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Allergy Aware Policy

Blackmans Bay Primary School





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1 Purpose

At Blackmans Bay Primary School we aim to provide a safe and healthy learning environment for all. Blackmans Bay Primary School is an allergy aware school to help protect students and staff with allergies and to educate all students on the dangers of allergies and their associated risks.

Anaphylaxis is a severe, rapidly progressive allergic reaction that is potentially life-threatening. The most common allergens in school age children are peanuts, eggs, tree nuts (cashews, hazelnuts, almonds, pistachio, etc), dairy (cow's milk), fish and shellfish, wheat, soy, sesame, latex, certain insect stings and medication.

Peanuts are the leading cause of severe allergic reaction, followed by tree nuts, shellfish, fish, and milk. Some children are extremely sensitive to even airborne allergens; however, this is extremely rare. Nuts are the most likely airborne allergen.

The key to prevention of anaphylaxis in schools is knowledge of those students who have been diagnosed as at risk, awareness of triggers (allergens), and prevention of exposure to those triggers. Partnership between school and families is important in ensuring that certain foods or items are kept away from the student while at school.

Adrenaline administration through an EpiPen or its equivalent, to the muscle of the outer thigh is the most effective first aid treatment of anaphylaxis.

The only way to manage a food allergy is avoidance; however, elimination of certain foods in a school environment is impossible. The school has initiated several strategies to lessen the risk – it is never totally possible to eliminate the risk of anaphylaxis.

We currently have students attending our school who are at risk of anaphylaxis.

2 Policy Statement

DECYP is committed to developing and implementing policies and procedures that provide current, reliable and robust information that is easy to access and understand. A Policy Management Framework has been developed to support staff to develop Policies and Procedures that comply with the following key elements:

- Policies and Procedures have a mandatory application across DECYP.
- Policies and Procedures are authoritative and align with other relevant policy instruments.
- Policies and Procedures comply with legislation or DECYP's strategic priorities or direction.
- Policies and Procedures are managed for consistency, accessibility and relevance.
- Policies and Procedures are published in one place and align with DECYP's requirements for information management.

3 Roles and responsibilities

3.1 School Leadership:

Ensure that the details are available in the classroom, First Aid room and staff room;

- Support the class teacher/s and other staff to implement the Anaphylaxis Action Plan and Management Plan;
- Prepare and support the preparation of a letter (such as the one attached) to inform families on a regular basis;
- Reinforce appropriate avoidance and management strategies to the students and to families (such as in the newsletter or during an assembly);
- Organise training to ensure that staff are confident in the use of an EpiPen and aware of the associated triggers and prevention strategies;
- Ensure information is shared with the P and F, where appropriate, so that volunteers are aware of and can avoid contamination of known allergens when cooking for whole school events.

3.2 School Staff:

Support allergy awareness in their classrooms and throughout the school using the following strategies:

- Students are instructed and reminded to not share food and drink;
- · Have a dedicated supervising teacher for eating recess and lunch foods;
- · School staff support students to use good hygiene practices- wash hands before and after eating;
- · School staff support surfaces to be wiped after eating and cleaned at the end of the day;
- Staff are aware of the signs of an allergic reaction and are trained to respond to allergic reactions;
- · Staff follow the expectations in the School Allergy Policy;
- If there is a nut allergy in their child's class and nuts are brought in, school staff will remove the item and ask the parent not to send nuts.

3.3 Classes with a child at risk of anaphylaxis:

- Staff will educate students about the hazards and risks associated for specific students in their class with allergies, including allergic reactions to items used in play or learning (such as playdough, cooking, etc.)
- · Reinforce that students do not share their food or drink;
- Encourage students to wash their hands before and after eating;
- Provide additional information for classes with younger children (P-3). This may include a letter of
 request from the parent of that classroom not to pack nuts (airborne allergens are more likely in
 nuts than other food groups). This letter will be sent home and further information if requested by
 the anaphylactic child/ children's parents/ families or the child/ children's doctor will be added with
 consultation.

3.4 Parents/Carers/Guardians:

- A student with anaphylactic reactions require the following upon enrolment (before the child starts school) or as soon as the condition is diagnosed:
 - An Anaphylaxis Action Plan and Management Plan which will include:

- A photo of the child
- A description of the allergies
- The action to take if a reaction occurs
- The name and contact details of the doctor who completed the plan
- Complete an Authorisation for Administration of Medication form for any relevant medications associated with the student's allergy management;
- Each student's individual management plan will be reviewed, in consultation with the parents/ families:
- Each plan is updated annually and/or as applicable and reviewed immediately after a student has had an anaphylactic reaction at school;
- Parents are responsible for alerting the school if the students condition changes including the student no longer being anaphylactic for a certain allergen;
- Parents are responsible for assisting the school in preparing or supporting the preparation of a letter to inform the school community about the specifics of their child's allergy- including if it is caused by airborne particles or direct touch.

