



Good Shepherd Catholic Primary School Springfield Lakes Allergy Awareness and Management Policy

Overview

This policy reflects Good Shepherd's Mission Statement: "by being open and welcoming, reaching out to others with justice and compassion". Therefore, this policy is concerned with a whole school approach to the health care management of those members of the school community suffering from specific allergies. Allergies are becoming a more frequent occurrence within our community. Consequently, Good Shepherd must respond to the needs of those students, staff and volunteers with identified allergies. Allergic reactions can vary from mild discomfort to severe reactions with the potential to be fatal. Anaphylaxis is a severe and sudden allergic reaction. Common allergens include but are not limited to nuts, eggs, shellfish, wheat, pollens, dairy products, bee stings, hopper ant stings, pet hair etc.

Good Shepherd's position is guided by the Health Support Guidelines developed by *The Australasian Society of Clinical Immunology and Allergy (ASCIA)* which has information on the prevention of food anaphylactic reactions in schools, available at www.allergy.org.au/pospapers/anaphylaxis.htm

Philosophical Basis

Good Shepherd Catholic Primary School adheres to the Health Support Guidelines developed by the Department of Education Queensland. Information regarding the management of Anaphylaxis is taken from the publication, *Anaphylaxis in education and children's services*, the DECS website and the *Australasian Society of Clinical Immunology and Allergy (ASCIA)* website, (as above).

Current research and advice regarding Allergies and Anaphylaxis indicate that the proactive approach in managing allergies in the environment is to educate our community about the various types and triggers to allergies and develop safe practices to support community members with allergies.

Risk minimisation with regard to particular foods (peanuts and tree nuts) is indicated, however the implementation of blanket food bans or attempts to prohibit the entry of food substances into schools are not recommended.

Issues considered in not recommending blanket food embargos were:

- the practicalities of such measures
- the issue that for school age children an essential step is to develop strategies for avoidance in the wider community as well as at school
- the lack of evidence of the effectiveness of such measures
- other guidelines and position statements and experts do not recommend such measures
- some guidelines state that such a policy should be "considered" for a specific foodstuff such as peanuts rather than recommended for all allergies
- food bans at schools are not recommended by allergy consumer organisations
- the risk of complacency about avoidance strategies if a food is banned"

(Australasian Society Clinical Immunology and Allergy (ASCIA) Position Paper/Guidelines for Schools Preschools)

Given the variety of allergy triggers, it is difficult to protect members of the school community from exposure to potential allergens. This Allergy Awareness Policy is in place to minimise the risk of exposure to allergens and triggers to allergic reactions and ensure that staff are trained to provide appropriate first aid should a child or adult have an allergic reaction.

Aims

- To minimise risks to staff and students within Good Shepherd Catholic Primary School who are identified as having the potential for anaphylaxis.
- To develop an understanding about allergies and their triggers and promote education about safe practice.
- To be aware of staff, students and volunteers who have allergies and their Health Care Plans.

Objectives

Good Shepherd Catholic Primary School is committed to taking 5 key steps to develop an Allergy Aware Environment. These are:

1. To obtain medical information about student at risk and develop a written care support plan devised in conjunction with a health professional and the student's family.
2. To educate school staff and relief staff and others in the school community responsible for the care of students, concerning the risk of certain foods and environmental allergens.
3. To implement practical strategies to avoid exposure to known triggers, where possible.
4. With parents/caregivers, provide age appropriate education to students with severe allergies.
5. To regularly review and monitor all health care plans.

Definitions

Allergy - A condition in which the body has an exaggerated response to a substance (e.g. food and drug). Also known as hypersensitivity.

Allergen - A normally harmless substance that triggers an allergic reaction in the immune system of a susceptible person.

Anaphylaxis - Anaphylaxis, or anaphylactic shock, is a sudden, severe and potentially life-threatening allergic reaction to food, stings, bites, or medicines.

EpiPen - Brand name for syringe style device containing the drug Adrenalin which is ready for immediate inter-muscular administration.

Minimized Risk Environment - An environment where risk management practices (e.g. Risk assessment forms) have minimised the risk of (allergen) exposure.

