Maria International School of Bucharest

Resilience Respect Compassion Integrity Responsibility

First Aid and Managing Medical Conditions Policy

Our Mission

We provide a learning experience and environment at Maria International that fosters creativity and excellence, whilst providing supportive, stimulating and relevant lessons and resources within the context of the British style international curriculum.

Our school will be a caring place where adults and children are valued equally. Our aim is to create an environment where children and the whole school community will be inspired to be resilient, respectful, compassionate and act with integrity.

Our children will learn to respect themselves and others in an atmosphere of high expectations where they are nurtured and dare to make mistakes.

We will strive to create opportunities for students to have a well-rounded school and learning experience, where they can develop critical thinking skills and work in collaboration with others.

Our Values

Resilience - We will handle adversity and problems with a mentality that enables us to keep going and do better.

Respect - We treat others with dignity, empathy and equality through our words and actions.

Compassion - We are kind, and caring and will help everyone to be the best they can be.

Integrity - We are open, honest and act with good morals and ethics in all situations.

Responsibility - We ensure our own work, learning and duties are completed in a timely manner and to a high standard.

Rationale

At Maria International, staff and teachers who supervise or are in charge of the students are expected to use their best efforts to secure the welfare and safety of the students. Generally, the result of taking no action in a medical emergency can cause more serious consequences than those trying to take action.

Maria International School's staff, however, are not trained medical professionals and as such are not expected to provide medical treatment. The staff are, however, expected to provide an initial response to a medical incident. The purpose of First Aid is to:

- Preserve life

- Prevent the injury or illness from becoming worse
- Help promote recovery
- Provide comfort to the injured or ill
- Provide initial assessment and ascertain whether professional treatment is necessary.

Maria International School's staff should also try to make use of the school's nurse and her routines when needed.

Aims

At Maria International, we endeavour to

- Provide First Aid as necessary from trained staff
- Promote Health & Safety awareness in students and adults, in order to prevent First Aid from becoming necessary
- Encourage every member of the school community to take responsibility for their health needs.

This policy should be read and used in conjunction with the following key documents and policies:

- Maria International Health and Safety Policy
- Maria International Admissions Policy
- Maria International Terms and Conditions
- Maria International Staff Handbook
- All relevant EU and Romanian legislation

Roles and Responsibilities

Records of staff members' First Aid training are maintained by the HR Office. In all cases, staff should immediately notify the office in the event that First Aid is required, using the School Nurse as needed.

All Staff

All staff will:

- Ensure that they have read and understood the school's First Aid Policy
- Be able to act safely, promptly and effectively when an emergency occurs
- Be aware of the specific medical needs of the students in their care
- Be trained in Basic First Aid
- Understand the importance of personal hygiene in First Aid procedures
- Record any incident where First Aid is administered on a Report Log Sheet, available on the Google Drive

Staff With Advanced First Aid

Some staff members have gained advanced levels of First Aid certification. These may or may not be current, but the staff member has the skills and knowledge to play a leading role in the management of a medical emergency.

Staff with advanced First Aid training who have agreed to the responsibility may be called upon to give additional advice to manage an illness or injury when another staff member feels it is beyond their competence.

Staff with advanced First Aid training should be able to:

- Assist prior to the School Nurse arriving and update the Nurse on any first aid administered.
- Administer cardiopulmonary resuscitation (CPR) promptly and effectively
- Administer first aid safely, promptly and effectively to a student or staff who:
    - Is wounded or bleeding
    - Is suffering from an injury to bones, muscles or joints
    - Is unconscious
    - Is suffering from shock
    - Has been burned or scalded
    - Has an eye injury
    - May have been poisoned
    - Has been overcome by gas or fumes
- Recognise common major or minor illnesses and take appropriate action
- Use the first aid equipment provided in the workplace
- Transport a student or staff member safely as required by the circumstances of the workplace; (i.e. where leaving the injured party in a given location would be dangerous)

Senior Leaders

The Headteacher and Deputy Headteacher should be informed in the event of any serious or potentially serious medical incident. S/He will then decide what action is to be taken, be it calling an ambulance or allowing the student to return to class.

Trip Leaders

The staff member organising and leading an off-site trip or activity is responsible for taking and returning the required First Aid kit(s). A member of the staff of the trip should be designated to oversee any First Aid incidents as part of the trip planning process.

