

## Anaphylaxis Policy

### **Commitment to Child Safety**

Wantirna Primary School is committed to the safety and wellbeing of all children and young people. This will be the primary focus of our care and decision making. Wantirna Primary School has zero tolerance for child abuse.

Wantirna Primary School is committed to providing a child safe environment where children and young people are safe and their voices are heard about decisions that affect their lives. Particular attention will be paid to the cultural safety of Aboriginal children and children from culturally and/or linguistically diverse backgrounds, vulnerable students as well as the safety of children with a disability.

Every person involved in Wantirna Primary school has a responsibility to understand the important and specific role he/she plays individually and collectively to ensure that the wellbeing and safety of all children and young people is at the forefront of all they do and every decision they make.

### **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
- Following and adhering to all DET requirements under the Children's Services and Legislation amendment (anaphylaxis management) Act 2008

### **Implementation**

Wantirna Primary School is compliant with Ministerial Order 706 and associated guidelines regarding Anaphylaxis Management

**The key reference** and support for the college regarding anaphylaxis is the following DET website <http://www.education.vic.gov.au/school/principals/spag/health/Pages/anaphylaxis.aspx>

A template for the ACSIA Anaphylaxis Plan can be found at:

<https://www.allergy.org.au/hp/anaphylaxis/ascia-action-plan-for-anaphylaxis>

## **Roles and responsibilities**

### **Parents/Carers**

- Must inform the classroom teachers and the principal nominee if they believe their child has a severe allergy that may impact on their safety at school
- Inform the school in writing if their child's medical condition changes insofar as it relates to allergy and the potential for an anaphylactic reaction and if relevant provide an updated ASCIA Action Plan
- Provide the ASCIA Action Plan completed by the family doctor or specialist giving authority to administer an individual child's **Autoadrenaline injecting device**
- The school requires that this advice be updated annually (at the beginning of the school year)
- Will meet with the school to develop the child's individual **Anaphylaxis Management Plan** (preferably prior to enrolment and transition)
- Shall provide an individual **Autoadrenaline injecting device** for their child and ensure that it has not expired or has been used
- Should ensure that students should have an adequate supply of appropriate medication available to them at school or at school events at all times
- Are to supply specific food requirements for camps, excursions and special days/activities if required
- Must inform staff of any changes to their children's condition and/or emergency contact details

### **School Principal will**

- Seek information to identify students with severe life-threatening allergies at enrolment
- Conduct a risk assessment of the potential for accidental exposure to allergens while the student is in the care of the school
- Ensure that outside providers of food supply lists of ingredients when requested
- Ensure there is an **Individual Anaphylaxis Management Plan** for the student. This includes documenting practical strategies for in-school and out-of-school settings to minimise the risk of exposure to allergens, and nominating staff that are responsible for the implementation
- Ensure that all staff are trained in recognising and responding to an anaphylactic reaction, including administering an **Autoadrenaline injecting device**, once each semester by a staff member who has up to date anaphylaxis training
- Provide information to all staff (including specialist staff, education support staff and parent volunteers – where appropriate, and office staff so they are aware of students who at risk of anaphylaxis, the students' allergies, the school's manage strategies and first aid procedures
- Ensure these procedures are in place for informing casual relief teachers of students at risk of anaphylaxis and the steps required for prevention and emergency response.
- Ensure all staff complete an accredited anaphylaxis training course every three years as well as attend semester briefings

- Encourage ongoing communication between parents/carers and staff about the current status of the students' allergies, the school's policies and their implementation
- Ensure the Anaphylaxis Risk Management Checklist and Individual Management Plan is completed annually, or if the student's medical condition changes, insofar as it relates to allergy and the potential or anaphylactic reaction; as soon as practicable after the student has an anaphylactic reaction; as soon as practicable after the student has an anaphylactic reaction; at school. *See Appendix*

### **School staff will**

- Know the students throughout the school who are at risk of an anaphylaxis reaction
- Train in how to recognise and respond to an anaphylactic reaction, including administering an **Autoadrenaline injecting device**
- Know the school's first aid emergency procedures and what their role is in relation to responding to an anaphylactic reaction
- Ensure individual student's autoinjector bags are taken with them when they leave the school grounds
- Plan ahead for special activities or occasions such as excursions, sports days, camps, cooking and parties (Refer to Risk Management Plan)
- Work with parents/carers to provide appropriate food for the student
- Be very careful of food 'treats' given to students in class, as they may contain hidden allergens
- Ensure that identified students are not isolated or excluded within reason from any activity
- Raise student awareness about severe allergies and the importance of their role in fostering a school environment that is safe and supportive for their peers
- All staff are to carry first aid bags with the details of anaphylactic students when on yard duty
- Teachers must be vigilant in supervising lunch eating times

### **Ensuring that the following Prevention Measures are taken into account:**

- Good hygiene and vigilance is vital as varied food products can have traces of allergens
- No sharing of snacks, drinks or lunches by students
- Some soaps, sunscreens, play dough, cooking oil can contain nut traces or other food allergens
- The anaphylactic student will not be required to pick up papers in the school ground

### **Camp/excursion coordinators will**

- Ask a parent or trusted adult to attend the school camp/excursion with the student if the food allergy is life-threatening
- Ensure **Autoadrenaline injecting devices** are taken on outings
- Liaise with the campsite personnel, staff and parents to ensure that adequate precautions and safety measures are instituted
- Ensure all adults attending the activity have an understanding of the treatment necessary for students who may have an anaphylactic reaction
- As parents to supply specific food if necessary

