

Ghyllside School

Whole School Allergy Management Risk Assessment

Ghyllside School has an allergy policy which is monitored. Clear communication and procedures should be regularly communicated to all staff. Annual training is recommended when allergic students are on roll or when a student with an allergy joins the school.

Training is available from: <https://www.anaphylaxis.org.uk/allergywise/>

Policy is free to download: <https://www.anaphylaxis.org.uk/wp-content/uploads/2023/03/Model-Policy-for-allergy-at-school-v2-060323.pdf>

What are the hazards for each activity?	What are you already doing to control the risks?	Probability	Impact	likelihood
Medication:				
<u>Storage:</u> Location of each student's medication Location of generic 'spare' AAI / Epi pens Consider: • is there consistency of container throughout the school to make it easily identifiable? • Is the student able to self carry their own medication? • Is the back up medication always within 5 mins of where the students are? Are multiple sites needed for back up medication? • Is the students and back up medication always accessible regardless of the time of day?	All personal epi pens kept in the specific children's classrooms clearly labelled with all staff and children aware of their location. Medication carried by accompanying staff if children are off site. School / back up AAI / Epi pens are stored on the reception desk in school in a well labelled box. These are never locked away. Yes Allergy lead regularly checks school and personal AAI's / Epi pens to ensure they are in date	1	5	5
Training:				
Check that the course has medical input/review Training should be updated annually	Annual AllergyWise, Anaphylaxis uk, online training run for all contact staff annually.	1	5	5

Ghyllside School

Ideally all staff would be trained. If this is decided against, a rationale based on risk assessment should be produced. Consider: Will there always be a member of staff available to administer an AAI throughout the school day who is not further than 5 minutes away from the student at any given point. Course must include: • Signs and symptoms of allergy & anaphylaxis • Emergency response • Administration of adrenaline auto-injectors • Prevention of reactions Ideally would include: • Types of allergen: food and non-food • Curriculum • Trips & visits including sports • Reporting and recording AllergyWise® for Schools is a low cost, CPD certified course that is clinically review and assured to be up to date.				
Food and drink:				
<u>Catering:</u> • What systems are in place to ensure that the student eats safely? Do all the catering and lunchtime staff know who has allergies and how to ensure that they are safe. Do they know how to report near misses and what to do should a reaction occur?	We will negotiate with our meal provider to ensure all their workforce are Allergy trained. Our lunchtime supervisors are allergy trained. Our staff on break duties are Allergy trained. Children are told NOT to share food at school.	1	5	5

Ghyllside School

• What measures do you have in place for liaison with the catering contractor and lunchtime supervisory staff? • Ensure up to date allergen information is available for each menu and that it is easily accessible, ideally on school website. • Make sure that any unexpected changes to the menu and allergens are communicated urgently to student/parent/guardian so that a different choice can be made. • Ensure that allergen matrix is available and kept up to date. The FSA have a free to download one: https://www.fooddocs.com/food-safety-templates/food-allergen-chart Consider: wrap round care break times lunch times	Our lunch ordering system ensures that parents cannot order food for their children that may contain foods that their children are allergic to. We report near misses to the LA using the appropriate form.			
<u>Events involving food:</u> Cake sales Parties Other PTA events Drinks • How can these be made inclusive? • What are the risks if the allergens are present during the events? Is handwashing possible? • What information has to be shared ahead of the event to remind all about the exclusion of an allergen if this has	We do not have cake sales at Ghyllside. We do not allow nuts in school, (regularly reminded in news letters.) If children are eating nuts / products with nuts in them they are separated from other children to do so, or the food is confiscated.	1	5	5

Ghyllside School

been agreed. Allergen Matrix can be found here: https://www.fooddocs.com/food-safety-templates/food-allergen-chart Are allergens displayed, where appropriate to the event				
<u>Celebrations:</u> - Consider discouraging cake and sweets for children as treats both for birthdays and school celebrations. - Where food is used, consider the impact for the students with allergies and discuss with parent/carer/student at the earliest opportunity to plan for a safe and inclusive event.	We do not allow children to bring in treats for their class mates to celebrate their birthdays.	1	5	5
Curriculum activities:				
<u>Cooking:</u> - Adapt recipes for all to create a safe cooking space. If a recipe cannot be adapted, can a different recipe be used? - Has the allergic student got their own set of cooking materials? - Are allergies included in the food technology curriculum so that all students have awareness of the impact of allergies to the health of the allergic person. - Are all students made aware of the impact of their actions on an allergic person should the specific allergens not be excluded? - Are all students taught about cross contamination and the impact of this?	If we are cooking in school (rare) the child / we provide own ingredients, utensils, and in the case of expedition club, stove, as necessary.	1	5	5