Parents/Guardians

Parents/Guardians are responsible for ensuring that the school has accurate and up-to-date information about their son/daughter and about arrangements for managing emergencies. Such information includes:

- notification of any medical conditions, either at the time of admission (on the Application Form and on the Home Information Form) or at any subsequent point, and of any changes to these conditions and/or treatment;
- immediate notification of any changes in their contact details (phone, mobile or email) or those of relevant emergency contacts.

Parents should not send their children to school when they are sick.
Parents should comply with the procedures for the administration of medicines during the school day (see 7 below and appendices 1 and 2).

Wherever possible, the parents will collect the student from the school after an accident or medical incident, or give their consent by telephone should ambulance transportation to the hospital be required and will meet the student at the hospital (see 5.2, below). They then liaise directly with medical professionals with regard to follow-up and further treatment.
However, signing the Acceptance Form confirms that parents agree with the Terms & Conditions which state that *"should the school be unable to contact the parents, or the urgency of the situation so dictates, the school shall be authorised to make the decision on the parents' behalf should consent to be required for urgent treatment (including anaesthetic or operation) recommended by a doctor."*

School Nurse

The roles and responsibilities of the school nurse are:
• Keeping students safe by working with other professionals
• Support the mental health and wellbeing of students and teachers
• Administering first-aid in case of accidents and injuries
• Recording and reporting injuries to the front office and DSL
• Educating students and teachers about health and medical assistance
• Promoting an optimal level of wellness among students
• Assessing each individual's health when they enter the building
• Assistance and advice for parents and young people on health services in Romania and finding specialist help.

First Aid Supplies

First Aid Boxes and First Aid Kits

First Aid boxes are available around the school for use if needed by all staff/adult visitors. First Aid boxes should be accessible to adults but kept out of reach of young children. First Aid kits are also taken on all school trips.

First Aid Procedures

The School Nurse Routines must be followed in the event of injury or medical emergency:

- If a child is unwell in class/during a lesson, and the teacher decides they need further medical attention, the School Nurse must be notified (the Homeroom Teacher or the TA should call her on the phone)
- The school nurse will contact the relevant Head of Key Stage or Deputy Headteacher or Headteacher in case of head or more serious injuries
- The injured person will be taken to the School Nurse's Office (where appropriate).
- An accident and incident report will be completed by the teacher present and handed to the School Nurse.
- The School Nurse will assess the student's medical condition.
- Parents will be contacted by phone.
- First Aid will be administered by the School Nurse as appropriate.
- A follow-up email with details of the incident and First Aid administered (if applicable) will be sent to the parents.
- Details of the incident and First Aid administered (if applicable) will be entered into the student's medical record by the School Nurse.
- Either the student is allowed back in class, receives further on-site medical attention from the School Nurse, or is picked up by parents to be sent for further medical attention off-site.

Response To Injury Or Illness

Depending on the severity of the injury, the injured party should either be sent/taken to Reception/School Nurse or Head of Key Stage and a member of the school's Leadership Team should be called to the site of the incident. The student's parent/guardian should be contacted by the School Nurse as soon as possible. However, there should be no delay in obtaining outside medical attention should it be necessary if the parent/guardian is not contactable.

Serious Injury

In all cases where an accident involves a serious injury, (e.g. broken bone) or where there is any doubt about the injury, the injured person is not to be moved, unless in danger, until assessed

by the School Nurse and a member of the school's Leadership Team who should be contacted immediately. They will then decide what action is to be taken, such as calling an ambulance. Parents will be contacted by the School Nurse by phone and email detailing the treatment administered. The details will be entered into the Student Medical Record by the school nurse.

Minor Injury

For cases involving injuries that are less serious but still of concern (e.g. strains, cuts, etc.), the parents/guardians will be contacted by the School Nurse by phone and email detailing treatment administered, teacher (where possible) or Reception, advised of the situation and advised to collect their daughter/son. The details will be entered into the Student Medical Record by the School Nurse.

No Visible Injury

In other cases (e.g. where no injury is visible), the student will be kept under observation by the School Nurse or allowed back into class if advised that this is appropriate by a member of the school's Leadership Team. Parents will be contacted by the School Nurse by email if allowed back in class or by phone if sent home. The details will be entered into the Student Medical Record by the School Nurse.

