

# Wattle Park Primary School



## ***Anaphylaxis 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. Partnerships between schools and parents are important in ensuring that certain foods or items are kept away from the student while at the school.

Adrenaline given through an EpiPen® autoinjector 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 in responding to an anaphylactic reaction.

### **GUIDELINES FOR POLICY DEVELOPMENT**

The school will comply with Ministerial Order 706 and associated guidelines.

### **IMPLEMENTATION**

#### ***INDIVIDUAL ANAPHYLAXIS MANAGEMENT PLANS***

An individual management plan (Medical Alert) 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.

The Principal of the school is responsible for ensuring that an Anaphylaxis Management Plan is developed in consultation with the student's parents, for any student who has been diagnosed by a medical practitioner as having a medical condition that relates to allergy and the potential for anaphylactic reaction, where the school has been notified of that diagnosis.

The individual anaphylaxis Medical Alert 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).
- Information on where the student's medication will be stored.
- The student's emergency contact details.
- The emergency procedures to be taken in the event of an allergic reaction.
- 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,
- when a student is to participate in an off-site activity such as a camp or excursion,
- 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) signed by a medical practitioner.
- inform the school in writing 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.
- provide medication which is in date.

### **COMMUNICATION PLAN**

All staff will be briefed once each semester 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

Information about anaphylaxis, the school's management policy and strategies for minimising risk will be communicated to parents on a regular basis. Posters will be displayed in prominent positions in the school.

Medical Alerts are stored with each student's personal Adrenaline Autoinjector which is kept in the classroom, and goes with the student during special events such as excursions and camps. Medical Alerts are also provided to all classroom teachers and office staff. They are also placed in CRT folders for visiting teachers.

Yard duty bum bags include a key ring with photographs and information about students with allergies and other life threatening medical conditions.

### **PREVENTION STRATEGIES TO MINIMISE RISK**

- The school canteen will not sell items which contain any nuts. (This will not apply to foods labelled 'may contain traces of nuts'.)
- The trading and sharing of food should be minimised as much as possible. In the case of class parties, students with anaphylactic reactions will be encouraged to provide their own food. (As educators we seek to develop responsible behaviours in our students.)
- It is ideal that students with food allergies only eat lunches and snacks that have been prepared at home.
- All drink bottles and lunch containers should be clearly marked with their names.
- The school will liaise with parents about food-related activities ahead of time where possible, including participation in the Stephanie Alexander Kitchen Garden Program.
- For special occasions such as school camp, birthdays etc. school staff should consult parents in advance to either develop an alternative food menu or request the parents to send a meal/food for the student.
- The school will purchase Adrenaline Autoinjectors for general use (and as a back up for those purchased by parents) at school and to take on camps and excursions.

### **STAFF TRAINING AND EMERGENCY RESPONSE**

As required by Ministerial Order 706 teachers and other school staff who conduct classes which students at risk of anaphylaxis attend, or give instruction to students at risk of anaphylaxis will 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.

All school staff will undertake ASCIA Anaphylaxis e-training for Victorian Schools followed by a competency check by the School Anaphylaxis Supervisor.

2 staff (School Anaphylaxis Supervisors) will undertake the Course in Verifying the Correct Use of Adrenaline Autoinjector Devices 22303VIC.

All staff will undertake twice yearly briefings on anaphylaxis management. (Anaphylaxis Management Briefing Presentation)

The briefing presentation incorporates information on how to administer an EpiPen and all staff will practice with the EpiPen trainer devices provided.

As part of the briefing, school staff will familiarise themselves with the children and young people in the school at risk of an anaphylactic reaction and their Individual Anaphylaxis Management Plans.

The school Anaphylaxis policy forms part of our overall first aid policy, with integrated Medical Alerts for other conditions such as asthma or diabetes.

In the event of an anaphylactic reaction, the emergency response procedures in this policy must be followed, together with the school's general first aid and emergency procedures and the students ASCIA Action Plan (or Medical Alert).

### **COMMUNICATING THE POLICY**

The school's policy will be made available publicly on our school website and through staff briefings.

### **REVIEW**

The school will complete a school anaphylaxis risk management checklist annually.

The school council will regularly review its Anaphylaxis Policy as part of its cyclic policy and procedures review schedule.

RATIFIED BY SCHOOL COUNCIL: 2017