Rationale:
Anaphylaxis is a severe, rapidly progressive allergic reaction that is potentially life threatening. The condition develops in approximately 1–2% of the population. The most common allergens in school aged children are peanuts, eggs, tree nuts (e.g. cashews), cow's milk, fish and shellfish, wheat, soy, sesame, latex, certain insect stings and medication.

Aims:
- To provide, as far as practicable, a safe and supportive environment in which students at risk of anaphylaxis can participate equally in all aspects of the student's schooling
- To raise awareness about anaphylaxis and the school's anaphylaxis management policy in the school community
- To engage with parents/carers of students at risk of anaphylaxis in assessing risks, developing risk minimisation strategies and management strategies for the student
- To ensure that each staff member has adequate knowledge about allergies, anaphylaxis and the school's policy and procedures in responding to an anaphylactic reaction

Implementation:
- Anaphylaxis is best prevented by knowing and avoiding the allergens
- Signs and symptoms of anaphylaxis include hives/rash, tingling in or around the mouth, abdominal pain, vomiting or diarrhoea, facial swelling, cough or wheeze, difficulty breathing or swallowing, loss of consciousness or collapse, or cessation of breathing
- Our school will manage anaphylaxis by:-
  - Providing regular professional development for all staff on the identification and response to anaphylaxis and the proper use of the EpiPen
  - Identifying susceptible students and knowing their allergens
  - Informing the community about anaphylaxis via the Newsletter
  - Discouraging food sharing, and restricting food consumed by the anaphylactic to that approved by parents
  - Keeping the lawns well mown, ensuring students always wear shoes
  - Requiring parents to provide an individual anaphylaxis management plan for any child who has been diagnosed by a medical practitioner as being at risk of anaphylaxis. This plan should be negotiated in consultation with the principal
  - Ensuring the individual anaphylaxis management plan(s) are in place as soon as practicable after the student(s) enrols, and where possible before their first day at the school
  - Requiring parents to provide an up-to-date EpiPen
  - Purchasing and maintaining an additional EpiPen in the First Aid room
  - Ensuring individual anaphylaxis management plans are copied and displayed in key staff rooms/first aid area with an up to date photo of the anaphylactic child(ren)
  - Reviewing each individual anaphylaxis management plan annually, if the child's condition changes or after an anaphylactic reaction
  - Identifying strategies to minimise the risk of exposure to allergens while the student is under the care or supervision of school staff, for in-school and out of school settings including camps and excursions
- The school will not ban certain types of food (e.g. nuts) as it is not practicable to do so. However, the school will request that parents do not send those items to school if at all possible and the school will promote non-sharing of food provided from home; that the canteen eliminate or reduce the likelihood of such allergens.
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<td>Author</td>
<td>K. Harnetty</td>
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