

RATIONALE

According to DET's duty of care obligations to students, schools are required to ensure all students feel safe and supported at school. This includes supporting and responding to students with mild and moderate allergies.

This policy applies to a student with a diagnosed food, insect or medication or other diagnosed/identified allergy who had a mild to moderate allergic reaction to an allergen. A student with a known food or insect sting allergy who had had a previous severe reaction is usually diagnosed as being at risk of having a severe allergic reaction (anaphylaxis). See related policies, Anaphylaxis.

An allergic reaction can be traumatic for the student and others witnessing the reaction.

AIMS

- To ensure schools are able to manage students with mild to moderate allergies, who have a green ASCIA Action Plan
- To ensure students with a mild or moderate allergy to a food or insect and those with medication allergy have an ASCIA Action Plan for Allergic Reactions (green plan)
- That the ASCIA Action Plan for Allergic Reaction (green plan) should not be used for conditions such as allergic rhinitis (hay fever) or eczema which are managed mainly in the home environment by parents/guardians

IMPLEMENTATION

- It is important to be aware that some students with an allergy may not wish to be singled out or seen to be treated differently
- Students who have an ASCIA Action Plan for Anaphylaxis and a prescribed adrenaline autoinjector should NOT also have an ASCIA Action Plan for Allergic Reactions if they have some milder allergies as well as severe allergy – these will be included in the Action Plan for Anaphylaxis
- Students diagnosed with food, insect or medication allergies should be given ASCIA Action Plan for Allergic Reactions (green) by their medical practitioner. Barton Primary School has developed an Individual Allergic Reaction Management Plan for these students.
- Barton Primary School manages students with allergies in the following ways:
 - ASCIA Action Plan for Allergic Reactions
 - Individual Allergic Reaction Management Plans
 - Prevention Strategies
 - Having a clear Communication Plan
 - Having a stepped emergency response process
 - Having a stepped staff response process
 - Encouraging camps and special events participation
 - Communicating with parents and guardians

For further information on the aforementioned strategies see Appendix 2

- Children with allergies who are not considered to have anaphylaxis should be provided with an ASCIA Action Plan for Allergic Reactions (green plan)
- Children with related food allergy and significant asthma are at increased risk for more severe allergic reactions. Where a child with a food allergy has active asthma (wheeze or cough with exertion or at night requiring regular treatment with a bronchodilator) it is imperative that this is identified and managed accordingly.

Common allergens include:

- Peanuts
- Tree nuts such as cashews
- Eggs
- Cow's milk
- Wheat
- Soy
- Fish and shellfish
- Sesame
- Insect stings and bites
- Medication

Signs of a mild to moderate allergic reaction include:

- Hives or welts
- Swelling of the lips, face and eyes
- Tingling mouth
- Children with allergies may still progress to having a severe reaction or anaphylaxis. As this cannot be predicted, children with mild to moderate allergic reactions should be monitored carefully after any reaction

Signs of anaphylaxis (severe allergic reaction) include any one of the following:

- Difficult/noisy breathing
- Swelling of tongue
- Swelling/tightness in throat
- Difficulty talking and/or hoarse voice
- Wheeze or persistent cough
- Persistent dizziness or collapse
- Pale and floppy (young children)
- Abdominal pain and/or vomiting (these are signs of a severe allergic reaction to insects).

Mild to moderate allergic reaction (such as hives or swelling) may not always occur before anaphylaxis.

If a student appears to be having a severe allergic reaction, but has not been previously diagnosed with an allergy or being at risk of anaphylaxis, the school staff should follow the school's anaphylaxis first aid procedures, seek medical advice via 000 and administer an adrenaline autoinjector for general use, if advised by 000.

APPROVED

Ratified by School Council 26th April 2018



EVALUATION

This policy will be reviewed annually as part of the school's three year review cycle.

Appendix 1 DEFINITION

An allergy occurs when a person's immune system reacts to substances in the environment that are harmless for most people. These substances are known as allergens and are found in foods, insects, some medicines, house dust mites, pets and pollen.

Appendix 2 STRATEGY DESCRIPTIONS

- ASCIA Action Plan for Allergic Reactions
An ASCIA Action Plan for Allergic Reactions (green plan) should be completed by the student's medical practitioner and a colour copy provided to the school by the student's parents or guardians

The ASCIA Action Plan for Allergic Reactions (green plan) outlines the student's known mild to moderate food, insect or medication allergies and the emergency procedures to be taken in the event of an allergic reaction.

- Individual Allergic Reactions Management Plans
An Individual Allergic Reactions Management Plan for each student with a diagnosed food, insect or medication allergy, should be developed in consultation with the student's parents or guardians

These plans include the ASCIA Action Plan for Allergic Reactions (green plan).

The plan must also include strategies to prevent exposure to the student's known allergens. If parents indicate their child has an allergy but do not have an ASCIA Action Plan for Allergic Reactions (green plan), the school may consider developing a Student Health Support Plan in place of an Individual Allergic reactions Management Plan.


- Prevention Strategies
The Individual Allergic Reactions Management Plan that the school completed in consultation with the parent/guardian must include prevention strategies used by the school to minimise the risk of exposure to known food, insect and medication allergens
- Communication Plan
A communication plan developed by the school which provides information to all school staff, students and parents about the school's response to students with a confirmed food, insect or medication allergy

- **Emergency Response**
Procedures developed for emergency responses to allergic reactions for all in-school and out-of-school activities, including for school camps
- **Staff response**
All school staff with a duty of care responsibility for the wellbeing of students with confirmed allergy need to recognise and respond to an allergic reaction. They should be aware of their student's Individual Allergic Reactions Management Plans and consult with parents or guardians regarding in-school and out-of-school activities that may pose a risk to the student
- **Encouraging camps and special events participation**
The school will require parents or guardians to complete the DET's Confidential Medical Information for School Council approved school excursions form and consult with the on relevant strategies to facilitate participation.
Note: Consideration should be given to the food provided
- **Communicating with parents and guardians**
Regularly communicate with the student's parents or guardians about the student's successes, development, changes and any health and education concerns

Appendix 3

SUPPORTING RESOURCES

Department Resources

- <http://www.education.vic.gov.au/school/teachers/health/Pages/anaphylaxisschl.aspx>
-  [Individual Allergic Reactions Management Plan \(docx - 195.24kb\)](#)
- <https://edugate.eduweb.vic.gov.au/edulibrary/Schools/teachers/health/riskminimisation.pdf>

Other Resources

- <https://allergyfacts.org.au/> - about living with anaphylaxis
- <https://www.allergy.org.au/schools-childcare>
- [https://www.rch.org.au/allergy/about_us/Allergy and Immunology/](https://www.rch.org.au/allergy/about_us/Allergy_and_Immunology/)
- [https://www.rch.org.au/allergy/advisory/Anaphylaxis Support Advisory Line/](https://www.rch.org.au/allergy/advisory/Anaphylaxis_Support_Advisory_Line/)

PRIMARY SCHOOL