Anaphylaxis Policy

RATIONALE

Kingswood Primary cultivates a teaching and learning environment that is flexible, caring and focused on what is best for the students. All students have the right to feel safe and well, and know that they will be attended to with due care.

Anaphylaxis is a severe, rapidly progressive allergic reaction that is potentially life-threatening. 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 those triggers. Adrenaline administered through an Epipen or its equivalent to the muscle of the outer thigh is the most effective first aid treatment of anaphylaxis.

AIMS

- To comply with Ministerial Order 706 and the associated Guidelines published and amended by the Department from time to time.
- 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 schooling.
- To engage with parents/carers of students at risk of anaphylaxis in assessing risks, developing risk minimisation strategies and the management strategies for the student.
- To ensure that staff have adequate knowledge about allergies, anaphylaxis and the school's policy and procedures in responding to an anaphylactic reaction.
- To raise awareness about anaphylaxis and the school’s anaphylaxis management plan in the school community.

IMPLEMENTATION

INDIVIDUAL ANAPHYLAXIS MANAGEMENT PLANS

The Principal will ensure that parents of students, who have been diagnosed by a medical practitioner as being at risk of anaphylaxis, understand that their medical practitioner must provide an up-to-date ASCIA Action Plan to the school as early as possible.

The school will ensure that an individual anaphylaxis management plan is developed in consultation with the student's parents and will be in place as soon as practicable after the student enrolls.

The individual anaphylaxis management plan will set out the following:
- information about the diagnosis, including the type of allergy or allergies 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
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of school staff, for in-school and out of school settings including camps and excursions
• information on where the student’s medication will be stored.
• emergency contact details for the student
• the procedure for managing an emergency (ASCIA Action Plan), which is provided by the parent.

Each student’s individual management plan will be reviewed, in consultation with 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 an up-to-date ASCIA Action Plan to the school with current photo of child
• inform the school if their child’s medical condition changes, and if relevant, provide an updated ASCIA Action Plan
• provide the school with an adrenaline autoinjector that is current and not expired for their child.

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 CRT coordinator (or designated person) 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 information in class rolls, and
• if replacing a specialist teacher, having access to the specialist timetable, which identifies classes with anaphylactic students.

STAFF TRAINING
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.
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All staff will be briefed once each semester 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 adrenaline autoinjecting device
• the school’s first aid and emergency response procedures.

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 anaphylaxis management.

GENERAL
• adrenaline autoinjecting devices (EpiPen’s) are located in the staffroom in an EpiPen pouch labelled with the student’s name, instructions for use and a copy of student’s ASCIA plan;
• each student's ASCIA plan is also located in the sick bay and readily accessible;
• a photo of each individual student at risk is displayed throughout the school;
• the designated first aid officer is responsible for checking the expiry dates of the adrenaline autoinjecting devices and will notify parents prior to expiry;
• a spare or ‘back-up’ adrenaline autoinjecting device purchased by the school is located in the sickbay for general use;
• each student’s ASCIA action plan is updated annually by the student’s medical practitioner;
• each classroom e-roll has information of each student at risk of anaphylaxis;
• each yard duty first aid bag contains individual cards with the students’ photos and names. In the event of an anaphylactic emergency during recess or lunch time, the appropriate card is sent to the sick bay so that the first aid officer can execute a rapid response;
• 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, two adrenaline autoinjecting devices will accompany students at risk and remain close to the student. Consideration is given in planning ahead for food and meals for students at risk of anaphylaxis;
• staff are routinely briefed about students at risk of anaphylaxis.

ANAPHYLAXIS COMMUNICATION PLAN
Kingswood Primary School has taken steps to ensure effective communication of students at risk of anaphylaxis.
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1. Anaphylaxis action plans are located in the sick bay and include students’ photos.
2. 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. Staff will receive a copy of anaphylactic management plan, including photo, for all anaphylactic children in their grade.
3. Anaphylaxis action plans, including photos, are displayed in all specialist rooms.
4. All staff undergo regular briefings on anaphylaxis, the symptoms and emergency responses.
5. CRTs are informed of students at risk and what their role is in responding to an anaphylactic reaction for a student in their care.
6. Parents/carers of anaphylactic students will be contacted each year to ensure we have the most up-to-date anaphylactic management plan available.

