

# Anaphylaxis Policy

## Brighton Primary School

### 1542

## Background

Anaphylaxis is a severe, rapidly progressive allergic reaction that is potentially life threatening. The most common allergens in school aged children are nuts, eggs, 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 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 for responding to an anaphylactic reaction.

## 1. Guidelines

- 1.1 Severe Anaphylactic reactions can develop within minutes after exposure to the allergen and require a swift response of adrenaline EpiPen to treat life-threatening reactions,
- 1.2 Parents should notify the school, at the time of enrolment or as soon as the child is diagnosed, if their child has been identified as at risk of Anaphylaxis and provide an *ASCIA (Australasian Society of Clinical Immunology and Allergy) Action Plan*. *Student's Anaphylaxis Management Plans* will then be completed,
- 1.3 It is the shared responsibility of the parents and the School Nurse to liaise with class teachers yearly, to share information regarding the student's current *Anaphylaxis Management Plan*,
- 1.4 All staff shall be made aware of relevant information for all students at risk of anaphylaxis at the first full staff meeting for the year and as part of new staff induction. Any Anaphylaxis updates or new anaphylaxis information will be shared at staff briefings throughout the year as required,
- 1.5 Casual Replacement Teachers (CRTs) employed to teach classes where children have been identified as being at risk of an anaphylactic reaction will be required to familiarise themselves with the relevant child and the relevant *ASCIA Action Plan* and the *Student's Anaphylaxis Management Plan*.

## 2. Implementation

2.1 Parents will be responsible for:

- providing an *ASCIA Action Plan* for each child that has been diagnosed by a medical practitioner as being at risk of anaphylaxis. The *ASCIA Action Plan* should have been developed in consultation with and signed by the child's doctor,
- consulting with the school to produce a *Student's Anaphylaxis Management Plan*,
- providing two EpiPens for school use: one for the classroom and one for the Health Centre

- recording the expiry date of medications placed at school and the timely replacement of those medications/EpiPens
- informing the school if their child's medical condition changes and, if necessary, provide an updated *ASCIA Action Plan*
- teaching their children self-advocacy in relation to their allergies.

The *Student's Anaphylaxis Management Plan* made in consultation with the school will:

- contain detailed information about diagnosis, including the type of allergy or allergies the students has based on diagnosis by medical practitioner (*the ASCIA Action Plan*)
- provide an explanation of symptoms and directions for action should a reaction occur (*the ASCIA Action Plan*)
- contain current parent and other emergency contact phone numbers
- provide strategies to minimise the risk of exposure to allergens while the student is under care/ supervision of school staff, for in-school and out of school setting such as: camps, special events days and excursions and the person who will be responsible for the implementation
- at the time of review, parents will provide an updated *ASCIA Action Plan* and current photo. This plan is to be provided to the school and signed by the medical practitioner who is treating the child for Anaphylaxis and organised the EpiPen medication, this is necessary in order for the school to complete or update the *Student Anaphylaxis Management Plan* annually.

2.2 The school will ensure that:

- An *ASCIA Action Plan* is provided by the parent for any new student enrolled that is diagnosed as at risk of anaphylaxis. A *Student's Anaphylaxis Management Plan* will then be developed in consultation with parents. The *ASCIA Action Plans* are displayed in: the classroom, the Health Centre, yard duty folders, camp documents and with the students EpiPen. All students with an anaphylaxis alert are also identified in the yard duty folders and staffroom. The *ASCIA Action Plan* will also be kept with the EpiPens both in the health centre and classroom. A copy of *Student's Anaphylaxis Management Plans* will be in the Health Centre medical records folder,
- The *ASCIA Action Plan* and the *Student's Anaphylaxis Management Plans* are reviewed by carers annually, if conditions change or immediately after a student has an anaphylactic reaction at school,
- The School Nurse updates school first aid records in accordance with annual *ASCIA Action Plans* and *Student's Anaphylaxis Management Plan* or if the student's condition changes or reaction occurs,
- An annual Anaphylaxis Risk Management Checklist is completed,
- Casual Relief Teachers (CRT) are alerted to access these documents in the classroom:
  - copy of *ASCIA Action Plan and Student's Anaphylaxis Management Plan* - preventative strategies in place,
  - on their school emergency procedures sheet,
  - If the CRT has any questions they may ask other year level teachers or the School Nurse.
- The Canteen/Grounds has been notified of at risk students, their classes and their responsibility to:
  - brief staff/volunteers of where information is kept or displayed in relation to students at risk of anaphylaxis, including photo identification and list prevention strategies,
  - promote a 'no sharing' of food approach.
- That 'at risk' students who are under the care or supervision of the school (yard duty, excursions, camps and special events) are provided with sufficient number of staff present who have up to date training in anaphylaxis management,
- That EpiPens are to be carried by school staff on excursions, camps and special days and they use adult to adult handover. A child may carry their own EpiPen when a school staff member feels it is safe to do so, and they are given clear direction of when this is to be carried out (see medication policy),
- The school staff induction (of new teachers) will include anaphylaxis awareness information and appropriate training. The school staff will be trained in regard to anaphylaxis risk assessment and management annually and accredited every 3 years,
- The school's anaphylaxis policy is accessible via the school website,

