



DOWERIN DISTRICT HIGH SCHOOL

Allergy Anaphylaxis GUIDELINES

RATIONALE

- Anaphylaxis is a severe, life-threatening allergic reaction. Allergies are increasing, with about 1 in 20 Australian children having a food allergy.
- The most common food allergies in children are milk (dairy), egg, peanuts, tree nuts (e.g. cashew, pistachio, almond etc), wheat, soy, sesame, fish and crustacea (shellfish). A smaller number of children have severe allergies to insect bites and stings (particularly bee stings).
- The best way to prevent anaphylaxis in schools is to know which students have been diagnosed with food, medication and insect allergies, and to then put plans in place to help prevent allergic reactions where possible. Communication between the school and parents/guardians is important to help students avoid known allergens.
- Adrenaline (epinephrine) given through an adrenaline injector (EpiPen® or Anapen®) into the muscle of the outer mid-thigh is the first line emergency treatment for anaphylaxis.

The Role of Parents with Anaphylactic Children

- Inform the school of the medical situation and provide the school with an action plan devised and signed by the child's doctor.
- Provide an EpiPen in a shock proof, light proof container for your child to access at any time.
- Educate their child on allergy avoidance.
- Respond immediately if contacted in an emergency. Please note: parents will be called after the ambulance.
- In a situation where there may be a concern about their child eating celebration cakes, provide a substitute.
- Update the school when new medical information becomes available.
- Keep a note of the expiry date of the EpiPen provided to the school and replace expired pens.

The Role of the School

- Ensure all staff have training (annually) in the use of an EpiPen.
- Considering each student's development, staff will talk about strategies to help keep students with food allergy safe, such as students not sharing food, drinking from their own water bottle and washing their hands after they have eaten something that their classmate is allergic to.
- Ensure relief teachers are aware of anaphylactic students.
- Follow the Medical Action Plan for each anaphylactic student as provided by parents.
- Ensure the safe, accessible storage of EpiPens and communicate this to staff.
- Take EpiPens and any other allergy medications for relevant students attending excursions, as per the students' Medical Action Plans.
- In the case of emergency and as a last resort, access another student's EpiPen if the affected student's EpiPen is unavailable. Specific permission for this will be sought in advance from each parent supplying an EpiPen.
- Inform parents of the Allergy Anaphylaxis Guidelines through the website and parent information session at the beginning of the year.
- Display photographs of anaphylactic students in the administration area, medical room and staff room as well as the Duty Folders.
- All care will be taken to promote allergy minimisation but food students bring to school will not be actively policed.

The Role of all Students

- Not to share food brought from home with other students.
- Wash their hands after eating.
- Anaphylactic students are to inform a staff member if they have a concern or (if able) possible anaphylactic reaction.

The Role of all Parents

- Parents are encouraged to bring only healthy foods that are nut free to school.
- Be aware that many foods contain traces of nuts (eg. Nutella, muesli bars, biscuits and chocolate bars).
- Encourage thorough washing of hands after eating.
- Ensure food bought to school for sharing such as birthday cakes and fundraising food are nut free.
- Discourage students from sharing food or water bottles.

Effective from: October 2022

To be reviewed: 2024