### **First Aid coordinators will**

- Keep an up to date register of students at risk of anaphylaxis including expiry dates of **Autoadrenaline injecting device**
- Staff will be informed as to the identity (photos) of all students known to have severe allergic reactions
- Ensure that students emergency contact details are up to date
- Ensure there is training in recognising and responding to an anaphylactic reaction, including administering an **Autoadrenaline injecting device** for staff

- At the beginning of each term, check that the **Autoadrenaline injecting device** is not cloudy or out of date and if so, and inform parents/carers
- Complete the Anaphylaxis Risk Management Checklist annually (Appendix)
- Inform students and their families of that class, of any anaphylactic students in the class (Appendix)
- Ensure that the **Autoadrenaline injecting device** is stored correctly (at room temperature and away from light) in an unlocked, easily accessible place, and it is appropriately labelled
- Ensure the school has a spare **Autoadrenaline injecting device** which is not out of date
- Ensure the **Autoadrenaline injecting device** will be kept in an individually named bag including a photo of the student along with any other medicine the student requires. The bag will be kept in the staff room. The bag will also contain the student's individual **Anaphylaxis Management Plan** including directions for correct use of **Autoadrenaline injecting device**
- Ensure an Alert Register about each student and their individual **Anaphylaxis Management Plan** and photo is kept in the First Aid Room, Staff Room, Resource Room, Yard Duty bags and on display in the classroom and specialist areas

### Implementation

- All staff are to carry first aid bags with the details of the anaphylactic students when on Yard Duty
- Staff will be informed as to the identity (photos) of all students known to have severe allergic reactions
- The school must inform the Out of School Hours staff and any other relevant adults responsible for the student and operating in the school of the child's allergy and the appropriate medical response
- The teacher and the parents will communicate whenever the class is planning to have special food days to ensure the student is not placed at risk

### Emergency Response to an Incident at School



- An adult is to administer an **Autoadrenaline injecting device** immediately
- An adult is to stay with the student at all times
- The office is to be called and announce for the **Autoadrenaline injecting device** room or location in the school ground. If there is no response, send students to the office
- The office staff are to call for an ambulance and then contact the parents/carers
- An adult is to meet the ambulance
- The **Autoadrenaline injecting device** is to be kept with the student and the time given noted and supplied to the paramedics
- The student is to be kept lying down or in a semi-sitting position if they are having trouble breathing.
- Manage the student's airways

| Step | Action   |
|------|--|
| 1.   | <ul style="list-style-type: none"> <li>• Lay the person flat</li> <li>• Do not allow them to stand or walk</li> <li>• If breathing is difficult, allow them to sit</li> <li>• Be calm and reassuring</li> <li>• Do not leave them alone</li> <li>• Seek assistance from another staff member or reliable student (if necessary) to locate the student's adrenaline autoinjector or the school's general use autoinjector, and the student's Individual Anaphylaxis Management Plan, stored in the staff room.</li> <li>• If the student's plan is not immediately available, or they appear to be</li> </ul> |

|    |  |
|----|--|
|    | experiencing a first time reaction, follow steps 2 to 5  |
| 2. | <p>Administer the appropriate <b>Autoadrenaline injecting device</b></p> <ul style="list-style-type: none"> <li>• Remove from plastic container</li> <li>• Form a fist around the <b>Autoadrenaline injecting device</b> and pull off the blue safety release (cap)</li> <li>• Place orange end against the student's outer mid-thigh (with or without clothing)</li> <li>• Push down hard until a click is heard or felt and hold in place for 3 seconds</li> <li>• Remove <b>Autoadrenaline injecting device</b></li> <li>• Note the time the <b>Autoadrenaline injecting device</b> is administered</li> <li>• Retain the used <b>Autoadrenaline injecting device</b> to be handed to ambulance paramedics along with the time of administration</li> </ul> |
| 3. | Call an ambulance (000)  |
| 4. | If there is no improvement or severe symptoms progress (as described in the ASCIA Action Plan for Anaphylaxis), further adrenaline doses may be administered every five minutes, if other adrenaline autoinjectors are available.  |
| 5. | Contact the student's emergency contacts.  |

Appendices:

- Anaphylaxis Risk Management Checklist
- Anaphylaxis Management Plan

|  |  |
|--|--|
| <b>Date Implemented</b>                          | October 2015   |
| <b>Author</b>                                    | Education Committee<br>Brogan Badrock, Victoria Blundell, Yvette Preyser, Sue Fergeus  |
| <b>Approved By</b>                               | School Council   |
| <b>Approval Authority (Signature &amp; Date)</b> | <br> |
| <b>Date Reviewed</b>                             | July 2019  |
| <b>Responsible for Review</b>                    | Education Committee  |
| <b>Review Date</b>                               | July 2020  |

# ANAPHYLAXIS RISK MANAGEMENT CHECKLIST

School Name: Wantirna Primary School  
Address: 120 Mountain Hwy Wantirna

Date of Review:

Time:

School Contact Person: Name:

(Who provided information collected?)

Position:

Review given to: Name:  
(If different from above)

Position:

Comments:

1. How many current students are diagnosed with anaphylaxis?.....

2. Have any students ever had an allergic reaction while at school? YES  NO   
If Yes, how many times?

3. Have any students had an Anaphylactic Reaction at school? YES  NO   
If Yes, how many times?

4. Has a staff member been required to administer an EpiPen® to a student? YES  NO   
If yes, how many times?

# 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 school 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<br>(if parent/carer not available):  |                              |                              |
| Medical practitioner contact:   |                              |                              |
| Emergency care to be<br>provided at school:   |                              |                              |
| EpiPen® storage:  |                              |                              |
| The following Anaphylaxis Management Plan has been developed with my knowledge and input and<br>will be reviewed on |                              |                              |
| Signature of parent:  |                              | Date:                        |
| Signature of principal (or nominee):  |                              | Date:                        |