Head Injuries

In the event of a head injury, the person will be monitored and not left alone or unsupervised. In all cases, the parents/guardians will be advised and informed of the incident by the School Nurse by phone. If concerns arise, medical attention should be obtained immediately. The details will be entered into the Student Medical Record by the School Nurse.

Injuries Involving Bleeding

Any staff member dealing with injuries involving bleeding must wear appropriate protective clothing. Disposable gloves are provided for this purpose and kept in the First Aid boxes. Parents will be contacted by the School Nurse by phone. The details will be entered into the Student Medical Record by the school nurse. If medical treatment is required but it is not an emergency, then the parents will be contacted for them to come to school and take over responsibility for the student.

Transfer To Medical Treatment Centre

When a student, staff member or other visitor suffers an injury (or onset of ill-health) onsite, First Aid will be sufficient for the majority of cases. However, review or further treatment at a hospital or other medical facility may be necessary and, unless a clearly minor incident, the school will always advise this, either immediately or at the end of the school day. The School Nurse,

Headteacher or another member of the Maria International Management team will determine the most appropriate action to take in each incident:

- Where the injury is an emergency, an ambulance will be called (112) following which the parents will be notified and advised to go directly to a specified clinic/hospital;
- Where medical treatment is required but it is not an emergency, then the parents will be contacted for them to come to school and take over responsibility for the student.

If the parents will be meeting the student at the hospital, a member of staff or School Nurse will accompany the student in the ambulance and remain with him/her at the hospital until the parents arrive. Arrangements will be made for the staff member to return to school or home after this.

Recording and Reporting

All accidents involving injury to students, staff or visitors are to be recorded by the member of staff who witnessed it on an Accident Log Sheet, kept in Reception. Any other medical incident is to be recorded using an Incident Log Sheet, also available at Reception. Completed Accident or Incident Logs are sent to the Designated Safeguarding Lead for secure record-keeping. The details will be entered into the Student Medical Record by the School Nurse. Accidents that required First Aid and other medical incidents are summarised monthly by the Designated Safeguarding Lead.

Offsite Medical Incidents

Any accident off-site where First Aid is administered to students is to be recorded by the member of staff who witnessed and/or responded to it. Wherever possible, notes of the incident should be made as soon as possible after the incident took place. These notes can be used to inform what is then written on the Accident or Incident Log Sheet, available at Reception, which must be completed as soon as possible upon return to school. The details will be entered into the Student Medical Record by the School Nurse.

Students With Medical Needs

The school will accommodate students with medical needs (such as asthma, allergies, regular medication, etc.) wherever practicable. Parents should inform the school of any medical needs as part of the enrollment process. The relevant Head of Key Stage and the Class Teacher/Form Tutor and relevant teaching staff should be informed of any student who has medical needs.

Staff members should immediately notify the office/admin staff of any new/further medical information gathered from parents or students, so it is input into the student's file and relevant staff are informed in a timely manner. Parent and Emergency contacts are listed and stored in the office/admin area, and are checked at the start of each year through a contact form issued as part of the initial sessions with Class Teachers/Form Tutors and passed on to the

office/admin staff. Parents should inform the office/admin staff of any changes, but any staff members who become aware of changes in contact details should also inform the office/admin staff to ensure the student records are correct and updated promptly.

Manual Handling

The school has limited capacity to accommodate students with physical disabilities. Even so, students with temporary movement restrictions may require occasional physical support or manual handling. In order for these students to access the curriculum or to egress the building in an emergency, there must be a balance between the health and safety considerations and the student's rights to dignity and autonomy and so manual handling is permitted at the level of "as any prudent parent would" when in charge of such a student.

Administering Medicines

When students are unwell, they should stay at home. Schoolwork, including homework tasks or tests, can be rescheduled or sent home where appropriate.
Medicines should only be brought to school when absolutely necessary, i.e. when it would be detrimental to the child's health if the medicine were not administered during the school day.

- Medicines will not be accepted in school that require medical expertise or intimate contact to administer them to the child
- Medicines must be brought to school by an adult, who must complete a 'Request To Administer Medicines' form for the medicine to be administered by school staff;
- Medicines must be in the original container labelled with the student's name, dosage and frequency;
- Tablets should be counted and recorded when brought in to school and when collected at the end of the school day;
- Painkillers, such as paracetamol or ibuprofen, and antibiotics may NOT be brought into school
- Administration of any medicines at school must be recorded on the Record Of Prescribed Medicines Given To A Child At School.
- Some students may self-administer medication (e.g. insulin) if this has been authorised in writing by the parents and countersigned by the relevant Head of Primary/ Secondary.

