- There is a clear method to capture allergy information or special dietary information at the earliest opportunity. This is achieved by:
 - The Child Information Form being sent to all September starters the preceding summer term (and in year joiners receiving the pack and form in adequate time)
 - If a child develops an allergy during their time at Edgeborough, a separate form is

sent to parents to complete

- For children coming on a taster day, forms are sent out prior to visit requesting allergy information.
- There is a clear structure in place to communicate this information to the relevant parties both to the Matron Team, Catering team and Key Persons (EYFS)
- Visitors (for example at Open Days and events) are aware of the catering set up and if food is to be offered and plans for medication if the child is to be left without parental supervision

4.4 ALL STAFF:

All School staff, to include teaching staff, support staff, domestic & catering staff, occasional staff (for example, sports coaches, music teachers) are responsible for:

- Championing and practicing allergy awareness across the school
- Understanding and putting into practice the Allergy and Anaphylaxis Policy and related procedures, and asking for support if needed
- Being aware of pupils with allergies and what they are allergic to
- 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
- Ensuring pupils always have access to their medication either by being carried with them or with Matron
- Being able to recognise and respond to an allergic reaction, including anaphylaxis
- First responders taking part in training as required (at least once a year)
- Considering the safety, inclusion and wellbeing of pupils with allergies at all times
- Preventing and responding to allergy-related bullying, in line with the School's Anti-Bullying Policy.
- Being the voice of the child where required and taking responsibility for required precautions (i.e movement of injector pen with the child)
- Making the school aware of any allergies that relate to them

4.5 ALL PARENTS:

All parents and carers (whether their child has an allergy or not) are responsible for:

- Being aware of and understanding the school's Allergy and Anaphylaxis Policy and considering the safety and wellbeing of pupils with allergies
- Providing the School (via Admissions or Matron) 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, hayfever, rhinitis or eczema
- Considering and adhering to any food restrictions or guidance the School has in place when providing food, for example, food from home bought into the boarding house
- Refraining from telling the School their child has an allergy or intolerance if this is a preference or dietary choice
- Encouraging their child to be allergy aware

4.6 PARENTS OF CHILDREN WITH ALLERGIES:

In addition to point 4.5, the parents and carers of children with allergies should:

- Work with the School to fill out an Individual Healthcare Plan
- 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

- o Ensure medication is in-date and replaced at the appropriate time
- o Update School with any changes to their child's condition and ensure the relevant paperwork is updated too
- o 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.

4.7 ALL PUPILS:

All pupils at the school should:

- o Be allergy aware
- o Understand the risks allergens might pose to their peers
- o Learn how they can support their peers and be alert to allergy-related bullying.
- o Older pupils (Year 7 and 8) will learn how to recognise and respond to an allergic reaction and to support their peers and staff in case of an emergency

4.8 PUPILS WITH ALLERGIES:

In addition to point 4.7, pupils with allergies (as is age-expected) are responsible for:

- o Knowing what their allergies are and how to mitigate personal risk
- o Avoiding their allergen as best as they can
- o Understand that they should notify a member of staff if they are not feeling well, or suspect they might be having an allergic reaction
- o All AAI pens are held with Matron for children in Year 3-8. For children in Preprep the AAI pens are held in the classrooms
- o Understand how and when to use their adrenaline auto-injector
- o Talking to the Designated Allergy Lead (Deputy Head Pastoral), Matron, Operations Manager or their form teacher if they are concerned by any school processes or systems related to their allergy
- o Raising concerns with a member of staff if they experience any inappropriate behaviour in relation to their allergies
- o When leaving site e.g. for a sports event or trip, the trip leader will carry their two auto injector pens with them. Year 8 pupils may carry their own pens on trips after prior discussion with the trip leader and Matron

5. REGISTER OF PUPILS WITH ALLERGIES:

The School has a register of pupils who have a diagnosed allergy. This is held on ISAMS (School MIS system) and regarding food, can be obtained on the R:Drive. Trip requests are also provided with a report detailing allergies. 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.

Each pupil with an allergy whereby anaphylaxis can occur has an Individual Healthcare Plan. The information on this plan includes:

- o Known allergens and risk factors for allergic reactions
- o A history of their allergic reactions
- o Detail of the medication the pupil has been prescribed including dose, this should include adrenaline pens, antihistamine etc.
- o A photograph of each pupil (shared with core catering/all staff if food related)

6. ASSESSING RISK:

Allergens can crop up in unexpected places. Staff (including visiting staff) will consider allergies in all activity planning and include it in risk assessments. Some examples include:

- Classroom activities, for example science experiments where allergens are present
- Bringing animals into the School / Boarding House, for example a dog
- 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
- Planning special events, such as cultural days and celebrations
- Trips
- Sports away fixtures
- Boarding House kitchen use

Inclusion of pupils with allergies must be considered alongside safety and they should not be excluded. If necessary, the activity is adapted to minimise the risk.

