ANAPHYLAXIS POLICY

This policy has been developed based on requirement of DET in particular Ministerial Order No. 706, and in consultation with members of School Council.

Date written: June 2015
School Council Ratified: Date reviewed:
Next review:

PURPOSE

The policy has been developed to ensure the ongoing well-being of all members of our community:

- 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, and 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.
- This policy forms part of our Student Engagement and Well Being Policy.

POLICY STATEMENT

We recognise that:

- 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 certain foods or items are kept away from the student while at school.
- Adrenaline given through an Ana pen/EpiPen® auto injector to the muscle of the outer mid-thigh is the most effective first aid treatment for anaphylaxis.
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This policy complies with Ministerial Order No.706: Anaphylaxis Management in Victorian schools and that this policy will need to be updated in regard to guidelines related to anaphylaxis management in schools as published and amended by the Department from time to time.

IMPLEMENTATION

Individual Anaphylaxis Management Plan

- 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 enrolls and where possible before their first day of school.
- Individual student plans will be stored in the First Aid Room along with each child’s Epipen/Antigen or other needed medication provided by parents.
- Information on students with Anaphylaxis will also be displayed in the canteen.

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:
- 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.
- Includes an up to date photograph of the student.

The student’s Individual Management Plan will be reviewed, in consultation with the student’s parents/careers:
- Annually, and as applicable.
- If the student’s condition changes.
- Immediately after a student has an anaphylactic reaction at school.

Royal Children’s Hospital Anaphylaxis Advisory Line - is available between the hours of 8.30 am to 5 pm, Monday to Friday. Phone 1300 725 911 (toll free) or (03) 9345 4235.
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Responding to an Anaphylactic Reaction

When students have an anaphylactic reaction schools must:

- Ask students whether they have self-administered an adrenaline auto-injector (such as epipen®/Ana pen®).
- If the student has not already done so, the school is to follow the students’ action plan as given to the school, and/or administer an adrenaline auto-injector (such as epipen®/Ana pen®).
- Call an ambulance.
- Contact the student’s emergency contact person and then contact Emergency Services Management (9589-6266).

Administering an EpiPen (as per Annual Training and Semester Refreshers)

EpiPen

Stage Description

1) Remove the EpiPen® from the plastic container.
   Note: Children under 20kg are prescribed an EpiPen Junior® which has a smaller dose of adrenaline.

2) Form a fist around the EpiPen® and pull off the blue (adult) / green (child) cap.

3) Place the orange end against the outer mid-thigh and push down hard until a click is heard or felt and then hold for 10 seconds.

4) Remove the EpiPen®, being careful not to touch the needle, and return it to its plastic container.

5) Note the time you gave the EpiPen®.

6) Call an ambulance on 000 as soon as possible.
   Do not hang up - wait until the operator tells you that you can hang up.

7) Reassure the student experiencing the reaction as they are likely to be feeling anxious and frightened. Do not move the student. Place student on the ground.

8) Ask another staff member to move other students away and reassure them separately.

9) Watch the student closely in case of repeat reaction or vomiting (place child in recovery position).

Important: Where there is no marked improvement and severe symptoms, as described in the student’s ASCIA Action Plan for Anaphylaxis, are present, a second injection of the same dose may be administered after 5 to 10 minutes (with the school based device).
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RESPONSIBILITIES

Prevention strategies will be developed with parents, specific to the management plans of individual students, and/or as necessary in a classroom or playground setting. These strategies include (but are not limited to) the following (as per Clause 8 of Ministerial Order No. 706):

- 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.
- 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.
- The Principal will ensure that an Anaphylaxis Risk Management Checklist is carried out annually (by the First Aid Officer).
- 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 by the Assistant Principal/First Aid Officer or Classroom Teacher (for parent helpers). All medical alerts and information are also available in the student attendance folder for each classroom.
- **Teachers** are to have details of Anaphylactic Students and their medical plans in their CRT/Daily Organisation folder so that all visitors to any classroom will have emergency access to relevant information.
- Where given permission from parents – teachers will alert students in their grades of an Anaphylactic child and what their triggers are – and will ensure students understand that if this child is in distress that they are to get a teacher immediately.

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 diagnosed at risk of anaphylaxis and where their medication is located.
- How to use an auto adrenaline injecting device (EpiPen).
- The school’s first aid and emergency response procedures.
- The school has signage at the front office door and on the First Aid Room door indicating where all Epi/Ana pen.

**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 enrolls.
- 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 students emergency procedures plan (ASCIA Action Plan) will be followed in responding to an anaphylactic reaction.
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**Students**
Prevention strategies will be developed with parents, specific to the management plans of individual students, and/or as necessary in a classroom or playground setting. These strategies include (but are not limited to) the following (as per Clause 8 of Ministerial Order No. 706):

Students are to ensure that they follow all procedures set out by teachers as is practical in a school setting:
- Children may be asked to move seats/areas to eat foods that may contain known allergens where there is an anaphylactic child in their presence.
- Hands are to be washed when required by the teacher/person in charge.
- Students are required to follow all instructions given by a teacher or, person in charge in relation to the management of an anaphylactic reaction at/on any school organised event.

**Parents**
Prevention strategies will be developed with parents, specific to the management plans of individual students, and/or as necessary in a classroom or playground setting. These strategies include (but are not limited to) the following (as per Clause 8 of Ministerial Order No. 706):

It is the responsibility of parents to:
- Provide the emergency procedures plan (ASCIA Action Plan) upon enrolment or on the students’ first day of school – whichever event comes first.
- Inform the school if their child’s medical condition changes, and if relevant provide an updated emergency procedures plan (ASCIA Action Plan) in writing.
- Provide an up to date photo for the emergency procedures plan (ASCIA Action Plan) when the plan is provided to the school and when it is reviewed.
- Ensure that the school has an ‘in-date’ Epipen/Ana pen at school, solely for their child’s use OR any other medication as required by their management plan.
- Comply with school requests regarding the management of whole school or individual student management in regard to Anaphylaxis or allergies.

Note: If a Medical Practitioner has prescribed an Ana/EpiPen/other medication for a child with allergies – it is the parents’ responsibility to ensure that all medical plans AND medications are provided to the school (even if the allergy is considered low grade).

**EVALUATION AND REVIEW**

The Rosanna Primary School Anaphylaxis Policy will be reviewed as per School Council Policy. School Council will evaluate its relevance in line with DET guidelines and community expectations as represented by parent members on School Council.
REFERENCES

RELATED DOCUMENTS

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