Health Management Plan A detailed document outlining an individual student's condition treatment, and action plan for location of EpiPen.

Allergy Awareness Procedures

Identification and Documentation of Medical Information

- Obtain medical information regarding the allergy at the time of enrolment, employment or engagement and an annual update thereafter.
- When a student, staff member or volunteer is diagnosed with an allergy, relevant documentation is to be provided by an authorised adult and medical practitioner in the form of a Health Care Plan (Appendices 3, 4, 5, 6, 7). This Health Care Plan and any relevant medication will be held at the School Office. A copy of the Anaphylaxis Action Plan (Appendix 5) is also to be kept in a *designated Teacher's folder* and is to be taken with the relevant medication by the teacher, whenever the person at risk leaves the grounds e.g. for excursions, walks, etc.

- Where a student, staff member or volunteer has an allergy, written consent (Appendix 4) for information and photograph to be detailed on an “at risk” list which will be displayed in the Staff Room in the appropriate area, i.e. Playground Duty and in a confidential folder at the front desk.
- Photographs of students with known allergens are to be kept with medication in the Wellbeing Room to minimise the possibility of wrongly administering medication.
- Photograph of the students made known to staff as an awareness and the protection for the students
- Parents will be alerted to the benefits of using a Medical Alert Identification – bracelet.
- The school will update the Health Care Plan annually with the child/student’s Doctor.

Education

- **Whole School Community** – to be educated about the dangers of allergies. The school community will be encouraged not to bring foods that may trigger severe allergies to school e.g. nuts or nut containing products. Education will be provided through newsletters, class notes, the school website www.goodshepherd.qld.edu.au and parent information sessions and parent portal.
- **Staff** – Office Staff and staff who due to specific duty to undertaken Senior First Aid training covering the recognition of the risks of allergies and understanding the steps that can be taken to minimise these risks. Allergy training is to be provided by qualified professionals and reinforced annually. Important topics to be addressed in training include understanding of allergies and anaphylaxis; triggers for allergy and anaphylaxis; prevention and recognition of anaphylaxis; actions required in the event of a severe allergic reaction and instruction in EpiPen use. Staff will have access to *Schooling and Childcare* - website: <http://education.qld.gov.au/schools/healthy/docs/anaphylaxis>

Staff who have contact with students with known allergies need to be aware of risk factors for that student. Staff in contact with a student with a severe allergy will need to adhere to any special requirements put in place for that class.

- **Students with an Allergy** – parents/caregivers, in consultation with a medical practitioner, to educate the at risk student in the self-management of their allergy, e.g. *what is safe and unsafe, strategies for avoiding exposure to allergens, symptoms of allergic reactions, how and when to tell an adult they may be having an allergy-related problem, and how to read labels*. Where a severe food allergy exists it may be recommended that the “at risk” student only consume foods, which have been prepared at home.
- **Other Students** – teachers will teach students about the common triggers and signs of allergic reactions, and to report immediately any suspected symptoms. They will also educate students regarding strategies which could be employed in the event of an attack when an adult is not present. No sharing or trading of food, drinks, containers, and utensils to be allowed. Students to be encouraged to focus on hygiene, washing hands both before and after eating, and after contact with known allergens to minimise the risk of accidental transference.
- **Parents/Caregivers/Volunteers** – A partnership model is proposed where assistance will be required and sought in educating students about allergies and their triggers; the symptoms of an allergy attack and possible responses. If volunteering in a class where there is a student with a severe allergy, the volunteer will need to read and adhere to any special requirements put in place for that class and student.

Implementation of Practical Strategies

Environment: Whole School

- Good Shepherd's aim is for the whole school to be aware of the potential dangers of allergies in identified students. This includes environmental allergens such as insects, bees, grasses and chemicals.
- While food products that may cause allergies will not be banned from the school, it will be school policy to encourage parents and caregivers to consider alternatives for their student's healthy lunches and snacks. Similarly, all adult groups involved in school will be reminded of school policy and asked not to bring these products on site due to the risk of transference.
- Special attention will be given to nuts and nut products given the severity of reactions at minimal exposure levels. In addition to this, risk assessments will need to be completed on all products and foreign objects, including animals, brought into the school environment during an incursion which may be triggers for a child with an allergy.

