POLICIES - ANAPHYLAXIS



RATIONALE

Anaphylaxis is a severe, rapidly progressive allergic reaction that is potentially life threatening. 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.

The key to prevention of anaphylaxis in schools is knowledge of those students who have been diagnosed at risk, awareness of triggers (allergens), and prevention of exposure to these triggers. Partnerships between schools and parents are important in ensuring that potential student contact with certain trigger foods or items is minimised while at school. Adrenaline given through an auto-adrenaline injecting device (e.g. EpiPen®, Anapen) to the muscle of the outer mid-thigh is the most effective first aid treatment for anaphylaxis.

PURPOSE

- ✓ 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

In doing so the school will fully comply with Ministerial Order 706 and the associated guidelines published and amended by DET at various times.

INDIVIDUAL ANAPHYLAXIS MANAGEMENT PLANS

The principal will ensure that an individual 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.

The individual anaphylaxis management plan will set out the following:

- information about the diagnosis, including the type of allergy or allergies the student has (based on a diagnosis from a medical practitioner).
- 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 name of the person/s responsible for implementing the strategies.
- information on where the student's medication will be stored.
- · the student's emergency contact details.
- an emergency procedures plan (ASCIA Action Plan), provided by the parent, that:
 - ✓ sets out the emergency procedures to be taken in the event of an allergic reaction.
 - is signed by a medical practitioner who was treating the child on the date the Practitioner signs the emergency procedures plan; and includes an up to date photograph of the student.

The student's individual management plan will be reviewed by the First Aid co-ordinator, in consultation with the parent/carers:

- annually, and as applicable if the students condition changes, or immediately after a student has an anaphylactic reaction at school
- when the student is to participate in an off-site activity, such as camps and excursions, or at special events conducted by the school(eg. Class parties, cultural events fetes, incursions).

IT IS THE RESPONSIBILITY OF THE PARENT TO:

- provide an auto-adrenaline injecting device to be located permanently at the school, with a valid expiry date.
- provide the emergency procedures plan (ASCIA Action Plan) updated at the start of each year
- inform the school if their child's medical condition changes and if relevant provide an updated emergency action plan (ASCIA Action Plan)
- provide an up to date photo for the emergency action plan when it is provided to the school and when it is reviewed
- if possible provide a second auto-adrenaline injecting device (from home) on the day of any excursion and for the duration of any camp (Medical forms for excursions/camps will include parent notification of this.)

STORAGE OF EPIPENS

On receipt of a child's auto-adrenaline injecting device the school will label both the auto-adrenaline injecting device and the box with the child's name.

All the auto-adrenaline injecting devices will be stored in a large foil lined cooler bag as they need to be kept between 15-25 degrees. Each individual auto-adrenaline injecting device will also be contained in a smaller lined bag or cooler box, within the larger foil lined cooler bag. This will give two layers of insulation, as well as being kept in the first aid room, which remains reasonably cool.

COMMUNICATION PLAN

The principal will be responsible for ensuring that a communication plan is developed to provide information to all staff, students and parents about anaphylaxis and the school's anaphylaxis management policy. This will ensure notification at staff meetings and visual displays of the child and their needs/ allergies etc. in classrooms, canteen and administrative areas. The communication plan will include information about what steps will be taken to respond to an anaphylactic reaction by a student in a classroom, in the school yard, on school excursions, on school camps and special event days.

Volunteers and casual relief staff of students at risk of anaphylaxis will be informed of students at risk of anaphylaxis and their role in responding to an anaphylactic reaction by a student in their care. Information folders will be in each classroom, the canteen, staffroom, OSHC room and admin areas.

All staff will be briefed once each semester by a staff member who has up to date anaphylaxis management training on:

- the school's anaphylaxis management policy
- the causes, symptoms and treatment of anaphylaxis
- the identities of students and staff members diagnosed at risk of anaphylaxis and where their medication is located
- · how to use an auto-adrenaline injecting device
- the school's first aid and emergency response procedures

STAFF TRAINING AND EMERGENCY RESPONSE

Teachers and other school staff who conduct classes which students at risk of anaphylaxis attend, or give instruction to students at risk of anaphylaxis must have up to date training in an anaphylaxis management training course.

At other times while the student is under the care or supervision of the school, including excursions, yard duty, camps and special event days, the principal must ensure that there is a sufficient number of staff present who have up to date training in an anaphylaxis management training course.

The principal will identify the school staff to be trained based on a risk assessment.

Training will be provided to these staff as soon as practicable after the student enrols. Wherever possible, training will take place before the student's first day at school. Where this is not possible, an interim plan will be developed in consultation with the parents. The school's first aid procedures and student's emergency procedures plan (ASCIA Action Plan) will be followed in responding to an anaphylactic reaction.

