



Anaphylaxis

POLICY and PROCEDURES

Cape Clear Primary School

BACKGROUND

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 essential.

Adrenaline given through an EpiPen autoinjector to the muscle of the outer mid-thigh is the most effective first aid treatment for anaphylaxis, followed by professional medical treatment.

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 school life.
- To raise awareness about anaphylaxis and the school's 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.

The key reference for our school in developing policies and processes for anaphylaxis is the DEECD publication Anaphylaxis Guidelines: A resource in managing severe allergies in Victorian School, August 2016 (see red First aid Anaphylaxis folder).

Cape Clear Primary School will fully comply with **Ministerial Order 706** and the associated guidelines published and amended by the Department from time to time.

Steps for Each Child Enrolled with Anaphylaxis are as follows:

- 1. IN CONSULTATION WITH PARENTS/CARERS DEVELOP AN INDIVIDUAL ANAPHYLAXIS MANAGEMENT PLAN (Attachment 1)**

The individual Anaphylaxis Management Plan will be in place as soon as practicable after the student enrolls, and before their first day at the 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.
- Information on where the student's medication will be stored.
- The name of the person/s responsible for implementing the strategies.
- The students' emergency contact details.
- The student's 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.

Note: The red and blue 'ASCIA Action Plan' is the most common form of emergency procedures plan that is provided by medical practitioners to parents when a child is diagnosed as being at risk of anaphylaxis.

The student's Individual Management Plan will be reviewed, in consultation with the student's parent/carers:

- Annually
- If the student's condition changes
- Immediately after a student has an anaphylactic reaction at school.

It is the responsibility of the parents/carers to:

- Provide 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.

2. DEVELOP A COMMUNICATION PLAN (Attachment 2)

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 communication plan will outline how volunteers and casual relief staff of student at risk of anaphylaxis will be informed of students are risk of anaphylaxis and their role in responding to an anaphylactic reaction by a student in their care.

All staff will be briefed once each semester by a staff member who has completed School Anaphylaxis Supervisor training. This briefing will cover:

- The school's anaphylaxis Management Policy
- The causes, symptoms and treatment of anaphylaxis
- The identities of students diagnosed as 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. TRAIN ALL STAFF

All staff will undertake Anaphylaxis Training as per the new ASCIA e-training for Victorian school every two years.

The school will have a School Anaphylaxis supervisor, who is able to test staff in the competency in using an auto injector. This testing must take place within 30 days of completing the e-training course.

At other times while the student is under the care or supervision of the school where CRT staff or staff from other schools may be involved, for example 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.

4. COMPLETE ANNUAL ANAPHYLAXIS RISK MANAGEMET CHECKLIST (Attachment 3)

The Principal will complete the risk Management Checklist each semester as part of the Staff Briefing or after any event involving an allergic reaction, or when a new child with allergies or anaphylaxis enrolls at school.

The school's first aid procedures and students emergency procedures plan (ASCIA Action Plan) will be followed in responding to a anaphylactic reaction.

Evaluation:

This policy will be reviewed annually by the Principal or following an allergic or anaphylactic reaction by a student or staff member at school.

This policy must adhere to all procedures recommended by Child Safe Policy

Ratified: HPS School Council 22 march 2017



Haddon Primary School

ANAPHYLAXIS COMMUNICATION PLAN

The Principal will:

1. Ensure all staff attend an anaphylaxis Briefing every semester, covering:

- The school's Anaphylaxis Management Policy
- The causes, symptoms and treatment of anaphylaxis
- The identities of students diagnosed as risk of anaphylaxis and where their medication is located
- Individual Management Plans and ASCIA plans
- Review of how to use an autoadrenaline injecting device
- Training requirements
- Review of the school's first aid and emergency response procedures
- Practice of school-based scenarios

2. Outline the schools EMERGENCY RESPONSE TO ANAPHYLAXIS (Attached)

3. Ensure the volunteer and CRT staff are aware of students at risk of anaphylaxis and their role in responding to an emergency

- Student ASCIA plans will be included in the Volunteer and CRT folder
- The Principal will induct all Volunteers and CRT staff

Haddon Primary School

EMERGENCY RESPONSE TO ANAPHYLAXIS CAMPS/EXCURSIONS – EPIPEN MUST BE CARRIED BY STAFF MEMBER WITH CHILD or kept in First Aid bag in easy reach

1. Child stays where they are
2. At school, named EPIPENS are in First aid boxes, mounted on walls, in office spaces between classrooms
3. Two spare EPIPENS are in the first Aid area in the staff room
4. EPIPENS and PLANS must stay together
5. On camps/excursions, EPIPEN and PLAN must be with staff member with child or within easy reach
6. Teacher responding sends another child for the Principal/other staff IMMEDIATELY, with instructions to BRING THE EPIPEN and PLAN
7. DO NOT leave the child having the allergic reaction
8. Administer the EPIPEN according to the PLAN and training
9. Call 000 (other staff may be able to do this before now – but if you are on you own ADMINISTER EPIPEN, then call 000)
10. Call parents
11. Designated staff member waits at front gate for ambulance
12. At school, designated staff member rings bell, all students taken inside, or moves other children to an appropriate space
13. Continue to administer first aid as required, including administering additional EPIPEN, calling 000 for assistance as required or staying on the line
14. Make child comfortable and reassure
15. Follow advice from 000

This policy was reviewed by staff and School Council and endorsed by School Council in **April 2016.**