ANAPHYLAXIS MANAGEMENT POLICY

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.

Adrenaline given through an EpiPen® autoinjector to the muscle of the outer mid thigh is the most effective first aid treatment for anaphylaxis.

St John’s has a number of students who may suffer an anaphylactic reaction and must rely on the co-operation and vigilance of the whole community in protecting their safety.

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 of students at risk of anaphylaxis in assessing risks, developing risk minimization 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.

Individual Anaphylaxis Management Plans
The principal/ deputy 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.

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.

**Anaphylaxis Management Policy**

In 2013 back up EpiPens were purchased and are stored in the office and in the staffroom.

• 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 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/carers:

• Annually, and as applicable,

• If the student’s condition changes

• Immediately after a student has an anaphylactic reaction at school.

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.

**Risk Minimisation and Prevention Strategies**

The Anaphylaxis Guidelines for Victorian Government Schools (DEECD 2013), contains advice about a range of prevention strategies that can be implemented.

Risk minimisation and prevention strategies should be considered for all relevant in-school and out-of-school settings which include (but are not limited to) the following:

**In-school**

**CLASSROOM**

• Keep a copy of the student’s Individual Anaphylaxis Management Plan in the classroom. Be sure the ASCIA Action Plan is easily accessible. The Adrenaline Auto injector is stored in the staffroom.

• Liaise with Parents about food-related activities ahead of time. A letter from the principal seeking parent permission to participate in class parties must be sent ahead of the party.

• Use non-food treats.

• It is recommended that Parents of students with food allergy provide a treat box with alternative treats. Treat boxes should be clearly labelled and only handled by the student.

• Birthday treats must be distributed at the end of the day and placed in students’ lunchbox for consumption at home.

• Never give food from outside sources to a student who is at risk of anaphylaxis.

• Treats for the other students in the class should not contain the substance to which the student is allergic. It is recommended to use non-food treats where possible.

• Ensure all cooking utensils, preparation dishes, plates, and knives and forks etc are washed and cleaned thoroughly after preparation of food and cooking.

• Have regular discussions with students about the importance of washing hands, eating their own food and not sharing food.

• Deputy Principal/staff should inform casual relief teachers, specialist teachers and volunteers of the names of any students at risk of anaphylaxis, the location of each student’s Individual Anaphylaxis Management Plan and Adrenaline Autoinjector, the
School’s Anaphylaxis Management Policy, and each individual person’s responsibility in managing an incident. i.e. seeking a trained staff member.

- Parent helpers who participate in classrooms on a regular basis will be informed of anaphylactic procedures.

- All classroom teachers must have emergency cards in their classroom; all specialist teachers must carry emergency cards.

YARD
- All yard duty staff must check that they are carrying emergency cards in yard-duty bags. All staff on yard duty must be aware of the School’s Emergency Response Procedures and how to notify the general office/first aid team of an anaphylactic reaction in the yard.

- Yard duty staff must also be able to identify, by face, those students at risk of anaphylaxis.

SPECIAL EVENTS: (including incursions, class parties, curriculum food days, etc.)

- For special occasions, School Staff should consult Parents in advance to either develop an alternative food menu or request the Parents to send a meal for the student.

- Students should keep drinks and food covered while outdoors.

- School Staff should avoid using food in activities or games, included as rewards.

- Party balloons should not be used if any student is allergic to latex.

Out-of-School

EXCURSIONS: (including sporting events and excursions)

- Adrenaline Auto injectors must be taken by classroom teachers when attending out-of-school activities.

- The classroom teacher should always include children at risk of anaphylaxis in their group whilst on an excursion.
Communication Plan

The principal/ deputy 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.

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 a member of the Leadership Team.

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 autoadrenaline 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.

All St John’s staff participated in St John’s ambulance Anaphylactic 4 hour training course in 2012. (see attached). New teachers to the school will be given the opportunity to do this training.

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 there is a sufficient number of staff present who have up to date training in an anaphylaxis management training course.

The principal/ deputy 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.