EMERGENCY MANAGEMENT
In the event of an anaphylactic episode

During Instruction time (in classrooms or specialists):
• the teacher in charge will contact the sick bay/office
• Get assistance from classroom teacher next door
• If possible, the child will be taken to the sick bay where their personal adrenaline autoinjecting device (Epipen) can be used or EpiPen to be brought to specific location immediately
• When it is decided to use the Epipen; the office will ring 000 immediately and notify relevant staff to provide support. A mobile phone will be used if the child is not located in the office area
• a staff member will then contact parents or emergency contacts.

During recess and lunch times (in the school playground):
• all yard duty teachers carry a first aid bag, which will contain photographs of anaphylactic students
• in the event of an anaphylactic episode, the yard duty teacher will contact the office and will provide the name of the student so their personal adrenaline autoinjecting device can be taken to the scene directly. A second office member will take the general use adrenaline autoinjector located in sickbay to the scene directly
• A staff member will call 000 for ambulance/emergency advice, then contact parents or emergency contacts.

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
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- two adrenaline autoinjecting devices 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 adrenaline autoinjection
- 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).

First-time reactions:
If a student has a severe allergic reaction, but has not been previously diagnosed with an allergy or being at risk of anaphylaxis, School Staff will follow the school's first aid procedures. This should include immediately contacting an ambulance on 000. It may also include administering the general use adrenaline autoinjector.

Post-incident Support:
An anaphylactic reaction can be a very traumatic experience for student, parents, staff and others witnessing the incident. In the event of an anaphylactic reaction, students and school staff will be provided with counselling if needed.

Review:
After an anaphylactic reaction has taken place that has involved a student in the school’s care and supervision, the following review processes will take place:
- the adrenaline autoinjector must be replaced by parent as soon as possible;
- the principal will ensure that there is an interim Individual Anaphylaxis Management Plan should another anaphylactic reaction occur prior to the replacement of the adrenaline autoinjector being provided;
- if the adrenaline autoinjector for general use has been used this must be replaced as soon as possible;
- the principal will ensure that there is an interim plan in place should another anaphylactic reaction occur prior to the replacement of the general use adrenaline autoinjector being provided;
- the student’s Individual Anaphylaxis Management Plan will be reviewed in consultation with the student’s parents;
- the school’s Anaphylaxis Management Policy will be reviewed to ensure that it adequately responds to anaphylactic reactions by students who are in care of school staff.
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ANAPHYLAXIS MANAGEMENT
Schools are encouraged not to ban nut products, but to raise awareness of the risks associated with anaphylaxis and to implement practical age-appropriate strategies to minimise exposure to known allergens.

Minimising exposure:
• As Kingswood is not a nut free school and parents are free to pack the foods of their choice for their children to eat at school, we ask that parents are mindful that we have children and teachers who are anaphylactic, a condition that can cause death.
• Teachers at Kingswood Primary will educate children about food allergies, reinforce that we don't share food and that we should wash our hands after eating to minimise risk.

Parents can help us maintain a safe environment by:
• teaching your child not to share food with friends
• considering sending non-food treats for birthdays (eg: stickers)
• encouraging your child to wash their hands before and after eating
• asking your child to get help immediately if their allergic schoolmate gets sick.

Prior to commencing units of work that involve cooking, teachers will discuss the individual needs of students at risk with parents.

Parents who have concerns or require clarification are urged to speak to the classroom teacher. Alternatively, you can contact the office for further information.

REFERENCES
Departments School Policy and Advisory Guides:
• Anaphylaxis
• Responding to Anaphylaxis
• Ministerial Order 706

Related Policies:
• First Aid Policy

EVALUATION
This policy will be reviewed as part of the school's three-year review cycle.

Review

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# Anaphylaxis Policy

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