Learning Pods

- Exposure to *Food Substances* – where a student in a particular class grouping is identified as having a food allergy, and exposure to that food, even without ingestion will put that student at risk; additional precautions will need to be put in place within that classroom. In such circumstances a note will be sent home to parents notifying them of the situation and requesting that foods which may cause a problem, refrain from being sent to school (appendix 1). Should foods containing known allergens be brought to school, the child who has brought them will be directed to move to a designated space, to consume the food, in order to minimise risk of transference within the learning pods. In some cases, it may be necessary to create allergen free areas at which students may eat their lunch and snacks.
- The School community will regularly be reminded to assist the school in developing an Allergy Aware community.
- Birthday Treats – parents to be encouraged to speak to the learning pod teacher regarding appropriate birthday treats and to consider alternate ways of celebrating a birthday that does not require food. If food is to be provided the safest alternative is pre-packaged food which can be left in the fridge in the Administration Wellbeing Room. However, during COVID-19, Parents have been advised that any type of food is not acceptable at school. (Perhaps, the new normal).
- Shared Lunch - where a shared lunch is organised, learning pod teachers are to use a standardised form outlining unsuitable food. (Appendix 7) Parents/caregivers of “at risk” students will be advised to provide “safe treats” to be given during birthday celebrations and to provide alternatives for shared lunches.
- All students will be asked to exercise hygiene practices by washing hands before and after eating, at first and especially second break after play.
- Regarding other allergens, precautions need to be taken to minimise the exposure risk to identified staff, students or volunteers. This is to take the form of risk assessments and monitoring what comes into the classroom, e.g. pets – if there is a severe allergy to pet hair; flowers – if there is an allergy to pollen; cleaning products - if there is an allergy to certain chemicals.

- Learning Pod teachers need to also be aware of risks during science experiments, excursions, school camps and physical education activities.

Lunch Orders

- ❖ ***The Family and Community Engagement Network (FACE) morning tea and lunch makers will not stock or sell nuts, nut products, or items known to contain nuts as an ingredient, as these can cause severe reactions. This ban does not apply to foods labelled “may contain traces of nuts”. Other foods sold may contain products which could trigger allergic reactions, e.g. gluten and eggs.***
- Information will be available to enable students and their families to identify those foods which may be triggers for particular students.

OSHC

- For a student with anaphylaxis attending Centacare OSHC, the OSHC Coordinator will negotiate with the family regarding food consumption in-line with Centacare’s policies and procedures. In some cases, the family may prefer to provide a meal from home. If it is decided to provide meals to a student at risk, then the meal prepared should not contain the ingredients to which the student is known to be allergic. Students who are identified as at risk may require utensils, which are easily identifiable (e.g. a different colour) to minimise risk of exposure via transference.
- All students should wash hands both before and after eating to minimise accidental transference of allergens to other surfaces.
- Due to the potential severity of the reaction, meals prepared with ingredients which “*May contain traces of nuts*” written on the label, should not be given to students with nut allergies.
- As in learning pods, additional precautions may need to be taken to minimise risk of exposure to other allergens for identified staff, students or volunteers – this could take the form of risk assessments and monitoring of what comes into OSHC, e.g. pets – if there is a severe allergy to pet hair; flowers – if there is an allergy to pollen; cleaning products - if there is an allergy to certain chemicals.
- Regular review and monitoring of all plans
- Good Shepherd Catholic Primary School together with Centacare will update the Health Care Plan annually with reference to already mentioned websites.
- Student Photos will be displayed together with relevant information to ensure safety and wellbeing.

