

# ANAPHYLAXIS POLICY

## 1. 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 certain foods or items are kept away from the student while at school. Adrenaline given through an EpiPen® auto-injector or comparable auto-injector to the muscle of the outer mid-thigh is the most effective first aid treatment for anaphylaxis.

## 2. PURPOSE:

- 2.1 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.
- 2.2 To raise awareness about anaphylaxis and the school's anaphylaxis management policy in the school community.
- 2.3 To engage with parents/carers of students at risk of anaphylaxis in assessing risks, developing risk minimisation strategies and management strategies for the student.
- 2.4 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.

## 3. IMPLEMENTATION:

### 3.1 INDIVIDUAL ANAPHYLAXIS MANAGEMENT PLANS

- 3.1.1 The principal or delegate will gather the Individual Management Plan that has been developed for any student who has been diagnosed by a medical practitioner as being at risk of anaphylaxis.
- 3.1.2 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.
- 3.1.3 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.
- 3.1.4 The student's individual management plan will be reviewed, in consultation with the student's parents/ carers:
- annually, and as applicable,
  - if the student's condition changes, or
  - immediately after a student has an anaphylactic reaction at school.
- 3.1.5 It is the responsibility of the parent to:
- provide the emergency procedures plan (ASCIA Action Plan).
  - inform the school if their child's medical condition changes, and if relevant provide an updated emergency procedures plan (ASCIA Action Plan).
  - 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.

## **3.2 COMMUNICATION PLAN**

3.2.1 The principal will be responsible for ensuring that information is provided to all staff, students and parents about anaphylaxis and the school's anaphylaxis management policy.

3.2.2 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.

3.2.3 Team leaders or team members will inform casual relief staff of students at risk of anaphylaxis and their role in responding to an anaphylactic reaction of a student in their care.

3.2.4 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
- the school's first aid and emergency response procedures

## 3.2 STAFF TRAINING AND EMERGENCY

3.3.1 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.

3.3.2 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.

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

3.3.4 Training will be provided to these staff as soon as practicable after the student enrolls.

3.3.5 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.

3.3.6 The school's first aid procedures and students emergency procedures plan will be followed in responding to an anaphylactic reaction.

## 4. EVALUATION:

The policy will be reviewed with student, parent and community input as part of the school's three-year review cycle.

Date Implemented	May 2015
Author	Kay Willmott
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Responsible for Review	Principal/Assistant Principal
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References	Victorian Government Schools Policy Advisory Guide.