An individual risk assessment will be made per activity per pupil allergy.

7. MINIMISING THE RISKS OF AN ANAPHYLAXIS:

7.1 PROCESS FOR KNOWN ANAPHYLAXIS OR ALLERGIES IN THE SCHOOL

- Parents / carers must inform the School that the student has an allergy, including details of what the allergen is and the severity of response to the allergen. The information can be provided on the Child Information Form when joining the school or if the student develops an allergy after starting school Matron must be informed.
- If the parent informs the School that the student has an allergen, then the contact they have informed must ensure Form teacher/tutor, Operations Manager and the SLT are informed immediately.
- Matron will assess the student, and create an individualised Health Care Plan. Matron will complete an individualised Allergen Risk Assessment.
- All pupils with known allergies are red flagged by Matron on the ISAMS system
- All pupils with a known severe allergic reaction / anaphylaxis Have their AAI pens held with Matron in an unlocked cupboard. This is accessible at all times. In Preprep 1 pen is kept with the pupil at all times
- Those children who board, their AAI pen goes up to the boarding kitchen

7.2 MANAGING AAI's:

- Check regularly the expiry date of auto-injectors and replace in advance of expiry
- Record the expiry date of both pens
- Always ensure two AAI's are at home during the holidays and that two are returned after the holidays
- Complete the transfer of medication form whenever AAI's are taken out and subsequently returned

Following the Department of Health (DoH) document on the use of adrenaline auto-injectors in School, it has been agreed that two generic AAI's have been made available in the dining room for pupil's who carry an auto-injector. These generic AAI's can be used for someone suffering with anaphylaxis. This is managed through Kitt Medical. All staff need to know where the pens are located.

8. CATERING IN SCHOOL:

Allergen and Anaphylaxis Policy

The school is committed to providing a safe meal for all students, including those with food allergies.

- Due diligence is carried out with regard to allergen management when appointing catering staff
- All catering staff and other staff preparing food will receive relevant and appropriate allergen awareness training
- Anyone preparing food for pupils with allergies will follow good hygiene practices, food safety and allergen management procedures
- The Catering team will endeavour to get to know the pupils with allergies and that their allergies are supported by all school staff
- The School has robust procedures in place to identify pupils with food allergies
- Hold information on pupils' allergies
- Be trained to ensure they are clear on what to do if asked about allergens
- Maintain records of allergens included in food made on site
- Not knowingly add nuts as an ingredient to their cooking. However, the School cannot guarantee that some of the constituent ingredients used are wholly nut free because of the possibility of cross contamination in factories, etc i.e. 'may contain'
- Not serve bought-in products with nuts as an ingredient. However, the School cannot guarantee that some of the constituent ingredients used are wholly nut free because of the possibility of cross contamination in the production process i.e. 'may contain'.
- Provide allergen labelling for School menus at the entrance to the dining room and at point of service. There will be specific labelling on items that contain any of the 14 allergens
- All pupils in Nursery and Preprep with food allergens are offered, via their parents, plated meals
- Food containing the main 14 allergens will be clearly identified for pupils, staff and visitors to see. Other ingredient information will be available on request.
- Food packaged to go will comply with PPDS legislation (Natasha's Law) requiring the allergen information to be displayed on the packaging
- Where changes are made to the ingredients this will be communicated to pupils with dietary needs by Food Allergen Champion on duty during service by ensuring allergen labelling is accurate.
- 'Maybe Contains' is labelled within the allergen labelling and treated the same way as the 14 named allergens
- Display signs at all food outlets asking individuals with allergies to ask for advice if unsure about the contents of the food
- Discuss menu choices with parents who have concerns

List of Major Allergens

Celery	This includes celery stalks, leaves, seeds and the root called celeriac. You can find celery in celery salt, salads, some meat products, soups and stock cubes.
Cereals containing gluten	Wheat (such as spelt and Khorasan wheat/Kamut), rye, barley and oats are often found in foods containing flour, such as some types of baking powder, batter, breadcrumbs, bread, cakes, couscous, meat products, pasta,