START OF YEAR PROCEDURES

A First Aid Officer will check the expiry date of all auto-adrenaline injecting devices at the beginning of the year and notify parents of expiry dates, so the parent can arrange for replacement prior to expiry. It is the parents ultimate responsibility to ensure their child has a current plan and in date auto-adrenaline injecting device. The auto-injector devices will be registered on the EPIPENCLUB website where a reminder text will be sent near to the expiry date. The Principal will purchase Adrenaline auto-injector(s) for general use (purchased by the school) and as a back up to those provided by parents. The Principal will determine the number of additional auto-injectors required and in doing so will take into account:

- the number of students enrolled at the school who have been diagnosed as being at risk of anaphylaxis
- the accessibility of the auto-injectors that have been provided by parents of students who have been diagnosed with being at risk of anaphylaxis
- the availability and sufficient supply of Adrenaline auto-injectors for general use in specific locations: in the yard, at excursions, camps and special events conducted by the school
- the auto-injectors have a limited life, usually expiring within 12-18 months, and will need to be replaced at the schools expense, either at the time of use or expiry, whichever occurs first.

COMMUNICATION OF THE ANAPHYLAXIS POLICY

Following any review/update of the Anaphylaxis Policy a copy will be sent to families with an anaphylactic child. Any new or incoming Prep child with anaphylaxis will also be sent a copy of the Anaphylaxis policy. The current Anaphylaxis policy will also be available from the school website.

ANNUAL RISK MANAGEMENT CHECKLIST AND PREVENTION STRATEGIES

The Principal will conduct an annual Risk Management Checklist as published by DET to monitor compliance with their obligations. The school will take measures to minimise the risk of an anaphylactic reaction by:

The school does not ban any particular food items/ingredients/plants/products related to allergies or anaphylaxis. Instead preventatives are put in place to assist with the management of allergies/anaphylaxis.

Food brought to, purchased at and/or consumed at school

(e.g. lunchboxes, fundraisers e.g Tuesday Treat, special events/lunches, class parties, cooking, science experiments, rewards)

- ✓ Teachers will send a letter home at the start of the school year indicating to parents of any food allergy/anaphylactic risk in their child's class. This will promote family awareness and consideration in selecting food items sent to school.
- ✓ Students are reminded to not share food provided for them in their lunch boxes or food they have purchased or cooked at school
- ✓ Parents of children with food allergies/anaphylaxis are encouraged to provide a "Treat Box" for their child as an alternative for fundraiser days, rewards, special events
- √ Food rewards are discouraged and non-food rewards encouraged
- ✓ Parents of children with food allergies/anaphylaxis may offer to be a class helper for "class parties" and "Tuesday Treats" if they have a WWC check or alternatively provide party food on the day suitable to their child's allergy/anaphylactic condition
- ✓ Consideration will be given to planned fundraisers and special lunches
- ✓ Teachers will consider allergies/anaphylactic conditions when planning cooking or science based food activities
- ✓ Children are encouraged to wash their hands before and after eating
- ✓ On display in the canteen are photos/names of children who have food allergies/anaphylactic risks for the Manager and helpers to view. Children with food based anaphylaxis/allergies need to be ultimately responsible with parental support for food selection. Parents are encouraged to visit the canteen and/or contact the Canteen Manager regarding foods sold and ingredients. The Canteen manager will educate helpers on food handling procedures

General preventions

- ✓ Music teachers should be aware of the need to thoroughly clean any wind instruments if they are to be used by more than one student
- class teachers are to consider the risks associated with allergens being present in a range of items such as play dough, face paint
- ✓ children with allergies to sunscreen should provide their own supply or have the teacher alerted to the fact that they may not wear sunscreen
- class pets and animal based incursions/excursions, chicken incubators all run a risk of allergens being present and awareness is important for both the class teacher and student
- ensuring egg cartons are safely stored out of reach and checking with parents before any activities are undertaken using face paints or animals
- ✓ all staff are aware of students and staff with allergies and anaphylactic conditions
- ✓ staff undertake regular anaphylaxis training and are aware of school procedures for responding promptly to an anaphylactic situation
- ✓ students are educated through our Engaging & Effective classrooms program each year about any allergies/anaphylactic conditions in their class.
- √ being prepared on all camps and excursions with up to date information, medical emergency procedures, and First Aid
 kits complete with action plans
- ✓ being aware of outside areas of concern, keeping areas mown and encouraging children to play in safe areas away from insect activity
- ✓ students at risk of food or insect sting anaphylaxis should be excused from rubbish pick up duties, alternate tasks should be considered
- √ adding specific detail of risk management to individual Anaphylaxis Management Plans
- ✓ consideration will be given to the allergy/anaphylaxis needs associated with any excursion and camp

REFERENCE

This document was modified from

http://www.education.vic.gov.au/school/teachers/health/Pages/anaphylaxisschl.aspx to comply with Ministerial order 706 and the revised Anaphylaxis Guidelines.

REVIEW DATE

This policy will be reviewed annually as training of all staff is implemented in order to ensure it remains up to date and caters for all anaphylactic children and staff members.

RATIFIED BY SCHOOL COUNCIL 28th April 2015