  

Fitzmaurice Primary School Allergy Protocol Checklist

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|  | **Checklist** | **Date completed** |
| 1. | **Training**On admittance of a child with allergies, check if annual allergy training is in place. If it’s not in place already, organise AllergyWise training for all staff (both teaching and non-teaching):Free courses available at:-<https://www.allergywise.org.uk/> Information and Factsheets:-<https://www.anaphylaxis.org.uk/information-training/><https://www.anaphylaxis.org.uk/campaigning/making-schools-safer-project/>  |  |
| Contact school nursing service to see what training support is available. |  |
| Obtain free trainer adrenaline auto-injectors for the brands held in school:- <http://www.epipen.co.uk/patients/my-epipenr-resources/><https://adults.jext.co.uk/order-trainer-pen/>  |  |
| 2. | **Parents and children/young people**Meet parent/carer of each child/young person with allergy to complete individual risk assessment (to be reviewed at least yearly).Download template Annual Risk Assessment here:- <https://www.anaphylaxis.org.uk/campaigning/making-schools-safer-project/>  |  |
| Ensure all new staff read and understand individual risk assessments when joining school. |  |
| Ensure up to date allergy action plan is in place (working with parents and appropriate healthcare professional e.g. allergy specialist/GP/School Nurse) and request copies along with any relevant letters to be kept in school.Download template Allergy Action Plan here:-<https://www.bsaci.org/professional-resources/resources/paediatric-allergy-action-plans/>  |  |
| Agree whether to inform class and parents about the child/young persons’ allergy and how i.e. letter home.Template letters available here:-<https://drive.google.com/file/d/1jfxTWty4FuXaT0bxO7b0H2Uep1NKFe8L/view?usp=sharing><https://drive.google.com/file/d/1qUK4FavVB4HR30YpqSq8CcmFj74bca1l/view?usp=sharing> |  |
| 3 | **Education and Awareness**Consider an allergy awareness assembly - decide who for e.g. whole school, Key Stage, year group. Before naming a child/children obtain their and their parents’ permission. Assembly materials available here:-<https://www.anaphylaxis.org.uk/campaigning/making-schools-safer-project/> |  |
| Consider allergy awareness lessons - decide who for e.g. whole school, Key Stage, year group, individual class. Before naming a child/children obtain their and their parents’ permission.NB: The statutory Relationships & Sex Education (RSE) curriculum includes Health & Prevention (this includes pupils knowing the facts and science relating to allergies)Allergy awareness lesson resource packs are available to download here:- <https://www.anaphylaxis.org.uk/campaigning/making-schools-safer-project/> |  |
| Consider 1st Aid training for children - decide who for e.g. whole school, Key Stage, year group, individual class. Ensure that allergy management is included: what is an allergic reaction, how to help, what does an adrenaline auto-injector (AAI) look like, how does it work.NB: The statutory RSE curriculum includes Basic First Aid (this includes pupils knowing how to make a clear and efficient call to emergency services if necessary)St John Ambulance provide free resources for KS2–4 available here:- <https://www.sja.org.uk/get-advice/first-aid-lesson-plans/>  |  |
| 4 | **Adrenaline Auto-Injectors**To consider:* Does the child have two of their own prescribed AAIs?
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| * How will AAIs be stored? e.g will the child carry their own or stored in central safe location (not locked away)
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| * Does the school need to purchase ‘spare’ pens as back-ups? – [www.sparepensinschools.uk](http://www.sparepensinschools.uk)
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| * Do all staff know the location of the AAIs?
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| * Is there a system in place to monitor expiry dates and replace when needed?
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| * How will you plan for schools trips/sporting events etc to ensure AAIs always available?
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| 5 | **Safeguarding**To consider:* Are children with medical conditions included as a vulnerable group within safeguarding training?
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| * Are children with medical conditions included as a vulnerable group within the school’s safeguarding policy?
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| * Does the school’s safeguarding policy link to the medical conditions policy?
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| 6 | **Inclusion and Bullying**To consider:* How does the school ensure that the child/young person with the allergy is fully included?
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| * What messages do the staff give out through their actions? i.e. do they make sure that the child/young person is fully included.
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| * Are allergies included in the anti-bullying policy?
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| * How are allergy bullying incidents responded to?
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| 7 | **Policy and Protocols**To consider:* Is there a medical conditions policy that links to Supporting Children with Medical Conditions in schools 2017? Has it been reviewed?
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| * Does the medical conditions policy have an allergy appendix? Has it been reviewed?
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| * Does the allergy appendix contain the following?
* Staff training
* Education and Awareness
* Relationships with parents/carers and young people/children
* Emergency action plan
* AAI storage, accessibility, spare pens, expiry dates etc
* Safeguarding & Inclusion
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**Food Allergy Specific considerations:-**

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| 8 | **School Catering**Is up to date allergen information available for each menu and easily accessible, ideally online? |  |
| Has communication taken place between parent, school and caterer to agree roles and responsibilities for managing catering requirements? |  |
| Has a catering risk assessment been carried out? |  |
| Are all catering and lunchtime staff trained in allergen management? |  |
| Is a method/s in place to identify the pupil with the allergy at mealtimes? |  |
| 9 | **Food in School**Is there a ‘no sharing’ food policy in place that all children understand? |  |
| Consider discouraging cake and sweets for children as treats both for birthdays and school celebrations |  |
| Review use of food in the curriculum. Does this need to be used and if it does, how are all children included? |  |
| Consider whether the school needs a ‘safe from zone’ or whether allergens can be managed safely during break and lunchtimes. |  |
| Complete allergen bans can be difficult to enforce and impractical for some common allergens like milk and egg – consider an awareness and education approach instead. |  |