If a student refuses to take medicine, staff will not force them to do so. The refusal will be recorded and the parents informed by the school nurse.

Infectious Diseases

Students or staff who have contracted infectious diseases should notify the school of this as soon as possible and remain at home until the period of infection (as advised by Ministry of Health guidance) has passed. Where there are several children in close proximity (class, activity group, etc.) with the same disease (e.g. Chicken Pox or German Measles), the school will notify the staff and parents/guardians of that group where appropriate, so that they can be vigilant regarding symptoms.
In times of any national or international health concerns (e.g. H1N1 in 2009, COVID 2019 to present), the school will follow the guidance issued by the Ministry of Health and issue advice from other international agencies where appropriate.

Specific Medical Conditions

Allergies

Allergies are the body's immune response to a substance to which it has become hypersensitive. Minor Allergic Reactions, such as the 'hay fever' reaction to pollen can usually be relieved by antihistamines.
Severe Allergic Reactions (Anaphylaxis), are often caused by exposure to an allergen such as an insect sting or food substance and require immediate medical treatment

If a person is experiencing <u>ANY</u> of the following symptoms after exposure to allergen:
Signs and Symptoms: - Difficulty in breathing or swallowing - Weakness or floppiness - Steady deterioration - Collapse or unconsciousness
Action: - Call Headteacher or, in case of absence, Deputy Headteacher
Call Emergency Services (112)
Any student with a severe allergy condition will have this recorded within the student's file and this record will include an individual care plan. A list of students with allergies is also posted in the Kitchen. All staff will be made aware of students with severe allergies, what they are allergic to and details of the care plan.

One of the most common triggers of severe allergic reactions is food-containing nuts. Therefore at MISB, peanuts are forbidden. Peanut products should not be brought into school.

At events where food is provided by parents, all items should be labelled and include a description of ingredients, so that individuals with allergy concerns can avoid products that may trigger a reaction.

Asthma

Asthma is a common long-term inflammatory disease of the airways, characterised by airflow obstruction and bronchospasm. It may commonly be induced by exercise, stress or by an allergic reaction. Most asthma sufferers carry a reliever inhaler (usually blue) and most asthma attacks can be swiftly relieved by this. If there is no relief, medical treatment is required.

If an asthmatic is experiencing the following symptoms:
Signs and Symptoms: - Coughing - Shortness of breath - Wheezing - Feeling tight in the chest - Being unusually quiet - Having difficulty speaking in full sentences
Action: - Keep the person calm - Encourage the person to sit up and slightly forward - Encourage two puffs of their reliever inhaler (usually blue) - Immediately inform the school nurse - Loosen tight clothing - Call Headteacher
Call Emergency Services (112)) if: - There is no improvement in 5-10 minutes - The person is too breathless or exhausted to talk - The person has blue lips - You are in any doubt
Any student with asthma will have this recorded within the student's file. Additional notes will be shared if the level of asthma reaches the need for medical intervention.

Diabetes

Diabetes is a condition causing high blood sugar levels over a long period of time caused by an imbalance of insulin. Diabetes is best managed through a carefully-regulated diet and regular

physical exercise. The form of diabetes most common among children and young people may require daily insulin injections, and most sufferers quickly learn to self-medicate.

If a diabetic is experiencing ANY of the following symptoms:
Signs and Symptoms: - Hunger - Trembling or shaking - Sweating, Pallor - Anxiety or irritability - Mood change - Lack of concentration or vagueness - Drowsiness

Action:
- These are signs of Hypoglycemia - low blood glucose levels
- Inform the school nurse
- Immediately give something sugary - cola or other non-diet drink followed by:
  - a cereal bar or two biscuits
  - a roll/sandwich
  - a portion of fruit
  - a meal (if it is due)
- Call Headteacher

Call Emergency Services (112) if: - The person becomes unconscious (do not try to give food or drink if the person is unconscious) - You are in any doubt

If a diabetic is experiencing ANY of the following symptoms:
Signs and Symptoms: - Sweet smelling breath (pear drops) - Thirst - Frequent urination - Tiredness - Dry skin - Nausea - Blurred vision
Action: - These are signs of Hyperglycemia - high blood glucose levels - Inform the school nurse

- Call Headteacher who will contact the parents/guardians to:
  - Arrange for an immediate blood glucose test
  - Bring extra insulin if required

Call Emergency Services (112)) if: - There is deep and rapid breathing, vomiting or breath smells of nail - polish remover - You are in any doubt
Any student with diabetes has this recorded within the student's file and this record will include an individual action plan. All staff are made aware of students with diabetes, and details of the care plan.

