**ANAPHYLAXIS MANAGEMENT**

**POLICY**

**Rationale:**

- 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 (cashews), cow’s milk, fish and shellfish, wheat, soy, sesame, latex, certain insect stings and medications.
- It is important therefore that the school has a well-planned management plan for students who have allergies. 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. It is important that certain foods or items are kept away from the student while at school.
- Adrenaline given through an EpiPen autoinjector to the muscle of the outer mid thigh is the most effective first aid treatment for anaphylaxis.

**Aim:**

- 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.

**Implementation:**

**Individual Anaphylaxis Management Plans**

- The principal/nominee 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.
- The Individual Anaphylaxis Management Plan will be in place as soon as practicable after the student enrols, and where possible, before their first day of school.
- The plan will set out the following:
  - Information about the diagnosis, including the type of allergy or allergies the student has strategies to minimise the risk of exposure to allergens while the student is under the care or supervision of school staff 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.
- 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.

**Emergency Procedures Plan (ASCIA Action Plan)**

- 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.
- This plan:
  - Sets out the emergency procedures to be taken in the event of an allergy 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 photo of the student.
Communication Plan

- It is the responsibility of the principal to ensure 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 plan will include what steps will be taken to respond to an anaphylactic reaction by a student in the classroom, in the school yard, on school excursions, on school camps and special event days.
- Volunteers and Casual Relief Teachers of students at risk of anaphylaxis will be informed about the students and of their role in responding to an anaphylactic reaction by a student in their care by the principal/nominee.

Staff Training and Emergency Response

- All teachers and other school staff who are responsible for the care of students at risk of anaphylaxis, must have up to date training in an anaphylaxis management training course.
- The principal is responsible for ensuring that training is provided as soon as practicable after the student enrolls and wherever possible before the student’s first day at school.
- The school’s first aid procedures and the student’s emergency procedures plan must be followed in responding to an anaphylactic reaction.
- 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

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

- The DVD – ‘Recognising and Responding to Anaphylaxis’ is part of the Ministerial Order 90 Anaphylaxis Management In Schools Kit. This kit will be stored in the staffroom.

In the Classroom

- Inform all the students in the grade(s) of any allergies and the triggers and discuss the importance of not sharing food.
- Students are prohibited from sharing their food and celebrations of student birthdays will not include the sharing of any food.
- Establish the following protocol with the grade.
  - Students with ‘trigger food’ lunches are to inform the anaphylactic student(s)
  - Both the anaphylactic student(s) and student(s) with the trigger food lunch are to ensure they sit apart from each other
  - After lunch, all students are directed to wash their hands

Evaluation:

- This policy will be reviewed every three years.
- This policy was last ratified by School Council; March 2016

References: the DEECD Anaphylaxis Policy  DEECD Health Support Planning Policy