

## SCHOOL NO. 1727 - KIALLA WEST

Policy Statement: 704 - ANAPHYLAXIS

Responsibility: Principal and school staff

This Policy was last ratified by School Council in May 2018.

### 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.

The key reference and support for the college regarding anaphylaxis is the [DEECD Anaphylaxis Guidelines](#)

### INDIVIDUAL ANAPHYLAXIS MANAGEMENT PLANS

Note: A template of an individual anaphylaxis management plan can be found on Page 26 [DEECD Anaphylaxis Guidelines](#)

The 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 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.  
*Note: Appendix 2 of the Anaphylaxis Guidelines contains advice about a range of prevention strategies that can be put in place.*
- 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 (ASCI 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 'ASCI 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.

- Download from [DEECD Health Support Planning Policy](#)

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.

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.

## **COMMUNICATION PLAN**

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/plan.

The communication plan will include information about what steps will be taken to respond to an anaphylactic reaction by a student in classroom, in the school yard, on school excursions and special event days.

The business manager will ensure CRTs are informed of students at risk and what their role is in responding to an anaphylactic reaction by a student in their care.

This includes

- being alerted to the relevant anaphylaxis students in the school

All staff will be briefed once each semester by the principal or a staff member with up-to-date anaphylaxis management training on

- the school's anaphylaxis management policy
- the causes, symptoms and treatment of anaphylaxis
- the students diagnosed at risk of anaphylaxis and the location of medication
- the correct use of the auto adrenaline injecting device
- the school's first aid and emergency response procedures.

## **STAFF TRAINING AND EMERGENCY RESPONSE**

Teachers and other school staff who conduct classes with students at risk of anaphylaxis will have up-to-date training in an anaphylaxis management training course and have the following information provided in briefings;

- 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

Note: An information DVD will be used for this purpose at staff briefings.

At other times while a student is under the care or supervision of the school, including excursions, yard duty, camps and special event days, the principal will ensure that there is a sufficient number of staff present who have up-to-date training in an anaphylaxis management.

## **GENERAL**

- auto adrenaline injecting devices are located in the school office in plastic pockets labelled with the student's name and instructions for use;
- each student's ASCIA plan is located in the office and readily accessible;
- a photo of each individual student who is anaphylactic is displayed in the staff room and office.
- the designated first aid officer is responsible for checking the expiry dates of the auto adrenaline injecting devices and will notifying parents prior to expiry;
- each student's action plan is updated annually by the student's medical practitioner;
- in the event of a suspected anaphylactic emergency, an ambulance will be called;
- the school will liaise with parents/carers about food related activities;
- on school camps, excursions and sporting events, the auto adrenaline injecting device will remain close to the student. Consideration is given in planning ahead for food and meals for students at risk of anaphylaxis;
- all students at risk of anaphylaxis must provide an auto adrenaline injecting device and ASCIA action plan for school camp or excursion;
- staff are routinely briefed about students at risk of anaphylaxis.

## **ANAPHYLAXIS COMMUNICATION PLAN**

Kialla West Primary School has taken steps to ensure effective communication of students at risk of anaphylaxis.

1. Anaphylaxis action plans are located in the staff room and school office and include students' photos.
2. All staff undergo regular briefings on anaphylaxis, the symptoms and emergency responses.
3. All staff with a student at risk of anaphylactic responses in their classroom, will be briefed at the beginning of the year, to ensure their awareness of the issues related to these students.

5. Parents/carers of anaphylactic students will be contacted each year to ensure we have the most up-to-date anaphylactic management plan and a current auto adrenaline injecting device available.

## **EMERGENCY MANAGEMENT**

In the event of an anaphylactic episode

### **In the classroom:**

- the teacher in charge will contact the office using the classroom phone. If possible the child will be taken to the sick bay where their personal auto adrenaline injecting device (Epipen) can be used.
- 000 will be rung immediately. A mobile phone will be used if the child is not located in the office area.

