

Paringa Park Primary School

Anaphylaxis Management Guidelines

These guidelines have been developed to assist in preventing life threatening anaphylaxis. They are consistent with DECS guidelines "The management of Anaphylaxis in Education and Children's Services" and based on the Australasia Society of Clinical Immunology and Allergy guidelines.

The intent of these guidelines is to outline procedures for minimising the risk of food-induced anaphylaxis at Paringa Park Primary School.

- Although allergic reactions to food are common in children, severe life threatening reactions are uncommon and deaths are rare.
- The majority of food reactions, even to highly allergenic foods such as peanuts are not anaphylactic.
- The majority of food allergic and anaphylactic reactions occur in preschool age children.
- The risk of anaphylaxis in an individual case depends on a number of factors including the age of the child, the particular food involved, the amount of the food ingested and the presence of asthma.
- Peanuts and other nuts are the most likely foods to cause anaphylaxis.
- Anaphylaxis is very unlikely to occur from skin contact or exposure to food odours.
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THE FOUR STEPS IN THE PREVENTION OF FOOD ANAPHYLACTIC REACTIONS IN CHILDREN AT RISK

1. Obtaining medical information

An Anaphylaxis Care Plan will be obtained for each child. This plan needs to be completed by the child's medical practitioner and will include:

- Clear identification of the child (photo)
- Documentation of the allergic triggers
- Documentation of the first aid response including any prescribed medication
- Identification and contact details of the doctor who has signed the action plan.

.As food allergies may change with time this plan will be reviewed every 1-2 years.

2. Education of staff

The school will ensure that relevant staff receive education concerning the risk of food anaphylaxis. Topics that will be addressed include

- What is allergy?
- What is anaphylaxis?
- What are the triggers for allergy and anaphylaxis?
- How is anaphylaxis recognised?
- How can anaphylaxis be prevented?
- What should be done in the event of a child having a severe allergic reaction?
- Instruction on EpiPen® use.

3. Practical strategies to avoid exposure to known triggers

Paringa Park PS will implement practical strategies to avoid exposure to known triggers.

- All classes will be nut aware
- Educate all students on the hazards of nut and nut products for anaphylactic students and the importance of washing their hands after eating.

- Ensure that information is given to parents at Acquaintance Night in classes where there is a student with a severe allergic reaction – both verbally and in writing.
- Anaphylactic students' photographs are on display in the Canteen, Staff room, and First Aid Room, as well as in their current class roll book and in the TRT Folder to inform relief teachers.
- Before whole school events students will be reminded of our Nut Aware Policy in the school newsletter.
- Include these guidelines in the parent information book.

4. Age appropriate education of children with severe food allergies

- Work with parents to identify home and school strategies
- Implement the care plan and reinforce appropriate avoidance and management strategies.
- As children mature encourage them to take more responsibility for their own care.

GENERAL FOOD POLICY MEASURES

- There should be no trading and sharing of food, food utensils and food containers.
- It is ideal that children with severe food allergies should only eat lunches and snacks that have been prepared at home.
- Bottles, other drinks and lunch boxes provided by the parents for their children should be clearly labelled with the name of the child for whom they are intended.
- The use of food in crafts, cooking classes and science experiments may need to be restricted depending on the allergies of particular children.
- Food preparation personnel should be instructed about measures necessary to prevent cross contamination during the handling, preparation and serving of food. Examples would include the careful cleaning of food preparation areas after use and cleaning of utensils when preparing allergenic foods.
- The risk of a life threatening anaphylaxis from casual skin contact, even with highly allergenic foods such as peanuts, appears to be very low. On occasions casual skin contact will provoke urticarial reactions (hives). Simple hygiene measures such as hand washing and bench-top washing are considered appropriate.
- Food removal should only occur following recommendation by a relevant medical specialist and the provision of documentation of this recommendation.
- Parents of Junior Primary students will be asked to minimise the risk by not providing peanut butter or Nutella on sandwiches if a class member has a peanut allergy. This is due the higher risk of person to person contact in younger children.
- On school camps where there are children with severe nut allergies, it should be requested that foods containing nuts are not taken or supplied, consistent with the nut minimisation policy in the school canteen.
- Bullying by provoking food allergic children with the food to which they are allergic should be recognised as a risk factor and addressed by anti-bullying procedures.