Policy Completed and implemented	Amendments	Review	Review By
2014	No adjustments	2015, 2016, 2017,	Leadership Team: Judith Anne Seery Terese Shephard and Lesley Parry
	No adjustments	2018	Leadership Team Judith Anne Seery Lesley Parry James Bradley
	Updated information regarding classroom to learning pods.	20 May 2020	Judith Anne Seery
	Updated information re COVID-19 and the request not to have food on site. Added information regarding display of photos for safety information and wellbeing of the student.	03 February 2021	Judith Anne Seery

References:

Australian Society of Clinical Immunology and Allergy Inc.
www.allergy.org.au/anaphylaxis/index.htm

Queensland Government
<http://education.qld.gov.au/schools/healthy/docs/anaphylaxis>

Australian Society of Clinical Immunology and Allergy Inc. at
 Australasian Society of Clinical Immunology and Allergy
www.allergy.org.au/

Information on the prevention of food anaphylactic reactions in schools, available at
www.allergy.org.au/pospapers/anaphylaxis.htm

Schooling and Childcare:
<http://education.qld.gov.au/schools/healthy/docs/anaphylaxis>

Appendices

- Appendix 1 Parent Letter informing that as an Allergy Aware School, informing that a student in their child's class has an allergy procedure
- Appendix 2 Letter re Shared Lunch and Class Celebrations procedures
- Appendix 3 Confidential information – Principal and family
- Appendix 4 Parent/Legal Guardian Permission “At Risk” List – Agreement
- Appendix 5 Health Care Plan
- Appendix 6 Anaphylaxis (severe allergy) Care Plan Health Support Plan
- Appendix 7 Parent Action Plan for children who have had a previous acute severe allergic reaction
- Appendix 8 Information for Families pamphlet re “Children living with Anaphylaxis”

Appendix 1

Letter to Parents

Date: _____

Dear Parents/Caregivers in Year _____

This letter is to inform you that our school is an ALLERGY AWARE SCHOOL. A student in our class has been identified as having an allergy to _____

As an ALLERGY AWARE SCHOOL we are trying to

- Educate staff, students and families about how _____ can cause an allergic reaction for some people;
- Build awareness about how staff, students and families can ensure safety at school for students with _____ allergies by being cautious and aware of the dangers of _____.

For this student exposure to _____ or products known to contain _____ may cause a life-threatening allergic reaction (anaphylaxis) requiring emergency medical intervention.

To reduce the chance of this occurring we ask that you

- Do not send _____ or _____ products to school;
- Check the labels of food being brought to the school;
- Remind your child to NOT share any food with another student - this is not being unkind - this is being sensible;
- When sending food for class parties be aware of the ingredients;
- If your child has been in contact with _____ before coming to school ensure that your student's face, hands and mouth have been thoroughly washed before entering the school;
- If you are volunteering at the school, we ask that you also limit any potential exposure the allergen
- Please do not send anything which may contain _____ for sharing.

We appreciate your support with these procedures. Please contact me at school if you require further information.

Sincerely,

Judith Anne Seery
Principal

Appendix 2

Shared Lunches and Class Celebrations

Date:

Dear Parents/Caregivers,

We are having a shared lunch/class celebration on _____ at _____

We have students in our class who are allergic to _____

- Peanuts
- Other Nuts
- Eggs
- Shellfish
- _____

Please be aware of this when preparing food and do not send any food items containing these products.

If your child has a severe food allergy you may prefer to provide food that has been prepared at home.

Thank you for your co-operation,

Classroom Teacher/s

Appendix 3

CONFIDENTIAL

To be completed by the PRINCIPAL with the FAMILY and OTHERS as indicated below, for a staff/student/client who requires individual plan in school. This plan should be based on written health care advice from a health professional. It will involve risk assessment for staff in planning for the student.

This information is confidential and will be available only to supervising staff and emergency medical personnel.

School Name: Good Shepherd Catholic Primary School
58 Opperman Drive
SPRINGFIELD LAKES QLD 4300

Name of place of Excursion/Camp etc.	
Name of Staff/Student/Client:	
Date of Birth:	
Family Name (please print):	
First Name (please print):	
Date of this Plan:	
Date for Next Review:	

Complex/Invasive Health Support

Does the child/student/client have complex/invasive health care needs? Yes* No

(e.g. Gastrostomy or other tube feeding, postural drainage, routine oxygen, tracheostomy care, catheter/stoma management)

Yes: No:

*Refer to attached notes to assist in the completion of this Health Support Plan

.....
.....
.....