Ghyllside School

<u>Creative activities: e.g. junk modelling, pasta</u> - When using packaging ensure that the allergens have not been in those packets; for example: crunchy nut cornflakes should not be in a classroom where a student has a peanut allergy. When students are bringing in materials from home, ensure that communication is sent to parent/carers to specify what they are unable to bring in and monitor this when the packaging comes into school. - Plastic containers should be washed in hot soapy water to remove allergens.	Cardboard 'junk' materials are screened and plastic washed before use.	1	5	5
<u>Music: instrument sharing (cross contamination issue)</u> - Do instruments have to be shared? - Do blowing percussion instruments have to be shared? How can they be sterilised if they do? Can the allergic student have their own blowing instrument that they don't need to share?	Blown instruments are not shared	1	5	5
<u>Science activities:</u> - Review the science curriculum and see where allergens are used. Consider whether these have to be used and whether there are alternates that can be used? If essential, the activity needs to be individually risk assessed for the allergic student. How can that lesson be made inclusive and safe? - Consider the impact of cross contamination and whether this could cause a reaction for the allergic student.	We avoid using allergens in the science curriculum wherever possible. If allergens 'have' to be used we carry out a specific risk assessment.	1	5	5
<u>PE:</u> Consider:		1	5	5

Ghyllside School

Indoor Outdoor Forest Schools - Where emergency medication is kept during PE and how quickly it can be accessed. If it is left in the classroom/changing room and is needed, how quickly can it be found? Is it easily identifiable and can it be with the student within 5 mins? - Is there an allergy trained member of staff present during after school clubs? - Is there an allergy trained member of staff accompanying away sporting events?	The emergency AAls / Epi pens are kept at the reception desk that is easily within 1 minute of the woods / playing field / playgrounds. All staff are allergy trained so there will be trained staff on all trips. We do not run the after school club.			
<u>Break time:</u> Consider: Playground Field - Where emergency medication is kept during PE and how quickly it can be accessed. If it is left in the classroom/changing room and is needed, how quickly can it be found? Is it easily identifiable and can it be with the student within 5 mins? - Is there an allergy trained member of staff present during after school clubs? - Is there an allergy trained member of staff accompanying away sporting events?	The emergency AAls / Epi pens are kept at the reception desk that is easily within 1 minute of the playing field / playgrounds. All personal epi pens kept in the specific children's classrooms clearly labelled with all staff and children aware of their location. All staff are allergy trained	1	5	5

Ghyllside School

School animals:				
Consider: Therapy dogs and the access they have to children with allergies. Is there an allergen free area that the student will be safe in? We have Dogs in School guidance that will assist with this section.	NA			
Visitors & supply staff:				
Consider: - Has the visitor been made aware of the school's policy? - If there is an allergy free zone that has been created due to a student's individual risk assessment, how has this been communicated to the visitor/supply staff? - Does the visitor need to know about the student's allergy? Will they be using the student's allergen? Do they need to know they have to have eliminated cross contamination from themselves through handwashing after eating?	We make all visitors aware of our allergy policy	1	5	5
Offsite activities:				
<u>Day trips:</u> Consider: - Is there a specific allergy section on the visit/experience risk assessment? - Is there an allergy trained member of staff accompanying the visit? - Storage of AAls - Availability of emergency services and nearest hospital	Children with allergies, and their provisions, are specifically mentioned in day trip or residential activities risk assessments. Remind all families not to pack allergens in lunches.	1	5	5

Ghyllside School

• Is there a good phone signal? If not, how will communication work? How will emergency services be called? • Is food being taken or served? It may be necessary to request that other students do not bring specific allergens on the trip to reduce risk during the day. Communication with venues and parent/carers to set out expectations. • Are any of the activities during the day high risk to the allergic student; inform venues and agree control measures, aim for inclusivity. <u>Residential visits included D of E:</u> Consider: • Storage of AAls for each activity being undertaken & overnight • Availability of emergency services and nearest hospital • Is there a good phone signal? If not, how will communication work? How will emergency services be called? • What food is being served? Consider cross contamination. Do any menu changes need to be made to ensure safety? Will the allergic person have sufficient to eat? Does any food need to be taken? • Can students eat food in rooms? • Is there a specific allergy section on the visit/experience risk assessment? • Is there an allergy trained member of staff accompanying the visit?	Inform any providers of served food or allergies. No snacks in rooms / tents. A specific protocol put in place with room mates / tent mates of children with allergies in the event that a member of staff is needed suddenly.			
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Ghyllside School

Do other students need to understand signs, symptoms of allergy, how to call for help and administer an AAI?				
Other:				

This must be completed for any activity that is medium with the aim of bringing the risk to LOW.

Activities that are High or Extreme must not happen unless action can be implemented to bring the risk to LOW.

Hazard	What further action do you need to take to control the risks?	Who needs to carry out the action?	What is the action needed by?	Completed

Consequence		Minor 1	Moderate 2	Major 3	Critical 4	Catastrophic 5
Likelihood	Rare 1	Low	Low	Low	Low	Low
	Unlikely 2	Low	Low	Medium	Medium	Medium
	Possible 3	Low	Medium	Medium	High	High
	Likely 4	Medium	Medium	High	High	Extreme
	Certain 5	Medium	Medium	High	Extreme	Extreme

Ghyllside School

Consequence	Minor 1	Moderate 2	Major 3	Critical 4	Catastrophic 5
This is the impact of the action being allowed to happen	No reaction	Non anaphylactic reaction	Emergency response required, ambulance and hospital	Emergency response required, ambulance and hospital	Fatal, Death

Likelihood	Definition
Rare 1	May only occur in exceptional circumstances
Unlikely 2	Could occur in some circumstances, surprised if happened
Possible 3	Possible or likely to occur in most circumstances
Likely 4	Will occur in most circumstances
Certain 5	It is expected to occur, inevitable