

POLICIES AND PROCEDURES

Managing Allergies Policy

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Approved at team meeting (date)	12/04/16
Cross Reference	CYP Registration Form, Annual Medication Review Form

Purpose of this document

To inform all trustees, staff and volunteers about how to deal with any children/young people (CYP) attending Aspired Futures (AF) sessions who may have an allergy.

Details of Policy

When AF receives a referral for a CYP an initial visit is arranged to meet the parent/carer and an AF CYP Registration Form is completed. Within the Health and Well-Being Needs section of the Registration Form parent/carers are specifically asked if their CYP suffers from any known allergies.

If a CYP has a diagnosed allergy (please see further on in this document traffic light procedure) we will liaise with parents/carers and all professionals involved to design an appropriate **personal health care plan** to include the following:

- The allergen (i.e. the substance, material or living creature the individual is allergic to such as nuts, eggs, bee stings, cats etc).
- The nature of the allergic reactions e.g. anaphylactic shock reaction, including rash, reddening of skin, swelling, breathing problems etc.
- What to do in case of allergic reactions, any medication used and how it is to be used (e.g. EpiPen).
- Control measures – such as how the CYP can be prevented from contact with the allergen.
- Review dates to ensure any changes to or any added issues we should be aware of.

This plan must be kept on the CYP's electronic personal file.

Parents/carers train staff in how to administer special medication in the event of an allergic reaction or depending on individual referrals professional medical advice regarding administering special medication will be sought.

AF avoid using nuts or nut products when cooking and snacks if we are aware CYP attending has an allergy against nuts or nut products, preventing cross contamination.

Parents/carers are made aware of our procedures for allergies and are asked not to send any food, treats or snacks into the premises with their CYP.

Parents/carers will receive information from AF in regards to new requirements in regards to food allergies (in accordance with the European Union Food Information for Consumers Regulation) and furthermore asked to

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complete an annual Medication Review to ensure that AF hold as much up-to-date information as possible (Appendix 1 and 2)

Traffic Light Procedure

AF will be committed to using a Traffic Light procedure to alert all members of staff at every session which service users have food or drink allergies. The system will highlight CYP identified by their parent/carer to have an allergy, preference or CYP that have no allergies or preferences.

The CYP in **Red** have a food allergy or intolerance.

Amber is for CYP with a preference to certain food and drink which could be due to moral, religious or other grounds specified by parent/carer, the child/young person does not become ill when consuming the restricted food or drink. The system will be displayed in the register folder, kitchen and information cupboard in Rainbow room.

At all times the administration of medication must be compliant with the Welfare Requirements of the Early Years Foundation Stage and follow procedures based on advice given in *Managing Medicines in Schools and Early Years Settings* (DfES 2005)

Oral Medication

- Oral medications must be prescribed by a GP or have manufacturer's instructions clearly written on them. The medication must be in the original container, with the name of the CYP and dosage that has been prescribed from the individual's doctor.
- Staff must be provided with clear written instructions on how to administer such medication.
- All risk assessment procedures need to be adhered to for the correct storage and administration of the medication.
- AF must have the parents /carers prior written consent by the completion of the Medication Form. This consent must be kept on the CYP's electronic file.

Life Saving Medication & Invasive Treatments

- Adrenaline injections (Epipens) for anaphylactic shock reactions (common triggers include peanuts, tree nuts, sesame, eggs, cow's milk, fish, certain fruits such as kiwifruit, and also penicillin, latex and the venom of stinging insect) or invasive treatments such as rectal administration of Diazepam (for epilepsy).
- The setting must have:
- A letter from the CYP's GP/consultant stating the medical condition and what medication if any is to be administered
- Written consent from the parent/carer allowing staff to administer medication
- Proof of training in the administration of such medication by parent/carer or medical staff depending on the referrer.

Should a severe allergic reaction occur an ambulance should always be called whether adrenaline is administered or not.



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Appendix 1

Aspired Futures Ltd
Kensington Foundation Resource Centre
The Lodge, 216 Whitegate Drive, Blackpool, FY3 9JL
Telephone: 01253 769755
Website: www.aspired-futures.com email:
office@aspiredfutures.onmicrosoft.com

Tuesday 20th January 2015

Dear Parent/Carers

We would like to inform you about new requirements for food allergies, this is part of the European Union Food Information for Consumers Regulation (EU FIC) coming into force from the 14th December 2014. The new rules require Aspired Futures to provide information on the presence of 14 allergens, if added or used as ingredients in food we prepare for the children and young people attending.

If any child or young person is diagnosed with any of the 14 allergens listed below, please inform us immediately and a personalised Health care plan including all foods offered to your child will be created for them.

14 major allergens:

Celery
Cereals containing gluten
Crustaceans
Eggs
Fish
Lupin
Milk
Molluscs
Mustard
Nuts
Peanuts
Sesame seeds
Soya
Sulphur Dioxide (sulphites)

Over the past few weeks we have been contacting you all to help us complete Health care review forms to ensure we are aware of all the children and young people's current health needs, please inform us of any changes to this immediately including allergies to ensure we can meet your child's individual needs.

If you require any further information regarding any of the above please do not hesitate to contact me anytime.

Kind Regards

Sue Williams

CYP Assessment and Inter-Agency Manager



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Appendix 2

Aspired Futures Ltd

Kensington Foundation Resource Centre

The Lodge, 216 Whitegate Drive, BLACKPOOL, FY3 9JL

Telephone: 01253 769755

Website: www.aspired-futures.com

email: Office@aspiredfutures.onmicrosoft.com

Child's name.....

Dear Parent / Guardian,

We are currently reviewing the information that we have on file for our children and young people. In order to keep our records as up to date as possible, please could you confirm whether there have been any changes in circumstances that you think we should know about. Please could you also confirm your child's medical history, providing details were appropriate. Please continue on the reverse of this letter if necessary.

Have there been any changes to your child's circumstances since they started at Aspired Futures? Yes / No
(Please circle) (If yes, please provide details below)

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Please provide details of your child's medical history. In addition to diagnosed conditions, please also provide details of any allergies that your child has.

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Does your child require medication? Yes / No (Please circle)
(If yes, please provide details below, including whether there are any **side effects** of an increase or change in medication that Aspired Futures needs to be aware of)

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Aspired Futures Ltd: a Company Limited by Guarantee (England). Registered office Aspired Futures Ltd. Kensington Foundation Resource Centre, 216 Whitegate Drive, Blackpool, FY3 9JL

Registration number 07381445 : Charity Registration number 1143507





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Please provide the name, address and telephone number of your child's GP

GP Surgery Name	GP Surgery Address	GP Telephone Number	Name of assigned GP

Please note that if your child requires an inhaler, they **MUST** bring it with them to each session that they attend. Any child who requires an inhaler but who does not have it with them will not be allowed to attend the session.

By signing this declaration, you are also confirming that you will inform Aspired Futures of any changes made to your child's diagnosis and / or medication.

Signed..... (Parent / Guardian) Date.....
Thank you for your assistance.