Anaphylaxis Management 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 school. Adrenaline given through an EpiPen® or Anapen® auto injector to the muscle of the outer mid-thigh is the most effective first aid treatment for anaphylaxis.

PURPOSE
• Provide a safe and healthy school environment at Huntingdale Primary School that takes into consideration the needs of all students, including those who may suffer from anaphylaxis.
• 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.
• Manage anaphylaxis effectively and efficiently as possible at school.
• Ensure open communication of children’s anaphylaxis between parents and the school.
• Raise awareness about anaphylaxis and the school’s anaphylaxis management policy in the school community.
• Ensure that each staff member has adequate knowledge about allergies, anaphylaxis and the school’s policy and procedures in responding to an anaphylactic reaction.
• Ensure the school is compliant with asthma policies and procedures as outlined in DET’s Ministerial Order 706, DET Anaphylaxis Guidelines (which may be amended by DET from time to time), Occupational Health and Safety Guidelines and the School Policy and Advisory Guide.

IMPLEMENTATION
• This policy works in conjunction with the school’s First Aid Policy.

Individual Anaphylaxis Management Plans
• The Principal in conjunction with the First Aid Officer 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 and kept up to date (use proforma on Page 62 of DET Anaphylaxis Guidelines).
• 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. The individual anaphylaxis management plan will set out the following:
  o Information about the diagnosis, including the type of allergy or allergies the student has (based on a diagnosis from a medical practitioner).
  o 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.
  o The name of the person/s responsible for implementing the strategies.
  o Information on where the student’s medication will be stored.
  o The student’s emergency contact details.
  o 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 and signed by a medical practitioner who was treating the child on the date the practitioner signs the emergency procedures plan; and
  o 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:
  o Annually, and as applicable,
  o If the student’s condition changes, or
  o Immediately after a student has an anaphylactic reaction at school.
  o The plan is available at http://www.allergy.org.au/health-professionals/anaphylaxis-resources/ascia-action-plan-for-anaphylaxis

• It is the responsibility of the parent to:
  o Provide the emergency procedures plan
  o Inform the school if their child’s medical condition changes, and if relevant provide an updated emergency procedures plan
  o Provide an up to date photo for the emergency procedures plan when the plan is provided to the school and when it is reviewed.

Communication
• The Principal will be responsible for ensuring that anaphylaxis is communicated to the school community. This includes:
  • Student anaphylaxis plans will be displayed in the Health Centre and the classroom.
  • Informing the community about anaphylaxis via the school newsletter.
  • 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. Posters of anaphylaxis management will be in the Health Centre.
  • Student anaphylaxis medication will be kept in the Health Centre in clearly marked boxes.
  • Volunteers and casual relief staff of students at risk of anaphylaxis will be informed and their role in responding to an anaphylactic reaction by a student in their care.
  • Any updates to anaphylaxis plans will be communicated by the Office Manager to staff as soon as possible and documentation updated.

Staff Training
• All staff will be briefed once each semester by a staff member who has up to date anaphylaxis management training on:
  o The school’s anaphylaxis management policy
  o The causes, symptoms and treatment of anaphylaxis
  o The identities of students diagnosed at risk of anaphylaxis and where their medication is located
  o How to use an auto adrenaline injecting device such as EpiPen®/Anapen®.
  o The school’s first aid and emergency response procedures

Prevention and Emergency Response
• The Office Manager will complete the Anaphylaxis Risk Management Checklist (Page 67 of DET Anaphylaxis Guidelines).
• Huntingdale Primary School will ask that food containing nuts should not be brought to school.
• Foods which are discouraged include nuts or products including, but not limited to, Nutella, peanut butter, fruit & nut bars, or other products containing nuts in the ingredients. This does not include foods that contain the warning “may contain traces of nuts”.
• Despite all reasonable efforts to restrict nuts and nut products at Huntingdale Primary School, exposure to nuts or nut products may still occur and parents, staff and at-risk students must always remain vigilant to avoid exposure to unsafe foods.
• At special events which involve food (e.g. Intercultural Weeks) any food product should have a full list of ingredients so it can be evaluated whether students with anaphylaxis can consume these.
• Student anaphylaxis plans will be displayed in the Health Centre and the classroom.
• Students' anaphylaxis medication is kept in the Health Centre in clearly marked boxes and will be checked termly to ensure it is in date. Parents will be informed when the medication needs replacing.
• The school will purchase 2 spare EpiPens® as a back up to use in emergency situations.
• Anaphylaxis medication will be taken on school excursions, camps, sports days and overseas travel.
• In any event of an anaphylaxis emergency, the school will follow the steps outlined on the child's anaphylaxis plan. In all instances parents will be notified.
• In extreme and life threatening cases an ambulance will be called. The school's emergency management plan will be enacted.
• All instances of anaphylaxis emergencies will be reported on CASES21 and EduSAFE.
• An anaphylactic reaction can be traumatic for the student and others witnessing the reaction. In the event of an anaphylactic reaction, students and staff may benefit from post-incident counselling, provided, for example, by the school social worker, student welfare coordinator or school psychologist.

EVALUATION
• Monthly sick bay reports
• EduSafe
• This policy will be reviewed as part of the school's three-year review cycle.

CERTIFICATION
This policy was endorsed by School Council at the meeting held on 19 May 2015.

Signed.................................................. Signed..................................................
Principal........................................ School Council President