- The Anaphylaxis Management and Communication Plan is in place and provide up to date at risk information for all staff, students and parents about anaphylaxis.

The Anaphylaxis Management and Communication Plan includes:

- information about what steps will be taken to respond to an anaphylactic reaction by a student in a classroom, in the schoolyard, on a school excursion and/or camp and special event days,
- how the school will communicate Anaphylaxis information to the School Community,
- Staff briefings twice a year by the School Nurse and anaphylaxis awareness information for the whole school community through the school newsletter twice yearly.

2.3 School staff will follow these prevention strategies:

- know student/s in their class or classes who are at risk and be familiar with their *ASCIA Action Plan* and *Student's Anaphylaxis Management Plans*,
- liaise with parents/carers about food related activities ahead of time including a list of ingredients to be used,
- whole school activities, which involve food, should always be handled in a controlled manner and must consider the guidelines and implementation principles of this policy,
- practice no food sharing procedure,
- make sure that treats from outside sources are never given to a student who is at risk of anaphylaxis,
- be aware of hidden allergens or ingredients used for cooking, science and technology or art classes, e.g. egg or milk carton,
- have regular discussions with students about the importance of being allergy aware, washing hands, eating their own food and not sharing food with others,
- know where medication for 'at risk' students is stored and how to use it,
- for each class with an 'at risk' student, the school nurse will send a letter to all class parents outlining relevant allergens and risk avoidance strategies. (Parent approval for 'at risk' student is sought before letter goes home).

2.4. School staff will follow this procedure if a serious anaphylactic reaction is suspected:

**1. Follow the Student's ASCIA Action Plan**

2. Ensure appropriate school personnel are informed; School Nurse, Classroom teacher, Level 2 First Aid office personnel,
3. After an emergency, a report is completed by the supervising staff member, detailing procedures and outcome and placed in the school accident register,
4. Post incident support is available for staff and students and can be provided by the School Nurse.

**3. Review**

3.1 The Anaphylaxis Management Policy will be reviewed in accordance with any changes relevant to the Health Act, DET guidelines or ministerial orders.

**4. Support Documents**

- [ASCIA Action Plan for Anaphylaxis](#) (Available on Compass/Documentation Tab/Health Centre)
- [Anaphylaxis Management and Communication Plan](#) (this document is in each classroom teacher's Medical Alerts Folder. This folder is kept on the teacher's desk)

These forms can also be downloaded from:

<http://www.education.vic.gov.au/school/teachers/health/Pages/anaphylaxisschl.aspx> and ASCIA <http://www.allergy.org.au/health-professionals/anaphylaxis-resources/ascia-action-plan-for-anaphylaxis>

**ANAPHYLAXIS MANAGEMENT AND COMMUNICATION PLAN**

**This plan should be read in conjunction with the Brighton Primary School Anaphylaxis Policy.**

It relates to the prevention and management of anaphylaxis at school or at school events off site, such as excursions and camps. It has been developed to help all school staff, students and parents.

**RAISING STAFF AWARENESS**

Accredited anaphylaxis 22099VIC training will be provided to all staff deemed relevant by the school principal, and updated every 3 years in accordance to the DET guidelines.

Staff briefings will be completed by the school nurse twice a year in term 1 and term 3. This will include information :

- Brighton Primary School's anaphylaxis management policy.
- Identify students and staff diagnosed at risk of anaphylaxis.
- The school's strategies to minimise the risk of exposure to allergens while the student is under the care or supervision of school staff for both in school and out of school settings including excursions and camps.
- Recognising the signs and symptoms of anaphylaxis
- Treatment and school emergency medical response
- How to use an Epipen and demonstrate correct use
- Location of Epipens and ASCIA anaphylaxis action plans.

