



Equality Impact Assessment (EIA) Part 1: EIA Screening

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|---|-----------------|-------------------------|-----------------|
| Policies, Procedures or Practices: | Allergy | DATE: | Nov 2021 |
| EIA CARRIED OUT BY: | Katherine Marks | EIA APPROVED BY: | Katherine Marks |

Groups that may be affected:

| Are there concerns that the policy could have a different impact on any of the following groups? (please tick the relevant boxes) | Existing or potential adverse impact | Existing or potential for a positive impact |
|---|--------------------------------------|---|
| Age (young people, the elderly; issues surrounding protection and welfare, recruitment, training, pay, promotion) | | |
| Disability (physical and mental disability, learning difficulties; issues surrounding access to buildings, curriculum and communication) | | |
| Gender reassignment (transsexual) | | |
| Marriage and civil partnership | | |
| Pregnancy and maternity | | |
| Racial groups (consider: language, culture, ethnicity including gypsy/traveller groups and asylum seekers) | | |
| Religion or belief (practices of worship, religious or cultural observance, including non-belief) | | |
| Sex (male, female) | | |
| Sexual orientation (gay, lesbian, bisexual; actual or perceived) | | |

Any adverse impacts are explored in a Full Impact Assessment

FRENCHAY C OF E PRIMARY SCHOOL

Believe, Belong, Become

Taken from Hebrews 10:24-25

'And let us consider how we may spur one another on toward love and good deeds'

Allergies Policy

Policy created: September 2017

To be reviewed: November 2023 (review every 2 years)

Adopted by Governors:

The school is committed to pupil safety and therefore has created this policy to reduce the risk of children having allergy related events while in its care.

Aims

- To reduce the likelihood of a pupil with a known food allergy displaying a severe reaction to a specific food while in school.
- To foster an understanding of and sense of responsibility for the specific needs of the individual members of the school community.
- To create an awareness of the action to take should someone with a severe food allergy display its symptoms.

On entry to the school parents are required to inform the school of any known food allergies that their child has.

This information is entered on the schools data base from the enrolment form.

Parents of children with an allergy will be given a copy of this policy.

Parents should update this information if an allergy is diagnosed at any stage in their child's education.

Parents will be given a yearly reminder at the end of the academic year to update allergy information and equipment.

Parents must advise the school of the action that should be taken if their child develops the symptoms of an allergic reaction while in school.

All members of staff are given the names of children who have specific food allergies through the confidential information sheets issued at the beginning of each school term.

Photographs of pupils who suffer from severe food allergies are displayed in the staff room, the canteen staff's kitchen, the child's classroom and the dining room. These will include details of action to be taken in the event of a reaction. (With permission of parents following GDPR regulations)

The school will provide training to enable staff to recognise the symptoms of an allergic reaction and to respond appropriately.

All staff have been trained in the use of the EIPEN should a child with a known food allergy go into anaphylaxis.

All parents are advised to ensure that their child does not bring nuts or foods containing nuts into school. Parents should send fruit or vegetable snacks or snacks that are store bought and have an ingredients list on the food label.

Parents' role:

Parents are responsible for providing, in writing, on-going accurate and current medical information to the school.

Parents are to send a letter confirming and detailing the nature of the allergy; including:

- * The allergen (the substance the child is allergic to)
- * The nature of the allergic reaction (from rash, breathing problems to anaphylactic shock)
 - *What to do in case of allergic reaction, including any medication to be used and how it is to be used.
- * Control measures – such as how the child can be prevented from getting into contact with the allergen.
- * If a child has an allergy requiring an EpiPen, or the risk assessment deems it necessary, an Individual Health Care Plan (drawn up by medical experts such as the school nurse) must be completed and signed by the parents.
- * It is the responsibility of the Parent to provide the school with up to date medication / equipment clearly labelled in a suitable container with their child's photo on.
 - *In the case of life saving medication like EpiPens the child will not be allowed to attend without it.
- * Parents are also required to provide up to date emergency contact information.
- *It is their responsibility to ensure that the contents of food or snacks brought in by the child are safe for the child to consume.
- * Parents should liaise with Staff about appropriateness of snacks and any food-related activities (e.g. cooking, birthday celebration food)
- * Wrist bands showing the allergen for those with life threatening allergens can be worn by children if the parents wish.

Staffs' role:

Staff are responsible for familiarising themselves with the policy and to adhere to health & safety regulations regarding food and drink.

