

# Wise Owls Allergy Policy

‘A safe space to play, explore and grow’

## Policy Statement

An allergy is a reaction of the body’s immune system to substances that are usually harmless. The reaction can cause minor symptoms such as itching, sneezing or rashes and sometimes causes a much more serious reaction called anaphylaxis.

Anaphylaxis is a serious, life-threatening allergic reaction. It is at the extreme end of the allergic spectrum. The whole body is affected often within minutes of exposure to the allergen, but sometimes it can be hours later. Causes can include foods, insect stings, and drugs.

Most healthcare professionals consider an allergic reaction to be anaphylaxis when it involves difficulty breathing or affects the heart rhythm or blood pressure. Anaphylaxis symptoms are often referred to as the ABC symptoms (Airway, Breathing, Circulation).

It is possible to be allergic to anything which contains a protein, however most people will react to a fairly small group of potent allergens.

Common UK Allergens include (but are not limited to): - Peanuts, Tree Nuts, Sesame, Milk, Egg, Fish, Latex, Insect venom, Pollen and Animal Dander.

This policy sets out how Wise Owls will support children in our care with allergies, to ensure they are safe and are not disadvantaged in any way whilst taking part in nursery activities. The risk of anaphylaxis presents a challenge to any setting, but with sound precautionary measures and support, a child’s care should continue as normal for all concerned.

## Allergy Role and Responsibilities

### Parent Responsibilities

- On registration it is the parent’s responsibility to inform the setting of any allergies. This information should include all previous serious allergic reactions, *any* history of anaphylaxis and details of all prescribed medication.
- Parents are to supply a copy of their child’s Individual Health Care Plan (IHCP) to the Setting. This must be transferred into our Wise Owls IHCP template. If they do not currently have an Individual Health Care Plan this should be developed as soon as possible in collaboration with a healthcare professional (e.g. GP/Allergy specialist/Consultant) and Wise Owls Childcare.
- Parents are responsible for ensuring any required medication is supplied, in date and replaced as necessary.
- Parents are requested to keep the nursery up to date with any changes in allergy management. The Individual Health Care Plan will be kept updated accordingly.

### Staff Responsibilities

- All staff will complete Allergy Awareness training. Training is refreshed for all staff every 3 years and is mandatory training for any new members of staff.
- Staff will be made aware that Children in their care who have known allergies, can have an allergic reaction at any time and not just at mealtimes. Any food-related activities must be supervised with due caution.

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- Staff leading trips will ensure they carry all relevant emergency supplies.
- Setting Manager will ensure that the up-to-date Individual Health Care Plan is kept with the child’s medication. The keyworker of the child who has the allergen and requires medication will ensure the medication is always close by to the child. The medication will be passed to a keyworker buddy should the keyworker need to leave the room.
- It is the parent’s responsibility to ensure all medication is in date however the keyworker will check medication kept at the setting on a termly basis and send a reminder to parents if medication is approaching expiry.
- Setting Manager keeps a register of children who have been prescribed an adrenaline auto-injector (AAI, EpiPen or similar) and a record of use of any Epi-pens and emergency treatment given.

## Risk Assessment

Wise Owls Childcare will conduct an individual risk assessment for each child before they attend the setting. If the child develops an allergy during their attendance at the setting, we will conduct the risk assessment at the earliest possible opportunity.

## Individual Health Care Plan

Wise Owls Childcare will complete a detailed Individual Health Care Plan for each child with an allergy before they attend the setting. If the child develops the allergy during their attendance whilst in our care we will complete the Individual Health Care Plan at the earliest possible opportunity.

Individual Healthcare Care Plans for children with food allergies indicate medical and parental consent to administer medicines in the event of an allergic reaction.

## Emergency Treatment and Management of Anaphylaxis

### What to look for:

Symptoms usually come on quickly, within minutes of exposure to the allergen.

