



ALLERGY AWARE SCHOOL POLICY

1. Purpose

The purpose of this policy is to address Food Allergies and the steps Blue Gum Montessori School (BGMS) is taking to become an 'Allergy Aware' school, by informing staff, parents and students about the associated risks of these food allergies.

2. Scope

This policy applies to all members of the BGMS community and requires individual notification if an enrolled student is diagnosed at risk of anaphylaxis. This policy applies to students enrolled at BGMS, their parent/guardians, staff as well as other relevant members of the community, such as volunteers and visiting specialists.

3. Policy Statement

Our school community aims to ensure that the 'uniqueness of each person is welcomed and valued'. A challenge for our community then is the increasing prevalence of a food allergy. Due to the life threatening nature of these allergies, our school community must take the appropriate action to ensure the successful and safe inclusion of these children within our school. We have a legal duty of care to ensure the safety and wellbeing of all children enrolled within our school.

4. Aims

The Blue Gum Montessori School Allergy Aware Policy aims 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 their schooling
- raise awareness about allergies and anaphylaxis in the school community
- actively involve the parents/guardians of each student at risk of anaphylaxis in assessing risks, developing risk minimisation and management strategies for the student
- ensure that an adequate number of staff members have an understanding of the causes, signs and symptoms of anaphylaxis and of their role in the school's emergency response procedures

5. Food Allergies

Food allergies affect approximately one in 20 children and it is likely that at school, children will encounter and may accidentally ingest one of the many products which causes an allergic reaction. Students with a food allergy may react to tactile (touch) exposure or inhalation exposure.

When the symptoms to the allergic reaction are widespread and systemic, the reaction is termed 'anaphylaxis'. It is rare for exposures to result in anaphylaxis but the potential always exists. Whilst peanut allergy is the most likely to cause anaphylaxis problems and death, eight foods (peanut, tree nut, including macadamia, pine nut, walnut, almond, pecan, pistachio or cashew, milk, egg, soy, wheat, fish and shellfish) account for the vast majority of total food allergies.

Anaphylaxis is the most severe form of allergic reaction which is treated as a medical emergency as it is potentially life threatening. It must be treated as a medical emergency, requiring immediate treatment and urgent medical attention.

Anaphylaxis is a generalised allergic reaction, which often involves more than one body system (e.g. skin, respiratory, gastro-intestinal and cardiovascular). A severe allergic reaction or anaphylaxis usually occurs within 20 minutes to 2 hours of exposure to the trigger and can rapidly become life threatening.

6. Symptoms of Food Allergies and Anaphylaxis

Symptoms and signs of anaphylaxis, usually but not always, occur within minutes after exposure but can, in some cases, be delayed for two hours or more. Symptoms and signs may include one or more of the following:



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- difficulty and/or noisy breathing
- swelling of the tongue
- swelling or tightness in the throat
- difficulty talking or a hoarse voice
- wheeze or persistent cough
- dizzy/light headed
- loss of consciousness and/or collapse
- pale and floppy (young child)

7. School Responsibilities

As an 'Allergy Aware School', the school community is responsible for discouraging peanuts, peanut paste, peanut butter (including 'dippers'), nuts, Nutella spread or nutty muesli bars within the School.

- Any products that may contain nut traces must be clearly labelled as such. Families who supply home baking (for a class or community function) must list the ingredients on the lid of the container) will be reminded of this through the school newsletter, or parent class liaison emails. The school asks for and encourages providing a list of ingredients of home baked food items, particularly if they contain traces of nuts
- Informs new families of this Policy when commencing at the school, with reminders published regularly in the newsletter, at Orientation and at Parent Information gatherings. e.g. should

The students are responsible for:

- Washing hands before and after eating, soap dispensers have been provided
- Any potentially harmful food which is brought to school by mistake, children are encouraged to inform the classroom or duty teacher so that risks may be minimised
- Sharing or swapping food which is not against the School Policy
- Any inappropriate behaviour relating to an 'at risk' student's food allergy will be taken seriously and dealt with immediately by the teacher on duty and reported to a member of the administration team.

The staff is responsible for:

- Education about food safety and the seriousness and potential life threatening nature of allergies takes place within the classroom environment. Staff training, as part of Health and Physical Education, will be in serviced
- Follow the Allergy Aware School Policy
- A child who has a life-threatening allergy, your classroom teacher may request extra pre-cautions for your child's classroom
- Undergoing regular anaphylaxis first aid training, including the identification of signs and symptoms of an allergic reaction and use of appropriate medication to cater for these situations, e.g. EpiPen
- Ensuring parents are aware of atypical school occasions (as children get older there are more occasions when food will just arrive without notice), and events where changes to exposure to allergy foods are increased. These include, but are not limited to: students' birthdays/ farewells when parents may bring in cakes or other food for the class; sport or swimming carnivals, school dances and other events not held on school premises where food supervision is more difficult as students use outside food vendors, craft days, class market stalls, class celebrations, sausage sizzles, fundraising days where students or others may bring, share or sell food brought from home, Christmas and Easter, and cultural celebrations where students and staff may swap chocolates, lollies or presents
- Washing their hands.