	pastry, sauces, soups and fried foods which are dusted with flour
Crustaceans	Crabs, lobster, prawns and scampi are crustaceans. Shrimp paste, often used in Thai and south-east Asian curries or salads, is an ingredient to look out for.
Eggs	Eggs are often found in cakes, some meat products, mayonnaise, mousses, pasta, quiche, sauces and pastries or foods brushed or glazed with egg
Fish	You will find this in some fish sauces, pizzas, relishes, salad dressings, stock cubes and Worcestershire sauce.
Lupin	Yes, lupin is a flower, but it's also found in flour! Lupin flour and seeds can be used in some types of bread, pastries and even in pasta.
Milk	Milk is a common ingredient in butter, cheese, cream, milk powders and yoghurt. It can also be found in foods brushed or glazed with milk, and in powdered soups and sauces.
Molluscs	These include mussels, land snails, squid and whelks, but can also be commonly found in oyster sauce or as an ingredient in fish stews.
Mustard	Liquid mustard, mustard powder and mustard seeds fall into this category. This ingredient can also be found in breads, curries, marinades, meat products, salad dressings, sauces and soups
Nuts	Not to be mistaken with peanuts (which are actually a legume and grow underground), this ingredient refers to nuts which grow on trees, like cashew nuts, almonds and hazelnuts. You can find nuts in breads, biscuits, crackers, desserts, nut powders (often used in Asian curries), stir-fried dishes, ice cream, marzipan (almond paste), nut oils and sauces

Peanuts	Peanuts are actually a legume and grow underground, which is why they are sometimes called a groundnut. Peanuts are often used as an ingredient in biscuits, cakes, curries, desserts, sauces (such as satay sauce), as well as in groundnut oil and peanut flour.
Sesame Seeds	These seeds can often be found in bread (sprinkled on hamburger buns for example), breadsticks, houmous, sesame oil and tahini. They are sometimes toasted and used in salads.
Soya (sometimes known as Soyabeans / products thereof)	Often found in bean curd, edamame beans, miso paste, textured soya protein, soya flour or tofu, soya is a staple ingredient in oriental food. It can also be found in desserts, ice cream, meat products, sauces and vegetarian products.
Sulphur dioxide (sometimes known as sulphites)	This is an ingredient often used in dried fruit such as raisins, dried apricots and prunes. You might also find it in meat products, soft drinks, vegetables as well as in wine and beer. If you have asthma, you have a higher risk of developing a reaction to sulphur dioxide

8.1 FOOD BANS OR RESTRICTIONS

- The School's caterers must comply with the Food Safety Act 1990 and the Food Safety Regulations 1995 (revised in 2006) and EU Food Information for Consumers Regulation No 1169/2011
- Compliance of food to go packaging with PPDS (Natasha's law). The school also takes account of guidance provided by the DfE on supporting pupils with medical conditions
- It is not possible to provide an environment that is totally free of all allergens or even free of peanuts/nuts. However, the School aims to manage the risk of allergens by:
 - Limiting the possibility of peanuts/nuts on the school sites
 - Labelling food allergens in food prepared by our catering team or external providers
 - Providing signs where allergens may be present
 - Providing advice, on request, to staff, pupils and visitors with allergens
 - Assisting in the education of staff and pupils with allergies
- This School is an Allergen Aware school. We have students with a wide range of allergies to different foods, so we encourage a considered approach to bringing in food
- We try to restrict peanuts and tree nuts as much as possible on the site and check all foods coming into the kitchen.

8.2 FOOD HYGIENE FOR PUPILS

- Pupils are encouraged to wash their hands before eating
- Sharing or swapping food is discouraged and throwing food is not allowed

- Personal Water bottles are encouraged for use in the school day
- Boarding Staff are required to read and familiarise themselves with all aspects of the Allergens & Anaphylaxis Policy and the relevant sections of the Boarding Handbook and House Risk Assessment. If a pupil in has an allergy which could cause anaphylaxis, an individual Healthcare plan and risk assessment is produced. The Boarding house staff will assist with the production of these and ensure compliance.
- EYFS staff receive certificated training on food hygiene and safety (onboarding)

8.3 ORGANISERS OF EVENTS SERVING FOOD

- Members of staff organising events such as cake sales will:
 - Ensure that anyone bringing food to the event is aware of the School allergens policy and ask that they clearly label the ingredients of the food on the wrapping
 - Display a sign at the event reminding pupils and staff that the products may contain allergens and reminding them to check the ingredients
 - External providers are requested to supply:
 - Public Liability Insurance
 - Staff Food Safety training certificates or similar
 - Controls regarding food hygiene and allergens
 - Food allergen notice for public display
 - Risk Assessment which includes elements relating to your interface with the public

9 BOARDING HOUSE:

- Boarding staff should conduct Food Hygiene Training
- Pupils identified as having possible anaphylaxis must have TWO generic AAls. These generic AAls must NOT be locked away and need to be accessible to all staff and pupils always should they be needed. There should be a folder next to the AAls with printed healthcare plans of those students who carry AAls for possible anaphylaxis. Please note however, the generic AAls can be used on any individual with anaphylaxis – not just those previously identified students
- Boarding staff should be trained annually in the usage of the auto-injector through Kitt Medical
- All staff that have direct pupil contact should have basic life support and anaphylaxis training that is updated annually. This should include the ability for staff to familiarise themselves with the AAI. Trainer pens are available from the manufacturers
- Boarding staff must alert Matron and the Catering staff to any allergies that come to light that are not already detailed on ISAMS
- Boarding staff must adhere to individual pupil's health care plans and should inform staff, parents and pupils associated with the boarding house of the importance of not bringing known allergens into the Boarding House environment where there is a risk of serious harm to a pupil or member of staff.