School casual relief teachers will have all information on anaphylaxis provided and be aware of the appropriate management and emergency response.

### **RAISING STUDENT AWARENESS**

Teachers will educate students about the risk of exposure of allergens to students who have been diagnosed with anaphylaxis. They will discourage students from bringing foods to school which may pose a risk to another child, such as nuts.

Students with anaphylaxis will have their ASCIA action plan displayed in the classroom which creates awareness for other students and parents, as well as staff.

Meetings between the students with anaphylaxis and the school nurse to ensure they are aware of minimising exposure to allergens, the location and storage of Epipens, and discuss emergency management. Encouragement is given to children to discuss their allergies with their friends and classmates.

Allergy awareness is discussed and displayed through the school via:

- Promotion of Allergy Awareness Week
- Allergy and Anaphylaxis Posters and books
- Student photos displayed in appropriate areas of the school who are at risk of anaphylaxis
- Encouraging students not to share food at school
- Reminding students what other students are allergic to in their classroom and informing them on how to respond if a student becomes sick, including knowing where their Epipen will be located

### **WORKING WITH PARENTS / GUARDIANS**

Parents / guardians will be informed of the Brighton Primary School Anaphylaxis Policy. They will be advised of the school and DET requirements needed to ensure they are aware of their obligations. They are encouraged to have close communication with the school nurse and teachers.

Annual ASCIA Anaphylaxis plans are to be provided to the school for their child along with 2 Epipens for use whilst at school. One Epipen will be kept in the health centre and the other will be kept with the child in the classroom.

Annual risk management plans are to be attended with the parent and school nurse.

Information on Anaphylaxis will be provided to parents to create awareness via the newsletter, letters to the class and the BPS website.

### **RESPONDING TO AN ANAPHYLACTIC REACTION IN THE CLASSROOM**

In the event of an anaphylactic reaction in the classroom, the teacher is to stay with the student experiencing the reaction.

The teacher is to immediately seek help by asking a reliable child to call the office to locate the nurse and inform them of the situation and the child involved.

The students ASCIA anaphylaxis plan will be implemented. The teacher will have the child's Epipen in the classroom, the school nurse will immediately attend bringing the second Epipen.

### **RESPONDING TO AN ANAPHYLACTIC REACTION IN THE SCHOOL YARD**

The yard duty teacher is to stay with the child experiencing the reaction.

The teacher is to give an emergency response card located in the yard duty folder to a reliable student to obtain immediate help. They will also provide the appropriate ASCIA action plan in the yard duty folder to identify the child who needs treatment. These will be taken immediately to the school nurse, or office staff if school nurse not in attendance.

The school nurse or first aid trained staff member will attend immediately and the students ASCIA anaphylaxis plan will be implemented.

All yard duty teachers and available staff to attend to render assistance as required.

#### **RESPONDING TO AN ANAPHYLACTIC REACTION ON EXCURSION OR CAMP**

Prior to leaving the school for any event, excursion or camp the teacher organising the event will notify the school nurse to advise of the activity. The school nurse will identify medical needs and medication required.

Any child with anaphylaxis must have access to 2 EpiPens at all times. The teacher is to be aware of their location at all times. The health centre EpiPen must be signed out in the register before leaving the school, and signed back in on return.

In the event of an anaphylactic reaction away from the school the teacher is to immediately implement the student's ASCIA anaphylaxis action plan, stay with the student, seek help from other staff members, call an ambulance and then notify the school. The parents are to be notified as soon as possible by relevant school staff.

#### **IF THE STUDENT BEGINS TO SHOW SIGNS OF ANAPHYLAXIS (SEVERE ALLERGIC REACTION)**

- Do not leave the child. Send for help.
- Lay the student flat. Do not allow them to stand or walk. If breathing is difficult allow them to sit. Provide reassurance.
- Give the child's adrenaline autoinjector (EpiPen) – note the time given.
- Call an ambulance. Communicate with paramedics until they arrive at the scene.
- A second EpiPen may be required if no improvement after 5 minutes. Ensure this is available for use in case it is required.
- If ever you are unsure if a child is experiencing anaphylaxis or asthma, always give the adrenaline autoinjector (EpiPen) first, then give asthma medication as per action plan.
- Notify parent / guardian as soon as possible.

For more information please refer to:

<http://www.education.vic.gov.au/school/principals/spag/health/pages/anaphylaxis.aspx>

This policy was last ratified by School Council in 2018

To be reviewed in 2019