



Allergens Policy
June 2024



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This policy will be reviewed annually	
Policy reviewed:	June 2024 by A.Morrison & S.Lisk
Next review:	June 2025 by A.Morrison & S.Lisk

Introduction

Food allergies are becoming increasingly common, although severe allergic reactions are relatively rare and most commonly caused by only a handful of foods. Wimbledon Common Preparatory School aims to provide as safe an environment as is reasonably possible for pupils, staff, and visitors. This policy sets out the school's measures to manage the risks of allergic reactions.

Allergies

The following 14 food allergens have been identified as public health concerns in the UK:

1. Peanuts
2. Nuts
3. Fish
4. Eggs
5. Crustaceans
6. Sesame seeds
7. Milk
8. Soya (sometimes known as soybeans)
9. Celery
10. Mustard
11. Lupin
12. Added sulphur dioxide and sulphites
13. Cereals containing gluten
14. Molluscs

Further details of these allergens are given in the annex A. Of these, peanuts and nuts are believed to be the most concerning allergens where an allergic reaction can be triggered by touching surfaces, such as computer keyboards, books or a piano, if these surfaces have previously been used by someone who has eaten peanut/nut products. Therefore, the school treats these food allergens in a different manner.

However different people can be allergic to different foods and therefore it is critical that parents inform the school of any allergies.

School's Aim

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.
- Providing ingredients for food cooked by the children at school

Parents providing food for cake sales are asked not to purchase items with nuts or add nuts if homemade. Those individuals with allergies are advised not to eat food at these events. Pupils are only allowed to purchase cakes if they are accompanied by their parent or guardian.

School Trips. The school cannot control the use of food allergens on trips where food is prepared by external organisations. The staff organising the trip are to be made aware of any pupils on the trip with allergies and both the staff and pupils are to ask for advice when purchasing or being provided with food. Parents/guardians will be asked to give permission for their son to eat snacks whilst on school trips, e.g. match teas at sports fixtures, lunch at outward-bound trips through the confidential health questionnaire.

Responsibilities

The school has a number of pupils who have food allergies. Everyone in the community has a role in minimising the chances of an allergic reaction.

School's Responsibilities.

The school is responsible for the following:

All staff will be aware, if informed, of every pupil with an allergy and will:

- Develop and implement the medical policy in support of pupils with allergies
- Educate staff on the risks, prevention and responses to anaphylaxis
- Alongside parents, assist with the education of pupils with allergies
- Provide first line medical support to those with allergies
- Provide staff with appropriate training
- Provide the necessary medical information to teaching staff
- Trip Organisers. Members of staff organising trips, including away sports fixtures, will:
 1. Hold information on pupil allergies
 2. Arrange for the pupils' emergency medication to be taken on the trip and a nominated person to be responsible for looking after medication with or near to the person requiring the medication at all times
 3. Know what to do in the event of an allergic reaction
 4. Have details of those children who have not been given permission to consume food or drink that has not come from home.

Family's Responsibility.

We ask the parents of pupils with allergies to:

- Notify the school of the pupil's allergies. This should be done before the start of the first school term and thereafter if there have been any changes
- Provide the school with an adrenaline auto-injector, clearly labelled with the pupil's name
- Replace such medication after use or upon expiry
- Educate the pupil in self-management of his allergy, including: which foods are safe and unsafe
- Understand the symptoms of allergic reaction
- Know how and when to tell adults about a reaction
- Know how to read food labels or to ask an adult to read the label

- Provide emergency contact information and inform the school of any change

Pupil's Responsibility.

We ask each pupil with a food allergy to be proactive in the care and management of their food allergies and reactions and, in particular:

- Not to exchange food with others
- To wash their hands before eating in case of contamination
- Notify an adult immediately if they eat something they believe may contain the food they are allergic to
- Notify an adult immediately if they believe they are having a reaction, even if the cause is unknown

Parents of non-allergic children.

All parents are asked to be aware of the issue of allergens and in particular:

- Ensure that any food brought into school for sale is clearly labelled with the ingredients
- Not provide products with nuts to pupils for taking into school

Response to an allergic reaction

- Any member of staff who has any concerns about a pupil presenting with even a minor reaction should send them, accompanied by an adult to a first aider
- In the event of any allergic reaction involving nuts then the member of staff should call for a first aider who will decide if an ambulance is necessary. If a first aider is not available an ambulance should be called immediately.

Training/Awareness

Medical staff will be provided with specialist training on dealing with allergens and allergic reaction. This training is updated every 3 years.

All members of the teaching staff will be provided with allergen awareness training every 3 years. The next training is due to take place August 2026.