Mild to moderate allergic reaction symptoms may include:

- a red raised rash (known as hives or urticaria) anywhere on the body
- a tingling or itchy feeling in the mouth
- swelling of lips, face or eyes
- stomach pain or vomiting.

More serious symptoms are often referred to as the ABC symptoms and can include:

**AIRWAY** - swelling in the throat, tongue or upper airways (tightening of the throat, hoarse voice, difficulty swallowing).

- **BREATHING** - sudden onset wheezing, breathing difficulty, noisy breathing.
- **CIRCULATION** - dizziness, feeling faint, sudden sleepiness, tiredness, confusion, pale clammy skin, loss of consciousness.

The term for this more serious reaction is anaphylaxis. In extreme cases there could be a

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dramatic fall in blood pressure. The person may become weak and floppy and may have a sense of something terrible happening. This may lead to collapse and unconsciousness and, on rare occasions, can be fatal.

If the child has been exposed to something they are known to be allergic to, then it is more likely to be an anaphylactic reaction.

Anaphylaxis can develop very rapidly, so a treatment is needed that works rapidly. **Adrenaline** is the mainstay of treatment, and it starts to work within seconds.

What does adrenaline do?

- It opens up the airways
- It stops swelling
- It raises the blood pressure

**As soon as anaphylaxis is suspected, adrenaline must be administered without delay.**

**Action:**

- Keep the child where they are, call for help and do not leave them unattended.
- **LIE CHILD FLAT WITH LEGS RAISED** – they can be propped up if struggling to breathe but this should be for as short a time as possible.
- **USE ADRENALINE AUTO-INJECTOR (AIs, EpiPen or similar) WITHOUT DELAY** and note the time given.

AAIs should be given into the muscle in the outer thigh. Specific instructions vary by brand – always follow the instructions on the device.

- **CALL 999** and state **ANAPHYLAXIS (ana-fil-axis)**.
- If no improvement after 5 minutes, administer second AAI (EpiPen or similar).
- If no signs of life commence CPR.
- Call parent/carer as soon as possible.

Whilst you are waiting for the ambulance, keep the child where they are. Do not stand them up, or sit them in a chair, even if they are feeling better. This could lower their blood pressure drastically, causing their heart to stop.

All children must go to hospital for observation after anaphylaxis even if they appear to have recovered as a reaction can reoccur after treatment.

## Supply, Storage and Care of Medication

Medication should be stored appropriately and clearly labelled with the child's name

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The pupil's medication pack should contain:

- Two AAIs i.e. EpiPen® or Jext® or Emerade®
- An up-to-date Individual Health Care Plan
- Antihistamine as tablets or syrup (if included on Individual Health Care Plan)
- Spoon if required
- Asthma inhaler (if included on allergy action plan).

It is the responsibility of the child's parents to ensure that the anaphylaxis kit is up-to-date and clearly labelled, however the keyworker will check medication kept on site on a termly basis and send a reminder to parents if medication is approaching expiry.

Parents can subscribe to expiry alerts for the relevant AAIs (EpiPen or similar) their child is prescribed, to make sure they can get replacement devices in good time.

## Storage

AAIs (EpiPen or similar) should be stored at room temperature, protected from direct sunlight and temperature extremes.

## Disposal

AAIs (EpiPen or similar) are single use only and must be disposed of as sharps. Used AAIs can be given to ambulance paramedics on arrival or can be disposed of at a local pharmacy.

Expired AAIs will be returned to the parents for them to dispose of.

Written parental permission for use of the spare AAIs is included in the child's Individual Health Care Plan.

If anaphylaxis is suspected **in an undiagnosed individual** call the emergency services and state you suspect ANAPHYLAXIS. Follow advice from them as to whether administration of a spare AAI is appropriate.

## Staff Training

All new staff will complete online allergy awareness training, and this training will be refreshed every 3 years. All staff will also receive paediatric first aid training, and this training will be refreshed every 3 years.

