



## Policy Statement

### ALLERGY AND ANAPHYLAXIS AWARENESS POLICY

Date: September 2016

#### Aim

The aim of this policy is to provide, as far as practicable, a safe and supportive environment in which students at risk of anaphylaxis can participate equally in all aspects of schooling. The policy also aims to raise awareness of anaphylaxis and to provide an avenue whereby parents/carers can work with school staff to assess risks and develop risk minimisation and management strategies which cater for all members of the College community.

#### Rationale

Anaphylaxis is a rapidly progressive and severe allergic reaction which is potentially life threatening. The most common allergies in school age children are peanuts, eggs, tree nuts (e.g. cashews), cow's milk, fish and shellfish, wheat, soy, sesame, latex, certain insect stings and medications.

The key to prevention of anaphylaxis in schools is knowledge of those students who are at risk, awareness of triggers, and recognition of symptoms and prevention of exposure to those triggers. A positive partnership between school and parents with an open channel of communication is important in ensuring that certain foods or items are kept away from the student while at school. In the event of a reaction, a dose of adrenalin via an EpiPen auto injector to the muscle of the outer thigh is the most effective first aid treatment. If this is so then a call to ambulance emergency services is the automatic response or alternatively the procedure as specified by Health Care Plan, Doctor or Parent.

Due to the nature of school staffing and duty of care it essential that all staff members including temporary relief staff and specialist teachers have adequate knowledge about allergies, anaphylaxis, identified students, the school's policy, individual management plans and procedures for responding to an allergic reaction or anaphylactic emergency.

#### Implementation

Parents will be responsible for:

- Providing an Individual Allergy/Anaphylaxis Emergency Action Plan (from Australasian Society of Clinical Immunology ASCIA) for their child that has been developed in consultation with a medical practitioner prior to the child starting school. This action plan will form the basis of the SMLC Allergy/Anaphylaxis Management Plan and is to be **reviewed annually and/or renewed as necessary**.

Allergy and Anaphylaxis Awareness	REVIEW DATE: Sept 2016	Policy Updated: Electronic - S Drive; Policy List Electronic - Website (where applicable) Hard Copy - Policy Folder – Staff Room
Revision No: 1.0	NEXT REVIEW: Sept 2018	
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- Providing information at time of enrolment or soon after by way of a formal meeting with the Senior First Aid Officer or a representative of the school. This meeting must take place at least 2 week before the child starts school.
- Providing at least one **current** EpiPen for use at school and ensuring the timely replacement of medications/EpiPens.
- Informing school if their child's medical condition changes, and if relevant, providing an updated Emergency Action Plan accordingly.
- Sighting and approving all action plan documentation to be put up around the school.

*Individual Emergency Action Plans developed in conjunction with the parents must:*

- Contain detailed information about diagnosis, including the type of allergy or allergies, symptoms and action.
- Provide strategies to minimise the risk of exposure to allergens while the student is under the care/supervision of school staff for all school based events including camps and excursions. Together with the Senior First Aid Officer, classroom teacher/College Representative the parents will complete and/or update the Allergen Risk Assessment Plan annually or as necessary.
- Contain a current photo for all plans and awareness documents.
- Contain current parent emergency contact phone numbers.

The school will ensure that:

**All staff receive training for responding to an anaphylactic reaction/administration of an Epi Pen as part of compulsory first aid training every 3 years.**

*Administration:*

- All documentation be returned to the parents annually for review/renewal or as needed.
- Individual Allergy and Anaphylaxis Management Plans are displayed in the staffroom, each classroom and the First Aid Room. A copy of the Individual Emergency Action plan will be attached to the enrolment record, in class roll folder, go to specialist teachers and in the canteen.
- Mini card with basic important information and a photo will be attached to the Yard Duty Bum Bags for quick identification.
- School Senior First Aid Officer updates records annually or if condition changes.
- EpiPens are kept in individual bags, clearly labelled and kept in the First Aid Room or as so arranged.
- Information about all levels of allergic reactions and anaphylaxis be provided to teaching staff for the following year at the end of each school year and/or in pre-service days at the beginning of the new school year.
- Parents receive a copy/access a copy of the school's Allergy and Anaphylaxis Awareness Policy.
- Anaphylaxis Awareness information is given to the whole school through the newsletter at least annually.

*Teaching Staff:*

- Class Roll Folder contains Individual Allergy and Anaphylaxis Management Plans including Risk Management and Response strategies for class teacher and Temporary Relief Teacher awareness.

