ELMORE PRIMARY SCHOOL

ANAPHYLAXIS MANAGEMENT POLICY

Elmore Primary School will fully comply with Ministerial Order 706 and the associated Guidelines published and amended by the Department from time to time.

INDIVIDUAL ANAPHYLAXIS MANAGEMENT PLANS

The Principal will ensure that an Individual Anaphylaxis Management Plan is developed, in consultation with the student's Parents, for any student who has been diagnosed by a Medical Practitioner as being at risk of anaphylaxis.

The Individual Anaphylaxis Management Plan will be in place as soon as practicable after the student enrols, and where possible before their first day of school.

School Staff will then implement and monitor the student's Individual Anaphylaxis Management Plan.

The student's Individual Anaphylaxis Management Plan will be reviewed annually or more often if deemed necessary, in consultation with the student's Parents.

It is the responsibility of the Parents to:

- provide the ASCIA Action Plan;
- inform the School in writing of their child's medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, changes and if relevant, provide an updated ASCIA Action Plan;
- provide an up to date photo for the ASCIA Action Plan when that Plan is provided to the School and when it is reviewed; and
- provide the School with an Adrenaline Auto injector that is current and not expired for their child.

PREVENTION STRATEGIES

- Make sure the ASCIA Action Plan and Epipen are easily accessible at all times.
- Liaise with Parents about food-related activities ahead of time.
- Never give food from outside sources to a student who is at risk of anaphylaxis.
- Products labelled 'may contain traces of nuts' should not be served to students allergic to nuts. Products labelled 'may contain milk or egg' should not be served to students with milk or egg allergy and so forth.
- Be aware of the possibility of hidden allergens in food and other substances used in cooking, food technology, science and art classes (e.g. egg or milk cartons, empty peanut butter jars).
- Ensure all cooking utensils, preparation dishes, plates, and knives and forks etc are washed and cleaned thoroughly after preparation of food and cooking.
- Have regular discussions with students about the importance of washing hands, eating their own food and not sharing food.
- A designated staff member should inform casual relief teachers, specialist teachers and volunteers of the names of any students at risk of anaphylaxis, the location of each student's Individual Anaphylaxis Management Plan and Adrenaline Autoinjector, the School's Anaphylaxis Management Policy, and each individual person's responsibility in managing an incident. ie seeking a trained staff member.
- All staff are to have completed Anaphylaxis training every 12 months.
- For special occasions, School Staff should consult Parents in advance to either develop an alternative food menu or request the Parents to send a meal for the student.
- For camps and excursions a risk assessment should be undertaken for each individual student attending who is at risk of anaphylaxis. Teachers must ensure they take the Anaplylaxis Management Plan, Epipen and contact details for students at risk

- All School Staff members present during the camp or excursion need to be aware of the identity of any students attending who are at risk of anaphylaxis and be able to identify them by face.
- Prior to the excursion taking place school staff should consult with the student's parents and Medical Practitioner (if necessary) to review the student's Individual Anaphylaxis Management Plan to ensure that it is up to date and relevant to the particular excursion activity.

SCHOOL MANAGEMENT AND EMERGENCY RESPONSE

The school is to

- have a complete and up to date list of students identified as having a medical condition that relates to allergy and the potential for anaphylactic reaction;
- have an up to date Individual Anaphylaxis Management Plans and ASCIA Action Plans displayed in a prominent place in the school staff room and office.
- ensure Adrenaline Auto injectors (Epipens) are stored in the school staff room.
- communicate with school staff, students and parents on any relevant anaphylaxis issues.
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ADRENALINE AUTO INJECTORS FOR GENERAL USE

The Principal will purchase Adrenaline Auto injector(s) for general use (purchased by the school) and as a back up to those supplied by parents.
The Principal will determine the number of additional Adrenaline Auto injector(s) required.
The Adrenaline Auto injectors for general use have a limited life, usually expiring within 12-18 months, and will need to be replaced at the school's expense, either at the time of use or expiry, whichever is first.

COMMUNICATION PLAN

The principal will ensure that the relevant staff members complete anaphylaxis management training every 12 months.
All school staff and relevant volunteers, specialist teachers and casual relief teachers will be briefed on anaphylaxis management procedures twice per year by a relevant staff member who has completed anaphylaxis management training within the past twelve months.
Staff will discuss the topic with all students during class, outlining things to be aware of with regard to anaphylaxis management.
The school will raise awareness about anaphylaxis in the school community so that there is an increased understanding of the condition by including information in the school newsletter.

ANNUAL RISK MANAGEMENT CHECKLIST

The Principal will complete an annual Risk Management Checklist as published by the Department of Education and Early Childhood Development to monitor compliance with their obligations if there are any current students who have been diagnosed as being at risk of anaphylaxis.

REVIEW CYCLE

This policy will be reviewed annually.

This policy was last updated on June 2026 and is scheduled for review in June 2027

Signed

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Principal School Council President

Date: …… Date: ……