4 Process

4.1 Emergency management:

In the event of an anaphylaxis episode:

During Recess or Lunch time, the duty teacher will:

- 1. Identify the student and verify they have an individual Anaphylaxis Action Plan;
- 2. Contact the office (and First Aid officer) immediately without leaving the student;
- 3. Student is to sit or lie and stay in place until assistance arrives- teacher to remain with the student;
- 4. Office to send the EpiPen and administer treatment in accordance with the students individual Anaphylaxis Action Plan;
- 5. Office to ring 000, by a mobile phone if necessary;
- 6. Clearly explain that this child is suffering a suspected anaphylactic reaction;
- 7. Notify relevant staff to provide support as soon as practicable;
- 8. Parents/ Families of the child to be notified by the office staff;
- 9. After the incident- reassure students that may have witnessed this.

During Instruction time, teachers (in classrooms or specialist lessons) will:

- 1. Identify the student and verify they have an individual Anaphylaxis Action plan;
- 2. Contact the office (and First Aid officer) immediately without leaving the student; and seek assistance from another staff member to remove the other students to a nearby classroom;
- 3. Student is to sit or lie and stay in place until assistance arrives- teacher to remain with the student;

- 4. Office to send the EpiPen and administer treatment with First Aid;
- 5. Office to ring 000, by a mobile phone if necessary;
- 6. Clearly explain that this child is suffering a suspected anaphylactic reaction;
- 7. Notify relevant staff to provide support as soon as practicable;
- 8. Parents/ Families of the child to be notified by the office staff;
- 9. After the incident- reassure students that may have witnessed this.

4.2 Promoting the Allergy Awareness policy:

This policy will be promoted through:

- Existing and new Families will be provided with a copy of the policy;
- Families and community members can access a copy of the policy via our school Website;
- The School Association will be informed, and input, approval and support sought in relation to implementation and reviewing of the policy as needed;
- Staff will be informed and provided with training opportunities as applicable;
- · Students will be informed by their classroom teachers

4.3 Strategies to help minimise risk:

The **School Strategies that are in place** which help reduce the risk include:

- Students instructed and reminded to not share food and drink;
- · Being vigilant when supervising the eating of recess and lunch foods;
- School staff supporting students in using good hygiene including washing hands before eating and after eating;
- School staff supporting surfaces being wiped after eating and cleaned at the end of the day;
- Staff are aware of students at risk of anaphylaxis within the school and have access to Anaphylaxis Action Plans. Staff are also aware of the signs of an allergic reaction and are trained to respond to allergic reactions;
- Staff follow the expectations in the School Allergy Policy which can be found on our website;
- If there is a nut allergy in their child's class and nuts or nut products (including, but not limited to Peanuts, walnuts, tree nuts, hazelnuts) are brought in, school staff will remove the item and ask the parents / carers not to send this An alternative food item will be offered in consultation with the family.

The **Strategies for parents and carers**, which help reduce the risk, include:

- Children are instructed and reminded to not share food and drink;
- Parents/ carers send up to date information about their child's allergies;
- Parents/ carers do not send shared food items to school i.e. birthday food (we will celebrate in non-food related ways)

- Parents/ carers avoid sending messy food, such as egg sandwiches and grated cheese in sandwiches;
- Parents/ carers identify on lunch orders if their child has allergies;
- · Parents do not send nuts or nut products to school

5 Related policies

Learner Health Care Policy

Risk Management Policy

6 Related procedures

Management of Student Medical Condition Procedure

Administration of Student Medication Procedure

7 Supporting information/tools

Anaphylaxis action plan | ASCIA.

Authorisation to administer student medication form (PDF, 207KB)

Peak Bodies

- https://www.allergy.org.au/
- https://allergyaware.org.au/
- https://nationalallergystrategy.org.au/

8 Definitions

Children/child

• Children/child means anyone under the age of 18; any reference to a child or children has the same meaning as a young person or young people.

Medical Action Plan

A Medical Action Plan describes emergency routines and practices, including emergency
administration of medication. Medical Action Plans can be located by visiting peak-body websites
such as the Australasian Society of Clinical Immunology and Allergy (ASCIA) or Asthma Australia.

Prescribed medication

 Medications prescribed by a prescribing medical practitioner, or nurse practitioner, and dispensed by a pharmacist.

Responsibilities: 'must', 'is to', and 'may'

- Meaning of 'must', 'is to' and 'may':
- The word 'must' is to be construed as being mandatory.
- The words 'is to' and 'are to' are to be construed as being directory.
- The word 'may' is to be construed as being discretionary or enabling, as the context requires

Student Medical Condition Plan

 A Student Medical Condition Plan is required for any student with a known medical condition, short or long term that requires intervention (e.g. administration of medication, PEG feeding, wound dressing) or could lead to a medical emergency requiring first aide response, administration of medication or other medical care

9 Legislation

Education Act 2016 (Tas)

Public Health Act 1997 (Tas)

Personal Information Protection Act 2004 (Tas)

Work Health and Safety Regulations 2022 (Tas)

Work Health and Safety Act 2012 (Tas)