### **In the school playground:**

- in the event of an anaphylactic episode, the yard duty teacher will either call the office or send a student to inform the staff, with the name of the student so their personal auto adrenaline injecting device can be taken to the scene directly and the adrenaline will be administered.
- after contacting the office, a teacher with the child will call 000 for ambulance/emergency advice;

At excursions/sports/camp:

- the School will inform the camp of any students with anaphylaxis to ensure that appropriate arrangements are made for students participating at camp
- the auto adrenaline injecting device will accompany students at risk of anaphylaxis to all excursions, sports events and camps
- the injecting device will be kept within close proximity of the student
- in the event of an anaphylactic episode, the supervising teacher will administer the auto adrenaline injection
- the supervising teacher will ring 000 for medical assistance
- if the episode takes place at another school or establishment, first aid assistance will be sought
- for school camps: Parents will be fully informed of the relevant considerations such as:
  - the remoteness of the camp (distance to nearest hospital)
  - mobile telephone coverage. (In some locations, coverage is not reliable)

## **Anaphylaxis communication/management**

Classroom including specialists,

- Every teacher will receive individual anaphylactic management plans (including photographs) for all anaphylactic children in their grade level.
- Specialists will have the names of all children who have Anaphylaxis.

CRTs

- Students with anaphylaxis management plans are identified in the office.
- The business manager will draw attention to any child who is at risk of anaphylaxis in the school and specifically if in the class.

Minimising exposure

- Children are expected to eat their play lunch and lunch in the classroom.
- Where required an attempt to minimise exposure, all children in classrooms sit at their own table and do not move around whilst eating, this will help minimise contamination.

## **EMERGENCY RESPONSE INSTRUCTIONS**

### **During recess and lunch times**

Anaphylactic episode

1. identify the student and verify they have an individual anaphylactic management plan.
2. Contact the office immediately and if feasible take the child to the sick bay and locate the management plan.
3. If the child cannot be moved from the playground, send for the epipen and administer treatment there whilst contacting 000 by a mobile phone for emergency medical assistance clearly explain that this child is suffering a suspected anaphylactic reaction

### **During instruction time (in classrooms or specialists)**

Anaphylactic episode

1. identify the student and verify they have an individual anaphylactic management plan.
2. Get assistance from classroom teacher next door as help is sought from the office.  
Move child to the office if possible, and then undertake emergency response management
3. The office will ring 000 for emergency medical assistance and notify relevant staff to provide support as soon as practicable.

## **Communication to parents**

This information will be provided to parents at the start of each school year via the school website and

promoted through the newsletter. A separate note may be sent home to parents at specific year levels if deemed necessary.

## **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.

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.

The 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.

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

**Note: A video has been developed and can be viewed from <http://www.education.vic.gov.au/school/teachers/health/Pages/anaphylaxisschl.aspx>**

Appendices :

- Anaphylaxis Risk Management Checklist
- Anaphylaxis Management Plan

References :

- [DEECD Anaphylaxis Policy](#)
- [DEECD Health Support Planning Policy](#)

# ANAPHYLAXIS RISK MANAGEMENT CHECKLIST

## Section 1 Anaphylaxis management Plans and ASCIA Action Plans

1. Does every student who has been diagnosed at risk of anaphylaxis have an individual Anaphylaxis Management Plan in place? (see Section 4.1 and Appendix 1, Anaphylaxis Guidelines)?

YES  NO

2. Are all Anaphylaxis Management Plans reviewed regularly with parents (at least annually)? YES  NO

1. Do they set out strategies to minimise the risk of exposure to allergens for in-school and out of class settings? During classroom activities, including elective classes

YES  NO

In canteens or during lunch or snack times

YES  NO

Before and after school, in the school yard and during breaks

YES  NO

For special events, such as excursions, sport days, class parties and extra curricular activities?

YES  NO

For excursions and camps

YES  NO

Other

4. Do all students who suffer from anaphylaxis have a copy of their ASCIA Action Plan kept at school (provided by the parent)?

YES  NO

5. Where are they kept?.....

6. Do the anaphylaxis action plans have a recent photo of the student with them?

YES  NO

Comments

## Section 2 Storage and accessibility of the EpiPen

1. Where are the students EpiPen's® Stored?

2. How are the EpiPens® stored?

3. Is the storage safe (out of reach of students)?

YES  NO

Is the storage unlocked and accessible to staff at all times?

YES  NO

**Comments**

Is the EpiPen® easy to find?

YES  NO

**Comments**

4. Is a copy of students' ASCIA Action Plans kept together with their EpiPen®?

YES  NO

**Comments**

5. Are EpiPen's® and Action Plans clearly labelled with students' names?

YES  NO

**Comments**

6. Has someone been designated to check the EpiPen's® expiry dates on regular basis?

YES  NO

Who?.....