* If a child's Enrolment Form states that they have an allergy requiring an EpiPen then an Individual Health Care Plan is needed. It must be in place before the child starts attending sessions.

* Upon determining that a child attending school has a severe allergy, a team meeting will be set up as soon as possible where all staff concerned attend to update knowledge and awareness of child's needs.

* All staff including students and supply staff that come into contact with the child will be made aware of the signs and symptoms of allergic reactions (see appendices), what treatment/medication is required by the class teacher or the school office staff and where any medication is stored.

* Class teachers will discuss allergy information with all children in the class so that they are all aware of their class mates' allergies and the need to be vigilant. When appropriate this will also be a whole school discussion.

* All staff are to promote hand washing before and after eating.

* Place mats are used in the dining hall for those with allergens, displaying photos and allergy information for all staff and children to be aware of.

* Staff cannot guarantee that foods will not contain traces of nuts or other allergens. However, a policy of vigilance is paramount to reduce risk and manage allergens in all forms.

* All tables are cleaned with an approved solution.

* Children's hands are cleaned with appropriate wipes on leaving the hall.

* Children are not permitted to share food.

* As part of the staff training, EpiPen use and storage has been discussed.

* We may ask the parent for a list of food products and food derivatives the child must not come into contact with.

* Emergency medication should be easily accessible, especially at times of high risk.

* Staff should liaise with parents about snacks and any food-related activities e.g. cooking.

* Spot mats can be used by pupils when sitting in the hall for PE, worship etc. to reduce risk of contamination from the floor.

* Risk assessment created for the class where the child with allergens works.

* If instances of alternative provision are required, such as the impact of COVID, a further risk assessment will be made in light of eating food in classrooms. Carpets will be hoovered where necessary and tables and chairs wiped down in cases of extreme allergies. (See Risk assessment in such cases.)

Actions

In the event of a child suffering an allergic reaction:

*We will delegate someone to contact the child's parents.

*If a child becomes distressed or symptoms become more serious telephone 999.

* Keep calm, make the child feel comfortable and give the child space.

* If medication is available it will be administered as per training, in conjunction with the administering medications guidelines in the Health & Safety Policy and in line with the child's emergency action plan.

* If parents have not arrived by the time ambulance arrives, a member of staff will accompany the child to hospital.

Role of other parents

* Snacks and lunches brought to the school by other parents should be peanut and nut free.

* The school will ensure that parents are regularly reminded and will monitor the contents of lunchboxes and snack.

*Any birthday treats provided for classes by parents should be wrapped; store bought treats and should be nut free. These will be handed out at the end of the day for parents to decide if their child is allowed to eat them.

Katherine Marks

November 2021

To be reviewed after 2 years

Review November 2023

Appendices



Symptoms of anaphylaxis

Anaphylaxis usually develops suddenly and gets worse very quickly.

The symptoms include:

- feeling lightheaded or faint
- breathing difficulties – such as fast, shallow breathing
- wheezing
- a fast heartbeat
- clammy skin
- confusion and anxiety
- collapsing or losing consciousness

There may also be other allergy symptoms, including an itchy, raised rash (hives), feeling or being sick, swelling (angioedema), or stomach pain.

Source:- www.nhs.co.uk



Frequently Asked Questions from Allergy UK Schools

Q. Do we need a nut free school, or what is the best approach to deal with this issue?

A. A complete nut free school is an artificial environment that would not be the same as the 'real world'. We believe that a 'whole school awareness of Allergy' is a much better approach, as it will make teachers, pupils and all other staff aware of what allergy is, the importance of avoiding the child/young persons triggers, the signs & symptoms, how to deal with allergic reactions and facilitate 'duty of care' procedures to minimise risk.

Q. How can a child's school ensure their safety from a severe allergic reaction?

A. Avoidance of the child's allergic trigger is key, but there are rarely any absolute certainties in life so by having allergy awareness, clear policy and procedures that recognise the allergic child and a clear management pathway of what to do if that child has an allergic reaction, risk can be minimised and situations can be promptly dealt with in the most appropriate way.

Q. We have to isolate children at lunchtime, due to concerns they will have an allergic reaction to food in the canteen. Is this the best approach?

A. In the world outside school people with allergy are not isolated. Education in safe management should enable pupils with allergy to be integrated not isolated.

Further useful information can be found at:- www.allergyuk.org