Epilepsy

Epilepsy is a condition characterised by fits or seizures. Between 5% and 10% of the population experience a seizure at least once in their life. For many of those for whom seizures recur, epilepsy may be managed by medication.

If a person is experiencing ANY of the following symptoms:
Signs and Symptoms: - Loss of consciousness, the body stiffens and falls to the ground - Seizure - jerking movements for a minute or two - Blue tinge around the mouth - Loss of bladder/bowel control - Consciousness slowly returns
Action: - Inform the school nurse - Protect the person from injury (remove harmful objects from nearby) - Cushion the head - Once the seizure has finished place in the recovery position and check breathing - Calm and reassure the person, staying with them until recovery is complete - Calm and reassure any bystanders – witnessing a seizure may be a traumatic event for them too - Call Headteacher
Call Emergency Services (112) if: - It is the first seizure - The seizure lasts for more than 5 minutes

- One seizure immediately follows another - The person is injured which may require medical attention
Any student with epilepsy has this recorded within the student's file and this record will include an individual action plan. All staff are made aware of students with diabetes, and details of the care plan.

Review and Evaluation

This policy is to be renewed, evaluated and appropriately updated annually by the Maria International leadership team and Head Teacher.

Date of next review: 15/08/2025

Prepared/Updated by: Nicholette Vicol **Date:** 20/11/2024

Approved by: Alice Bleiu **Date**: 23/11/2024

This policy is to be reviewed **annually** and updated as and when relevant changes occur.

Report Form

Date and Time:	
Location:	
Type Of Incident	• Medical (Witness → HR Teacher → DSL) • Behaviour (Witness → HR Teacher → Head Teacher) • Bullying (Witness → HR Teacher → DSL+Head Teacher) • Other
Name Of Person Involved:	• Student • Staff • Visitor
Staff Supervising At Time:	
Description of Event(s):	
Action(s) Taken:	
First Aid Report: **(If Required)**	
Next Steps:	
Senior Leadership Member In Attendance:	• Yes • No **Name:**
Parents/Guardians Informed By:	**Name:** **Signature:**
Senior Leader Informed: **(If Not In Attendance)**	**Name:** **Signature:**
Report Completed By:	**Name:** **Signature:**
Report Filed By DSL` **(If Required)**	**Name:** **Signature:** **Date:**

Request To Administer Medicines Form

Student Name:	Date Of Birth:	Year Group:
Parent/Guardian Name:	Relationship To Student:	Contact Numbers: Home: Work: Mobile:

Condition/Illness:	
Doctor's Name:	Telephone Number:
Clinic/Surgery Name:	Doctor Note Attached?: • Yes • No

	Medicines To Be Given:	Dosage:	Frequency:	Time:
1.				
2.				
3.				

The above information is accurate to the best of my knowledge at the time of writing. I will inform the school in writing of any changes to the above information. I give my consent to the school to administer the medication in accordance with MISB policy.

Signed: Date:

This form must be attached to the student's 'Record of prescribed medicines given to a child at school'

Record Of Prescribed Medicine Given To A Child At School

Student Name:	Date Of Birth
	Year Group

	Date	Time	Medicine Given	Dosage	Signature
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19.					
20.					