**Comments**

7. Has the College signed up to EpiClub (a free reminder service)?

YES  NO

8. Do all staff know where the EpiPens® and Action Plans are Stored?

YES  NO

**Comments**

9. Is there a spare EpiPen®?

YES  NO

If Yes, what Type?.....

10. Where is it stored?

11. Is it clearly labelled as the 'backup EpiPen®'?

YES  NO

**Section 3 Prevention Strategies**

- 1. Have you done a risk assessment of the potential for accidental exposure to allergens for a student with anaphylaxis? YES  NO
- 2. Has the school implemented any of the prevention strategies (in Appendix 2 of the Guidelines)? YES  NO
- 3. Which ones?
- 4. Others:
- 5. Is there always a trained staff member on yard duty? YES  NO
- 6. How many staff have completed training?.....

**Section 4 Training and Emergency Response**

- 1. Have all staff responsible for the care of students with anaphylaxis been trained? YES  NO
- 1. When does their training need to be renewed?.....
- 3. Do all staff have an understanding of the causes, signs and symptoms of anaphylaxis and of their role in the school's first aid and emergency response procedures? YES  NO
- 4. Have you planned how the alarm will be raised if an allergic reaction occurs?  
In the class room? YES  NO   
How?  
In the school yard? YES  NO   
How?  
At school camps and excursions? YES  NO   
How?  
On special event days, such as sports days? YES  NO   
How?
- 5. Does your plan include who will call the Ambulance? YES  NO   
How?
- 6. In an emergency is there a plan for who will be sent to collect the EpiPen® and Action Plan? YES  NO   
Who will this be when in the class room?.....  
Who will this be when in the school yard?.....  
Who will this be at sporting activities?.....
- 7. Have you checked how long will it take to get to the EpiPen® and Action Plan to a student from various areas of the school? YES  NO   
How long?.....  
When in the class room? YES  NO   
How long?.....  
When in the school yard? YES  NO   
How long.....  
When at sports fields? YES  NO   
How long?.....
- 8. On excursions or other out of school event is there a plan for who will look after the EpiPen® and Action Plan? YES  NO   
Who will do this on excursions?.....  
Who will do this on camps?.....  
Who will do this on sporting activities?.....
- 9. Is there a process for post incident support in place? YES  NO
- 10. Have all staff been briefed on:-  
the school's Anaphylaxis Management Policy? YES  NO   
the causes, symptoms and treatments of anaphylaxis? YES  NO   
the identities of students diagnosed at risk of anaphylaxis and where their medication is located? YES  NO   
how to use an adrenaline auto-injecting device, including hands on practice with a trainer adrenaline auto-injecting device YES  NO   
the school's first aid and emergency response procedures YES  NO

**Section 5: Communicating with staff, students and parents / carers**

1. Is there a communication plan in place to provide information about anaphylaxis and the school's policies to staff, students and parents/ carers?

YES  NO

2. Are there procedures in place for informing casual relief teachers of students at risk of anaphylaxis and the steps required for prevention and emergency response?

YES  NO

Comments

2. Do all staff know which students suffer from anaphylaxis?

YES  NO

Comments

How is this information kept up to date?

4. Are there strategies in place to increase awareness about severe allergies among students? YES  NO

Comments

# Anaphylaxis Management Plan

## Cover Sheet

This Plan is to be completed by the principal or nominee on the basis of information from the student's medical practitioner provided by the parent/carer

SCHOOL		
Phone Number		
Student's name:		
Date of birth:	Year level:	
Severely allergic to:		
Other health conditions:		
Medication at school:		
Parent/carer contact:	Parent/carer information (1)	Parent/carer information (2)
	Name:	Name:
	Relationship:	Relationship:
	Home phone:	Home phone:
	Work phone:	Work phone:
	Mobile:	Mobile:
	Address:	Address:
Other emergency contacts (if parent/carer not available):		
Medical practitioner contact:		
Emergency care to be provided at school:		
EpiPen® storage:		
The following Anaphylaxis Management Plan has been developed with my knowledge and input and will be reviewed on ..... (insert date of proposed review).		
Signature of parent:		Date:
Signature of principal (or nominee):		Date: