

### **Purpose**

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 school will fully comply with Ministerial Order 706 and the associated Guidelines published and amended by the Department from time to time. It is the School's responsibility to develop and maintain an Anaphylaxis Management Policy.

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.

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

This Policy seeks;

1. 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.
2. To raise awareness about anaphylaxis and the school's anaphylaxis management policy in the school community.
3. To engage with parents/carers of students at risk of anaphylaxis in assessing risks, developing risk minimisation strategies and management strategies for the student.
4. 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.

### **Implementation**

#### **Individual Anaphylaxis Management Plans**

1. The Principal will ensure that an Individual Anaphylaxis 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.
2. 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.
3. 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.
  - 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 practitioner signs the emergency procedures plan; and
    - includes an up to date photograph of the student.

4. School Staff will then implement and monitor the student's Individual Anaphylaxis Management Plan.
5. The student's individual management plan will be reviewed, in consultation with the student's parents/ carers:
  - annually;
  - if the student's medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, changes;
  - as soon as practicable after the student has an anaphylactic reaction at School; and
  - when the student is to participate in an off-site activity, such as camps and excursions, or at special events conducted, organised or attended by the School (eg. class parties, elective subjects, cultural days, fetes, incursions).
6. It is the responsibility of the parent to:
  - provide the ASCIA Action Plan;
  - inform the School in writing if their child's medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, changes and if relevant, provide an updated ASCIA Action Plan;
  - provide an up to date photo for the ASCIA Action Plan when that Plan is provided to the School and when it is reviewed; and
  - provide the School with an Adrenaline Autoinjector that is current and not expired for their child.

### **Communication Plan**

1. 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.
2. 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.
3. Volunteers and casual relief staff of students at risk of anaphylaxis will be informed about students at risk of anaphylaxis and their role in responding to an anaphylactic reaction by a student in their care by the daily organiser.
4. 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
  - viewing the DVD that is available to assist with training.

### **Prevention Strategies**

The school will put in place Risk Minimisation and Prevention Strategies for all relevant in-school and out-of-school settings which include (but are not limited to) the following:

- during classroom activities (including class rotations, specialist and elective classes);
- between classes and other breaks;
- in canteens;
- during recess and lunchtimes;
- before and after school; and
- special events including incursions, sports, cultural days, fetes or class parties, excursions and camps.

### **School Management and Emergency Response**

The School will develop and implement procedures for emergency response to anaphylactic reactions. The procedures shall include the following:

- a complete and up to date list of students identified as having a medical condition that relates to allergy and the potential for anaphylactic reaction;

- details of Individual Anaphylaxis Management Plans and ASCIA Action Plans and where these can be located:
  - in a classroom;
  - in the school yard;
  - in all school buildings and sites including gymnasiums and halls;
  - on school excursions;
  - on school camps; and
  - at special events conducted, organised or attended by the school.
- Information about the storage and accessibility of Adrenaline Autoinjectors;
- how communication with School Staff, students and Parents is to occur in accordance with a communications plan.

### **Adrenaline Autoinjectors for General Use**

The Principal will purchase Adrenaline Autoinjector(s) for General Use (purchased by the School) and as a back up to those supplied by Parents.

The Principal will determine the number of additional Adrenaline Autoinjector(s) required. In doing so, the Principal will take into account the following relevant considerations:

- the number of students enrolled at the School who have been diagnosed as being at risk of anaphylaxis;
- the accessibility of Adrenaline Autoinjectors that have been provided by Parents of students who have been diagnosed as being at risk of anaphylaxis;
- the availability and sufficient supply of Adrenaline Autoinjectors for General Use in specified locations at the School, including
  - in the school yard, and at excursions, camps and special events conducted or organised by the School; and
- the Adrenaline Autoinjectors for General Use have a limited life, usually expiring within 12-18 months, and will need to be replaced at the School's expense, either at the time of use or expiry, whichever is first.

### **Communication Plan**

1. The school will implement a Communication Plan to provide information to all School Staff, students and Parents about anaphylaxis and the School's Anaphylaxis Management Policy.
2. The Communication Plan will include strategies for advising School Staff, students and Parents about how to respond to an anaphylactic reaction by a student in various environments including:
  - during normal school activities including in the classroom, in the school yard, in all school buildings and sites including gymnasiums and halls; and
  - during off-site or out of school activities, including on excursions, school camps and at special events conducted or organised by the School.
3. The Communication Plan will include procedures to inform volunteers and casual relief staff of students with a medical condition that relates to allergy and the potential for anaphylactic reaction and their role in responding to an anaphylactic reaction by a student in their care.
4. It is the responsibility of the Principal of the School to ensure that relevant School Staff are:
  - trained; and
  - briefed at least twice per calendar year.

### **Staff Training**

1. The following School Staff will be appropriately trained:
  - School Staff who conduct classes that students with a medical condition that relates to allergy and the potential for anaphylactic reaction; and
  - Any further School Staff that are determined by the Principal.
2. The identified School Staff will undertake the following training:
  - an Anaphylaxis Management Training Course in the three years prior; and
  - participate in a briefing, to occur twice per calendar year (with the first briefing to be held at the beginning of the school year) on:
    - the School's Anaphylaxis Management Policy;
    - the causes, symptoms and treatment of anaphylaxis;
    - the identities of the students with a medical condition that relates to an allergy and the potential for anaphylactic reaction, and where their medication is located;
    - how to use an Adrenaline Autoinjector, including hands on practise with a trainer Adrenaline Autoinjector device;
    - the School's general first aid and emergency response procedures; and

- the location of, and access to, Adrenaline Autoinjector that have been provided by Parents or purchased by the School for general use.
  - The briefing must be conducted by a member of School Staff who has successfully completed an Anaphylaxis Management Training Course in the last 12 months.
3. In the event that the relevant training and briefing has not occurred, the Principal will develop an interim Individual Anaphylaxis Management Plan in consultation with the Parents of any affected student with a medical condition that relates to allergy and the potential for anaphylactic reaction. Training will be provided to relevant School Staff as soon as practicable after the student enrolls, and preferably before the student's first day at School.
  4. The Principal will ensure that while the student is under the care or supervision of the School, including excursions, yard duty, camps and special event days, there is a sufficient number of School Staff present who have successfully completed an Anaphylaxis Management Training Course in the three years prior.

#### **Annual Risk Management Checklist**

The Principal will complete an annual Risk Management Checklist as published by the Department of Education and Early Childhood Development to monitor compliance with their obligations.

<p><b>School Council ratified this policy in 2014</b> <b>Next review of this policy is in 2019</b></p>
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