First Aid

Is there any individual first aid requirement, other than basic first aid response? Yes* No

(e.g. In relation to asthma; anaphylaxis (including administration of prescribed adrenalin via EpiPen; administration of prescribed intranasal midazolam for seizure management; management of anxiety)

*Refer to attached notes to assist in the completion of this Health Support Plan.

Appendix 4

AGREEMENT

***This plan has been developed for the following:**

- School/Education
- Outings/Camps/Excursions/Aquatics
- Home
- Transport
- Other (please specify)

When will this child/student commence attending school?

If not immediately, detail actions and timelines to enable attendance, and any interim provisions

Principal Signature..... Date.....
Family name (please print) First Name (please print)

Staff/Contact Person (if relevant)

Name Signature..... Date.....
Family name (please print) First Name (please print)

Who, apart from the family and those listed above, will have a copy of this plan?

1. Role
Family name (please print) First name (please print)

Signature..... Date.....

2. Role.....
Family name (please print) First name (please print)

Signature..... Date.....

3. Role.....
Family name (please print) First name (please print)

Signature..... Date.....

Authorisation

I have read, understood and agreed with this plan and any attachments indicated above.

I support use of this plan by supervising staff.

Parent/Guardian

Or Adult Student/Client Signature..... Date.....
Family name (please print) First name (please print)

Child/Student Signature Date.....
Family name (please print) First name (please print)

I have read, understood and agreed with this plan and any attachments indicated above.

I approve the release of this information to supervising staff and emergency medical personnel.

Parent/Guardian
Family name (please print) First name (please print)

Signature..... Date.....

This information is confidential and will be available only to supervising staff and emergency medical personnel.

Name of Child/Student/Client Date of Birth.....
Family name (please print) First name (please print)

Date for next review

Description of the Condition

Possible observable signs and symptoms:

- Presence of known allergen
- Repeated vomiting
- Difficulty swallowing
- Swelling of lips, face or body
- Difficulty talking
- Loss of consciousness
- Generalised skin rash
- Cough Difficulty with noisy breathing (wheeze or stridor)

Known and suspected triggers

First Aid

If a child/student shows any of the above observable signs and symptoms, staff will call 000 and then administer first aid in accordance with Basic First Aid and including, as relevant, administration of prescribed adrenalin via EpiPen®.

If you anticipate this person will require anything other than this standard first aid response, please provide detailed written recommendations. Staff will use this plan to discuss with families how support can be provided in line with the capacities of their service.

Additional information attached to this care plane

Authorisation and Release

Health Professional..... Professional Role

Address.....

Telephone.....

Appendix 5

Health Care Plan

CONFIDENTIAL

To be completed by the PRINCIPAL with the FAMILY and OTHERS as indicated below, for a child/student/client who requires individual health and personal care support in school, preschool or child care. This plan should be based on written health care advice from a health professional. It will involve risk assessment for staff in planning for the child/student/client.

This information is confidential and will be available only to supervising staff and emergency medical personnel.

School name:

Name of child/student/client:

Date of birth:

Family name (please print):

First name (please print):

Date of this plan

Date for next review

Complex/Invasive Health Support

Does the child/student/client have complex/invasive health care needs? Yes* No
(e.g. Gastrostomy or other tube feeding, postural drainage, routine oxygen, tracheostomy care, catheter/stoma management)

*Refer to attached notes to assist in the completion of this Health Support Plan.
.....
.....
.....

First Aid

Is there any individual first aid requirement, other than basic first aid response? Yes* No
(e.g. In relation to asthma; anaphylaxis [including administration of prescribed adrenalin via an EpiPen]; administration of prescribed intranasal midazolam for seizure management; management of anxiety)

*Refer to attached notes to assist in the completion of this Health Support Plan.
.....
.....
.....

Routine supervision for health care related safety

Is there a known recommendation for additional supervision for health care related safety? Yes* No
(e.g. medication authority for administration during times when the child/student is in the care of staff; identified risk of self-harm or suicidal thoughts and behaviours; illness related problems)

*Refer to attached notes to assist in the completion of this Health Support Plan.