## Inclusion and safeguarding

Wise Owls is committed to ensuring that all children with medical conditions, including allergies, in terms of both physical and mental health, are properly supported so that they can play a full and active role in Wise Owls.

## Catering

All food businesses (including setting caterers) must follow the Food Information Regulations 2014 which states that allergen information relating to the 'Top 14' allergens must be available for all food products.

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After completion of an IHCP and Risk Assessment the Setting Manager will discuss the allergens of the child with the catering company.

Menus will be adapted to cater to the specific needs of each child in our care and any challenges will be discussed with Parents/Carers.

Wise Owls Childcare adheres to the following Department of Health guidance recommendations:

Staff are educated about how to read labels for food allergens and instructed about measures to prevent cross contamination during the handling, preparation and serving of food. Examples include: preparing food for children with food allergies first; careful cleaning (using warm soapy water) of food preparation areas and utensils.

Food should not be given to food-allergic children without parental engagement and permission (e.g. birthday parties, food treats).

Use of food in crafts, cooking classes, science experiments and special events (e.g. cultural events) needs to be considered and may need to be restricted/risk assessed depending on the allergies of particular children and their age.

## Outings

Staff going on outings with the children will ensure they carry the child’s medication, emergency contact details, the risk assessment and the IHCP. All the activities on the outing will be risk assessed to see if they pose a threat.

## Allergy awareness and nut bans

Wise Owls Childcare operate a nut free environment. We do not allow nuts into the setting, and this extends to staff lunches.

Natasha’s Law (October 2021) Requires all packaging to have clearly marked allergens, as all of our food we serve on site is from a local supermarket, this is clearly labelled and checked. Any catering companies we use display their ingredients on the food delivered.

## Food Hygiene:

- All staff have Level 2 food hygiene training, refreshed every 3 years
- All staff have allergen awareness training, refreshed every 3 years
- We are routinely inspected by the ‘Food standards Agency’ and have our hygiene rating displayed
- All staff follow the guidelines of *Safer Food Better Business*  
<https://www.food.gov.uk/business-guidance/safer-food-better-business-sfbb>.
- The person responsible for food preparation and serving carries out daily opening and closing checks on the kitchen to ensure standards are met consistently.
- We use reliable suppliers for the food we purchase.
- Food is stored at correct temperatures and is checked to ensure it is in-date and not subject to contamination by pests, rodents or mould.

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- Food preparation areas are cleaned before use as well as after use.
- There are separate facilities for handwashing and for washing up.
- All surfaces are cleaned regularly.
- All utensils, crockery etc are clean and stored appropriately.
- Waste food is disposed of daily.
- Cleaning materials and other dangerous materials are stored out of children's reach.
- Children do not have access to the kitchen.
- When children take part in cooking activities, they:
  - are supervised at all times.
  - understand the importance of hand washing and simple hygiene rules
  - are kept away from hot surfaces and hot water; and
  - do not have unsupervised access to electrical equipment such as blenders etc.

## Useful Links

- Anaphylaxis UK - <https://www.anaphylaxis.org.uk/>
- Allergy UK - <https://www.allergyuk.org>
- Department for Education Supporting pupils at school with medical conditions - [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/803956/supporting-pupils-at-school-with-medical-conditions.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/803956/supporting-pupils-at-school-with-medical-conditions.pdf)
- Food allergy quality standards (The National Institute for Health and Care Excellence, March 2016) <https://www.nice.org.uk/guidance/qs118>
- Anaphylaxis: assessment and referral after emergency treatment (The National Institute for Health and Care Excellence, 2020) <https://www.nice.org.uk/guidance/cg134?unlid=22904150420167115834>
- Safer Food Better Business <https://www.food.gov.uk/document/sfbb-safer-food-better-business-for-caterers-full-pack>
- Early years foundation stage statutory framework <https://www.gov.uk/government/publications/early-years-foundation-stage-framework--2>