Serious reactions include:

- swelling of throat and mouth
- difficulty in breathing due to swelling
- closing up of the throat or severe asthma
- wheeziness
- difficulty in swallowing and speaking
- sudden feeling of weakness and dizziness (drop in blood pressure)
- skin pale
- sense of impending doom
- collapse and unconsciousness

These often occur along with some of the following:

- areas of hives anywhere on the body
- generalised flushing of the skin
- swelling of the lips, eyelids or face
- abdominal cramps, nausea and vomiting

If any of the symptoms above occur:

- Stay calm
- Call an ambulance 999 and report a severe allergic reaction.
- Ask a staff member to contact a first aider and collect the pupil's emergency medication.
- The first aider or member of staff will deliver medication if he/she has been trained. Instructions on how to deliver medication will be on the adrenaline auto-injector or if no-one present to support seek advice from the emergency services on how to administer the adrenaline auto-injector
- Monitor pupil's condition and observe for DRABC:
 - Danger
 - Response
 - Airway
 - Breathing
 - Circulation – if absent cardiopulmonary resuscitation (CPR) may be required.
- A second dose of adrenaline auto-injector may be required after 10 minutes if the condition has not improved and help has still not arrived.
- If the pupil is conscious sit them up to aid breathing. If the pupil has collapsed lie them down and raise legs to restore blood pressure or if unconscious and breathing lay them on their side in the recovery position
- Ensure that used adrenaline auto-injectors are kept in a sealed rigid container and take to A&E to show staff what has been used. Note the time that the injection was delivered.

Insect Sting Allergy

Symptoms

A bee or wasp sting may cause a large swelling at the site of the sting. This is not dangerous provided that the sting site is not on the face or in the airway that might be obstructed by the swelling. A few people (less than 0.5% of the U.K. population) may experience a severe, generalised allergic reaction known as anaphylaxis. The bee leaves its stinger (with venom sac attached) in the victim. Because it takes a few minutes for all the venom to be injected, quick removal of the stinger is important and can be done with one quick scrape of the fingernail or a credit card.

Avoiding insect stings:

Pupils who are allergic to insect stings should try to prevent putting themselves at risk.

Here are some steps that could be taken:

Wear shoes at all times when outdoors.

Avoid using strong perfumes during the summer. Many products, such as suntan lotions, soaps, hairsprays, hair tonics and other cosmetics, contain strong perfumes which attract insects.

If possible, keep arms and legs covered.

If a bee or wasp comes near, do not try and swat the insect but move away slowly and calmly. If the insect lands on you, try not to panic. Keep calm and be patient. The insect will usually fly away after a few seconds

Make sure that you leave no crumbs or drink on your face, which will interest the insect. If you are planning to eat outside, check to find an area where there are no wasps or bees before you start eating. It is better to bring your picnic inside than to risk being stung.

Food attracts insects. When outside, avoid open rubbish bins, and keep food covered.

Always look at what you are eating before you take a bite or a sip of a drink as wasps will slip into food and even into open drink cans.

Boxed drinks with a straw may be safer but keep an eye on the straw.

Treatment of insect stings

Local reactions, however large and painful, will usually respond to an antihistamine. The treatment for a generalised allergic reaction is adrenaline (also known as epinephrine) because this must be administered without delay.

If the pupil's symptoms are severe, he/she should not move around, but should lie down with their legs raised.

Non-food causes include wasp or bee sting, natural latex (rubber), and certain drugs such as penicillin. Exercise can trigger a severe reaction in some people, either on its own or in combination with other allergens in food or drugs. Sometimes the cause of the reaction is not found and is labelled "idiopathic anaphylaxis"

Symptoms can start within seconds of exposure to the allergen, but on rare occasions there may be a delay of a few hours. In schools the key to prevention of anaphylaxis is through awareness of the pupils who have been diagnosed at risk, awareness of their allergens, and preventing exposure to those allergens.

Adrenaline given through an adrenaline auto-injector (such as an EpiPen or Jext) into the muscle of the outer mid-thigh is the most effective first aid treatment for anaphylaxis.

Symptoms and first aid treatment of anaphylaxis

Mild reactions may involve:

- slight tingling in the mouth
- streaming eyes
- sniffles
- localised rash
- hives or swelling
- some nausea and possible slight sickness

If any of the symptoms above occur:

- Stay calm
- Stay with the pupil. Only escort the pupil to the medical room if in close proximity and the pupil is not too distressed and is able to walk. NEVER send a pupil with suspected anaphylaxis, unescorted to the medical room.

- Send for an experienced first aider (Mrs Lisk, Mr Morrison or Mr Forbes) giving the name of the pupil and class. This will help identify which classroom the auto-injector will be in.
- Send another member of staff to collect the pupil's emergency medication pack and follow the instructions

Pupils with these symptoms will be given antihistamine syrup as prescribed and observed in the medical room and parents/guardians will be notified. Mrs Lisk, Mr Morrison or Mr Forbes will decide if an ambulance should be called.

Annex I 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	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.