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.....
.....

Appendix 6

Anaphylaxis (Severe Allergy) Care Plan

Confidential

To be completed by the DOCTOR and the PARENT/GUARDIAN and CHILD/STUDENT.

This information is confidential and will be available only to supervising staff and emergency medical personnel.

Name of Child/Student Date of Birth

Family Name..... First Name.....
(Please print family and first name)

Medic Alert Number (if relevant) Date for next review.....

Description of the Condition

Possible observable signs and symptoms:

- Presence of known allergen
- Repeated vomiting
- Difficulty swallowing
- Swelling of lips, face or body
- Difficulty talking
- Loss of consciousness
- Generalised skin rash
- Cough difficulty with noisy breathing (wheeze or stridor)

Known and suspected triggers.....

First Aid

If a child/student/client shows any of the above observable signs and symptoms, staff will administer first aid in accordance with Basic Emergency Life Support and including, as relevant, administration of prescribed adrenalin via EpiPen. If you anticipate this person will require anything other than this standard first aid response, please provide detailed written recommendations. Staff will use this plan to discuss with families how support can be provided in line with the capacities of their service.

- Medication authority (if medication is other than the adrenalin via EpiPen)
- Individual first aid plan (*Australasian Society of Clinical Immunology and Allergy [ASCIA] Action Plan*)
- General information about this person’s condition
- Other (please specify)
- School/Education
- Outings/Camps/Holidays/Aquatics
- Transport
- Other (please specify)

Authorisation and Release

Health Professional Professional Role

Address:

Telephone

Signature Date

**I have read, understood and agreed with this plan and any attachments indicated above.
I approve the release of this information to supervising staff and emergency medical personnel.**

Parent/Guardian or Adult Student/Client
(Please print family and first name)

Signature: Date.....

Appendix 7

ACTION PLAN FOR CHILDREN WHO HAVE HAD A PREVIOUS ACUTE SEVERE ALLERGIC REACTION (ANAPHYLAXIS)

Name..... Prescribed by.....

Date of Plan

Emergency Contacts

Allergic trigger/s.....

Exposure or Suspected Exposure to Trigger



**Seek emergency medical treatment. Call 000 for Ambulance
OR if unavailable take child to nearest Medical Centre**



Observe for the following symptoms and institute action

<ul style="list-style-type: none">• No signs or symptoms – completely well	<p>ACTION</p> <ul style="list-style-type: none">▪ Watch for further symptoms▪ Give prescribed medicine <p>.....</p>
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OR

<ul style="list-style-type: none">• Skin rash which is red raised and itchy• Swelling of the lips, face or body – child otherwise completely well	<p>ACTION</p> <ul style="list-style-type: none">▪ Watch for further symptoms▪ Give prescribed medicine <p>.....</p>
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<ul style="list-style-type: none"> • Cough • Noisy breathing (wheeze or stridor) • Hoarse voice • Difficulty breathing • Difficulty talking • Loss of consciousness • Symptoms may present with or without skin rash 	<p>ACTION</p> <ul style="list-style-type: none"> ▪ Watch for further symptoms ▪ Give the EpiPen ▪ Remove EpiPen from container. Remove grey cap. Hold black end to front of outer thigh. Push down hard. The device will activate with a loud click. Hold in place for 10 seconds. Remove EpiPen with care.
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OR