- House Staff are required to read and familiarise themselves with all aspects of the Allergen and Anaphylaxis Policy and the relevant sections of the Boarding Handbook and House Risk Assessment

9.1 BOARDING HOUSE: PUPILS WITH FOOD ALLERGIES:

Special care must be taken to ensure that food and snack provision is closely monitored where there are pupils with known allergies.

The following mitigations are in place to minimise the risk of foods containing known allergens (including nuts) from being introduced into a House:

- A list of all pupils in the School with known allergies is circulated at the beginning of the Academic Year by Matron (information drawn from ISAMS)
- A list (with photos) of all pupils in the school who suffer from allergies is kept in the Boarding Office
- When there is a pupil with a severe allergy:
 - Boarding Staff contacts parents of pupil(s) who have severe allergies for additional advice on what to avoid
 - Boarding Staff contacts all parents of pupils who are boarding to request that they and their children do not bring known allergens into the boarding house
 - All pupils are informed not to bring into the boarding house any products that may contain known allergens. It should be noted that Edgeborough is a nut free school.
- Posters containing the list of known food allergens should be displayed in kitchens
- All staff, including tutors and cleaners must be vigilant for products containing known allergens around the boarding house
- Nuts: the School does not allow any nuts on site

NOTE: As so many products are labelled "may contain nuts / traces of nuts" or "This product is made in a factory that uses nuts," it is impossible to guarantee a completely nut free environment and those with allergies should exercise caution and ask a member of staff if they are uncertain about the ingredients in a particular foodstuff.

Boarding Staff should conduct Food Hygiene Training if they are involved in cooking or preparing food for pupils in the boarding house.

All Boarding staff should be aware of those pupils in the boarding house with allergies and be familiar with the Allergen and Anaphylaxis Policy and the location of emergency Anaphylaxis Auto Injector pens.

10. SCHOOL TRIPS AND SPORTS FIXTURES:

- All pupils who require AAls for 'severe allergic reactions' must have their medication and the personalised healthcare plan taken on any trip away from the School. Those staff responsible for the out of school visit must make themselves aware of the pupil and familiarise themselves with the health care plan. Also, they must ensure that they have the two AAls with them prior to setting off on the trip.
- A copy of the healthcare plan is provided by Matron and will be with the AAls

- If the AAI needs to be used on the trip, 999 MUST be called and the pupil taken to A&E
- Allergens will be clearly labelled on catered packed lunches

11. INSECT STINGS:

- If a pupil is known to have an allergy to insect stings that could lead to anaphylaxis an individual Healthcare plan will be made with an associated risk assessment

12. ANIMALS:

- It is normally the danger that causes a person with an animal allergy to react
- If a pupil is known to have an allergy to animals, an individual Healthcare plan will be made with an associated risk assessment

13. ALLERGIC RHINITIS/ HAYFEVER:

- If a pupil presents with suspected seasonal pollen allergy and / or hayfever and persistent nasal allergy due to house dust mites, Matron will recommend that parents seek medical advice. Depending on severity this may be associated with a Healthcare plan.

14. ASTHMA:

- If a pupil is known to have asthma an individual Healthcare plan will be made with an associated risk assessment

15. INCLUSION AND MENTAL HEALTH:

Allergies can have a significant impact on mental health and wellbeing. Pupils may experience anxiety and depression and are more susceptible to bullying.

- No child with allergies should be excluded from taking part in a school activity, whether on the school premises or a school trip
- Pupils with allergies may require additional pastoral support including regular check-ins from their Form Teacher/Form Tutor/Matron or Pastoral team
- Affected pupils will be given consideration in advance of wider school discussions about allergy and school Allergy Awareness initiatives
- Bullying related to allergy will be treated in line with the School's Anti-Bullying Policy

16. VISITORS TO THE SCHOOL:

- It is the responsibility of the accompanying adult of any visiting pupils to the School to ensure that they are aware of their pupils' allergens and avoid them as required
- If they are prescribed AAI's it is important that they carry them when on site and make the receiving Edgeborough Staff aware.

17. TRAINING:

All pupil-facing staff will receive annual training through Kitt Medical in the usage of AAI's through compulsory online training. In addition, on request, Matron will provide in-person support.