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Documentation and Equipment:

- Individual anaphylaxis plan posters for children with a food allergy are posted in the staff room, first aid room and in the classrooms of 'at risk' students. The medical details, including a photograph of each child with a food allergy, will also be contained in portable medical bags. Regular and relief staff are expected to familiarise themselves with this information. Due to privacy, no parent or visitor should have access to the "at risk" information.
- EpiPen and anaphylaxis plan kits are required to be taken on school excursions and to sporting events. A mobile phone or other communication device must be available on each off campus trip for emergency calls.

Families of 'At Risk' Students:

In terms of the child with the allergy, once the parents communicate this information to the school the child's identity and allergy is revealed to the other students and parents. It is in the best interests of the child that this occurs. The information or change to a child's allergies MUST be communicated to the School as they have a responsibility to act if they saw the child exhibiting any of the symptoms described.

The School will then make every effort to manage any allergic reactions based on the information it has received.

Parents / Caregivers of 'At Risk' Students Should Supply:

- One medical kit containing: an EpiPen; an un laminated colour copy of the child's anaphylaxis plan, and any other prescribed medications such as antihistamine or Ventolin. These will be kept in a prominent position with the classroom
- Identification bracelet, wrist band or similar (i.e. Medical alert bracelet – www.medicalert.com.au) as required.
- Keep Epi-pens in date for each classroom the child attends, for example OSHC or Club.
- Parents are responsible for ensuring the EpiPens are in date.

Replacing the EpiPens and other medications required for the treatment of such allergies will be the responsibility of the child's family. It is the parent's responsibility to ensure their child's EpiPen is in date at all times. The parents are responsible to provide the required EpiPens for each class including OSHC and Clubs. It is also advisable to replace photos/anaphylaxis posters every year as the student grows.

Parent / Caregivers of 'At Risk' Students Should Communicate:

- By informing the Principal and Registrar in writing that their child is at risk of anaphylactic reaction via an Action Plan form
- The status of their child's allergy status upon enrolment and if changes occur throughout the enrolment and while the child attends BGMS, the parents are responsible to formally notify the Principal, Child's teacher and Registrar in writing either via Enrolment forms or emailing the Registrar.
- By notifying the school via an 'Action Plan for Anaphylaxis' of any advice from a treating medical practitioner. The action plan must contain a photo of the student, a list of known allergies, parent contact information, symptoms and signs of mild and severe allergic reactions, and actions to undertake in the event of an emergency. This action plan must be signed by the treating medical practitioner
- By providing written authorisation for the school to administer the EpiPen or other medication, or to assist the child to administer the medication
- By providing an EpiPen to the school for use with their child. They will need to ensure that the EpiPen is clearly labelled with their child's name and is not out-of-date, and replace it when it expires or after it has been used
- Teach and encourage their child to self-manage



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- If a child has a life-threatening allergy, your classroom teacher may request extra pre-cautions for your child's classroom.
- The parents are responsible for notify the school if their child has an allergy.

Planning for the Individual Student – Entry into School

Prior to entry into school or, for a student who is already in school, immediately after the diagnosis of a life threatening allergic condition, the parent/caregiver should meet with school staff to develop an individualised anaphylaxis plan.

Classroom Protocols / Guidelines

- All teachers, aides, volunteers, and students will be educated about food allergies.
- If there are students with allergies and anaphylaxis risk in a particular classroom, all the students and their parents from that class will be notified. Please note the younger the child the higher their risk of allergic reaction. For this reason, individual UP classroom will identify the level of management for parents.
- Arrangements of medication to be stored within the classroom and checked by Office Administration.

In Conclusion

At Blue Gum Montessori School, we seek to ensure the safety and wellbeing of all members of our school community. We believe an effective partnership between home and school will ensure the successful inclusion of students with life threatening allergies. We are committed to responsible and achievable management practices in reducing foreseeable risks associated with the support of students with anaphylaxis within the school environment.

Current School allergies in 2018 are:

All nuts
Shellfish
Eggs

For more information, please see:

- ASCIA: Australian Society of Clinical Immunology and Allergy
- Ministerial Order 706 - sets out the steps schools must take to ensure the safety of students in their care at risk of anaphylaxis
- Non-Government Schools in WA Registration Standards and Requirements 2015 - Criteria for school registration:
- Level of Care
- Student Health – management of students with allergic reactions

8. Responsibilities

8.1. Compliance, Monitoring and Review

Conducted by the Principal and delegate.

8.2. Reporting

Conducted by the Principal and delegate.

8.3. Records Management

Conducted by the Principal and delegate.

Approval and Amendment History	Details	Date
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Original Approval Authority and Date	Amended	20/6/2016
Amendment Authority and Date	Included allergies to be aware of	17/2/2017
Review	Updated food allergies for 2018	20/02/18
Review		08/04/2019