<ul style="list-style-type: none"> • Loss of consciousness • No breathing • No carotid pulse. Symptoms may be present with or without other symptoms 	<p>ACTION</p> <ul style="list-style-type: none"> ▪ Watch for further symptoms ▪ Give the EpiPen ▪ Follow Australian Resuscitative Council Procedures – Airway Breathing Circulation
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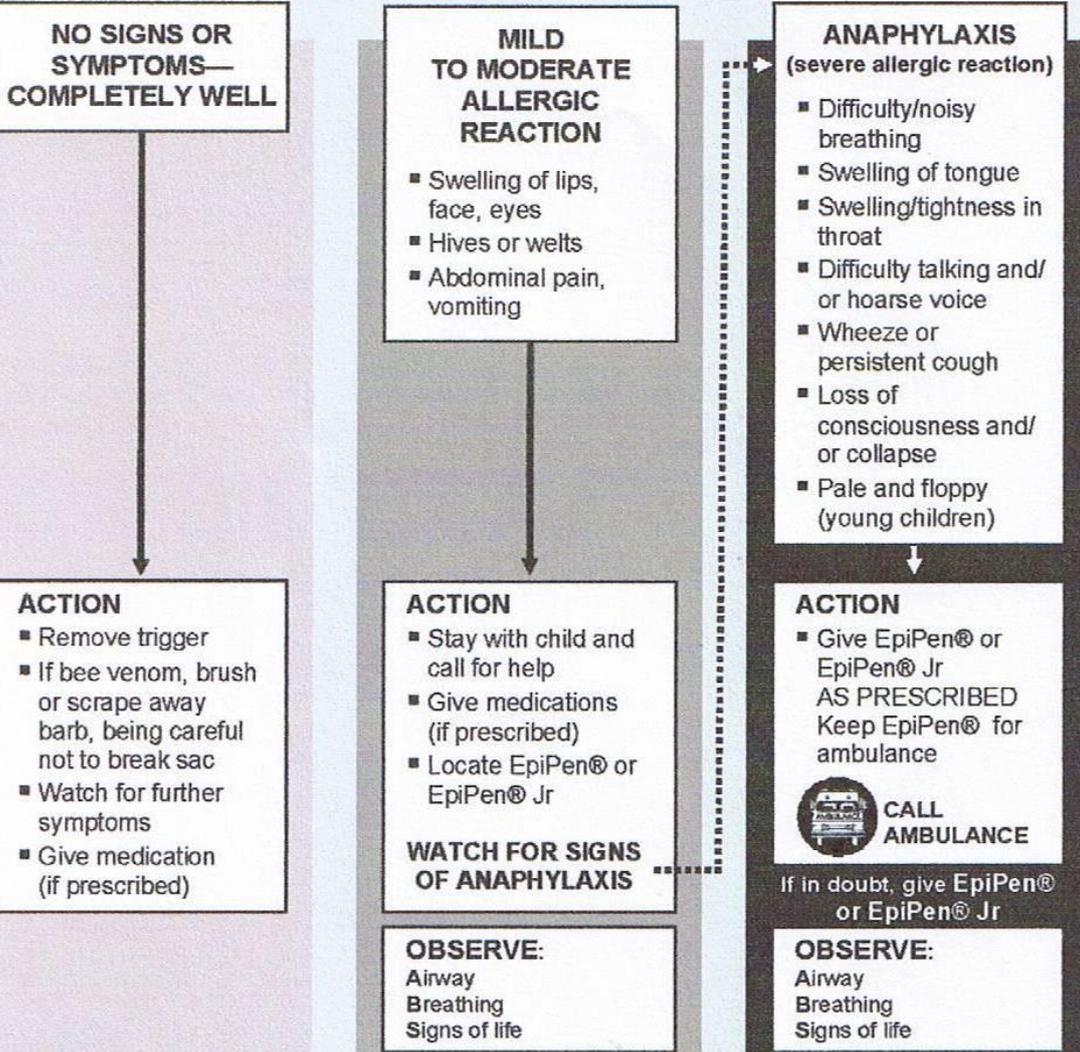
AWAIT EMERGENCY MEDICAL TREATMENT
If signs of anaphylaxis persist and adrenaline is available,
this can be repeated

Approved By	Judith Seery – Principal
Issuing Group	Good Shepherd Community
Implementation Date	August, 2014
Supersedes Date	Nil. New school
Good Shepherd Contact	Principal – 07 3437 5000

Anaphylaxis (severe allergy)

Exposure or suspected exposure to trigger

Are the following signs or symptoms present?



See over for instructions on how to give EpiPen® or EpiPen® Jr



TO CALL AMBULANCE: Dial out, then 000 or mobile 112
Say what state you are calling from, the person's condition and location



INFORM EMERGENCY CONTACTS in accordance with DECS guidelines