Minimising Risk From Food Allergies

Strategies that may be implemented to minimise risk to food allergy sufferers	
The general banning of foods or food products is not recommended by health experts as there is a lack of evidence to suggest that banning food from entering a school is helpful in reducing the risk of anaphylaxis. Instead, schools are encouraged to become aware of the risks associated with anaphylaxis and implement a broad range of strategies to minimise exposure to known allergens. These strategies are developed taking into account the needs of the individual student and the context of the particular school. Schools, however, may decide in consultation with their community to ask families not to bring specific items (e.g. types of nuts or nut products) to the school site or to school activities as one of their risk minimisation strategies. This will not, however, guarantee a school site is "nut-free" and schools should not claim to be so: such a claim cannot reliably be made and, if it were made, could lead to a false sense of security about exposure to nuts or nut products.	
Risk	**Examples of strategies that may be implemented**
Break and Lunch	Request that all parents clearly label lunch boxes, bottles and other drinks with the name of the child for whom they are intended. Plan regular discussions with students about the importance of washing hands, eating their own food, and not sharing food, food utensils or food containers. Place visual reminders around the classroom, as appropriate. If a child in the early primary years (Early Years to Year 4) has a peanut allergy, consider, in consultation with the school community, asking parents not to send peanut butter on sandwiches or in school lunches (due to higher risk of person to person contact in this age group). Blanket bans, however, are not recommended. For early primary school children, consider having the class or year group eat lunch in a specified area which is a focus of supervision, due to the higher risk of person to person contact in this age group. The student/s should not be isolated from their peers in any way.
Class Parties and	Liaise with parent/guardian of the student at risk of anaphylaxis about activities involving food ahead of time so planning can occur, and where appropriate, they can provide suitable food or the activity may be adjusted to accommodate the student's allergies

Whole-School Events	. Inform other class members' parents of food allergens that affect students in the class and request these foods be avoided. Use non-food treats as far as possible. If food treats are used in class or other activities, discuss this with the parents of students at risk of anaphylaxis ahead of time so they can provide suitable food. If using alternative foods only for the student at risk (e.g. cupcakes as a replacement for a piece of birthday cake), store food in a clearly-labelled container to prevent cross-contamination.
Curriculum Activities That Involve Food	Avoid the use of the known food allergen when the student at risk of anaphylaxis is participating in curricular activities. Where practicable, replace known allergens in the recipe prepared in cooking and other classes by the at-risk student. Where not practicable, another recipe should be used by that student. Raise awareness of the possibility of hidden allergens in cooking, science and art classes/ activities, e.g. egg or milk containers, peanut butter jars. The use of a particular food may need to be restricted, depending on the allergies of particular students and their age and developmental stage. Discuss with classes that prepare food the risks associated with sharing their food outside the classroom. Put food handling and hygiene procedures in place and communicate to all staff and students involved in food preparation to avoid cross-contamination. These procedures should include: - thorough hand washing before and after handling foods - careful cleaning of food preparation areas including benchtop areas and utensils before and after use. Have regular discussions with students about the importance of washing hands, eating their own food, and not sharing food, food utensils or food containers.
Food Allergies In The Dining Room (Risk minimisation strategies for the external food contractor include not using or producing specific	Identify foods that contain, or are likely to contain, known allergens and replace them with other suitable foods. Clearly label foods items on the menu. Inform canteen staff (including volunteers) about students at risk of anaphylaxis and the foods they are allergic to. Display a copy of the student's Action Plan for Anaphylaxis in the Dining Room .

nut products, but may not necessarily include those which state 'may contain traces of nuts'.)	Have separate areas and utensils for preparing food for students at risk of anaphylaxis. Utensils may be used by any student, so must be thoroughly washed. Put food handling and hygiene procedures in place and communicate to all staff and volunteers the need to avoid cross-contamination. These procedures should include: - thorough hand washing before and after handling foods - careful cleaning of food preparation areas including benchtop areas and utensils before and after use. Arrange for canteen staff and volunteers to undertake anaphylaxis training.
Trying New Foods (e.g. through the kitchen, curriculum or extracurricular activities)	Notify parents prior to events that include the tasting of new foods at school so planning and consultation can occur with the parent of the student at risk of anaphylaxis. Staff involved in such events should know which students are at risk of food-induced anaphylaxis and what the student is allergic to. Provide staff supervision so that no student is pressured to try foods during the promotion and encouragement of new foods
Off-Site Activities	Consider the potential exposure to allergens when consuming food on buses where teachers are supervising students in transit to school-related activities. Adopt a 'no food sharing' rule on excursions. Including reminders on permission slips. Advise camps/accommodation providers and airlines in advance of any student food allergies and ensure the adrenaline autoinjector and Action Plan for Anaphylaxis are held by a staff member at all times, including on aircraft. Arrange for the parent of a student with allergies to discuss the menu with the food provider at the accommodation facility well in advance of the trip. Liaise with parents/carers to develop alternative menus or allow students to bring their own meals. Avoid using known food allergens in activities and games, including as rewards.