Allergy and Anaphylaxis Awareness	REVIEW DATE: Sept 2016	Policy Updated: Electronic - S Drive; Policy List Electronic - Website (where applicable) Hard Copy - Policy Folder – Staff Room
Revision No: 1.0	NEXT REVIEW: Sept 2018	
© St Martins Lutheran College 2016	Page 2 of 4	

- Specialist teachers and support staff also have a copy of Management Plans and Risk Assessment Plans.
- EpiPens are carried by school staff on camps and excursions and are kept in the care of adults.
- Classroom teachers meet with parents at the beginning of each school year to ensure the transfer of information and go through Risk Assessment Plan.
- A letter is sent to parents in the year level making them aware/reminding them of the conditions for their consideration.
- The induction of new staff will include anaphylaxis awareness training to be presented by Senior First Aid Officer.
- Staff are briefed as needed by the Head of School or Senior First Aid Officer about changes to Individual Management Plans.

*Canteen:*

- Canteen foods are well labelled and free of known allergens such as nuts and hardboiled egg.
- Canteen staff will be briefed on known students with allergies and photographs displayed in the canteen.

School staff will follow these prevention strategies by ensuring staff and teachers:

- Know students in their class/classes who are at risk and be familiar with their Individual Emergency Action Plan
- Explain and enforce 'NO FOOD SHARING' to students both in the classroom and the playground.
- Request that foods, cakes and lollies are not sent into school for sharing for things like student birthdays. This applies to all classes across the College. There may be the occasional prearranged exception to the rule.
- Encourage regular hand washing after eating at all times, even from breakfast to minimise risk of residual transfer.
- Send information notices home to parents about classroom activities that may pose a risk to students with anaphylaxis, for example hatching chicken eggs or experiments involving eggs. Parents may be invited to come along, or alternative tasks set for at risk students that provide a similar outcome. Sensitivity needs to be given and all care taken to avoid contamination.
- Send information about food related activities such as planned class parties or cultural festivals, well ahead of time including a list of ingredients to be used. Both classroom and whole school activities involving food should always be handled in a controlled manner and must consider the guidelines of this policy. Provide parents with a list of ingredients to be used. Parents may exclude their child for health reasons or provide an alternative. Where food contact is an issue staff may organise an alternative activity meeting similar outcomes.
- Request that teachers/staff do not bring foods containing peanut butter, Nutella, peanuts, cashews, nut mixes and bars, egg sandwiches and hardboiled egg, particularly if there is a child at risk in their class or year level.
- Ensure that treats from outside sources are either not given to students, or are provided in a controlled environment where alternatives may be offered safely.
- Be aware of hidden allergens or ingredients used for cooking, science and technology or art classes e.g. egg or milk cartons. In some cases these products need to be avoided.
- Know where the medication is kept and how to use it.

Allergy and Anaphylaxis Awareness	REVIEW DATE: Sept 2016	Policy Updated: Electronic - S Drive; Policy List Electronic - Website (where applicable) Hard Copy - Policy Folder – Staff Room
Revision No: 1.0	NEXT REVIEW: Sept 2018	
© St Martins Lutheran College 2016	Page 3 of 4	

## Food and Hospitality Curriculum Considerations – Secondary

- Know students in their class/classes who are at risk and be familiar with their Individual Emergency Action Plan

If known students:

- Meet with parents and discuss the risks in relation to Food and Hospitality curriculum delivery;
- Avoid recipes using known allergens;
- Make students aware of allergens if unavoidable and alternatives arranged under advisement of parents;
- Clearly label ingredients and prepared foods containing allergens;
- Ensure all surfaces and food preparation equipment is cleaned thoroughly;
- Foods served must be clearly labelled with known allergens.

### Definitions

*Anaphylaxis* - a life threatening allergic reaction. Triggers for anaphylactic reactions can be peanuts/nuts, foods containing nuts, dairy products, foods containing dairy products, seafood or foods containing seafood.

*ASCIA* – Emergency Plan for Anaphylaxis - to be completed by the child's practitioner. Reviewed as necessary.

*Allergy and Anaphylaxis Management Plan* – On display with signs symptoms and action as well as contact details and location of EpiPens and Medications.

*Severe Allergies Management Plan including Anaphylaxis (Individual Action Plan)* – Risk assessment plan to be completed in conjunction with the parents. (Class teacher or representative of the College).

*Prearranged* – more than 48 hours' notice.

### References

Australasian Society of Clinical Immunology and Allergy (ASCIA) Website - <http://www.allergy.org.au/>

### Review Date and Specifications

September 2018

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Revision No: 1.0	NEXT REVIEW: Sept 2018	
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