ANAPHYLAXIS POLICY

1. 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 (e.g. cashews), cow’s milk, fish and shellfish, wheat, soy, sesame and certain insect venom (particularly bee stings).

The key to prevention of anaphylaxis in schools is knowledge of the student who has been diagnosed as at risk, awareness of allergens, and prevention of exposure to those allergens. Partnerships between schools and parents/guardians are important in helping the student avoid exposure.

Adrenaline given through an adrenaline autoinjector (such as EpiPen or Anapen) into the muscle of the outer thigh is the most effective first aid treatment for anaphylaxis.

PRINCIPLES

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 their schooling
2. To raise awareness about anaphylaxis and the school’s anaphylaxis management policy in the school community
3. To develop with parents/guardians of each student at risk of anaphylaxis in assessing the risks and developing risk minimisation strategies for the student
4. To ensure that staff have knowledge about all allergies, anaphylaxis and the school’s guidelines and procedures in responding to an anaphylactic response.

HEALTH CARE PLANS

1. The principal will ensure that an Individual Anaphylaxis Health Care Plan is developed in consultation with the student’s parents/guardians, for any student who has been diagnosed by a medical practitioner as being at risk of anaphylaxis
2. The Individual Health Care Plan will be in place as soon as practicable after the student is enrolled and where possible before their first day of school
3. It is the professional responsibility and duty of the teacher to ensure that medications, student medical action plans and First Aid kits are taken on excursions, to sporting events and camp.
4. The student’s Individual Anaphylaxis Health Care Plan will be reviewed, in consultation with the student’s parents/guardians:
   a. Annually, and as applicable
   b. If the student’s condition changes
   c. Immediately after the student has had an anaphylactic reaction
It is the responsibility of the parent/guardian to:

a. provide an ASCIA Action Plan completed by the child’s medical practitioner with a current photo

b. inform the school if their child’s medical condition changes, and if relevant provide an updated ASCIA Action Plan.

PROCEDURES

LOCATION OF EPIPENS AND MEDICATION FOR MILD REACTIONS

All students whose medical condition requires medication to be administered must have a Medical Action Plan and Medical Administration form signed by a medical practitioner.

Generally, student medicines will be kept in the School Office, First Aid cabinet (unlocked). Students in Pre-Kindergarten, Kindergarten and Pre-Primary will have their medications stored in the fridge or a secure area.

1. A student whose medical condition is anaphylaxis and is severe (no anti-histamine) will have access to their Epipen in the classroom
2. Students whose medical condition is anaphylaxis and an anti-histamine is administered before an Epipen or is only anti-histamine will have access to their anti-histamine in the classroom and their Epipen in the School Office, First Aid cabinet
3. An emergency Epipen is kept in the School Office, First Aid cabinet
4. Emergency anti-histamine is kept in the School Office, First Aid cabinet
5. Parents/care givers are responsible for providing the School with a child’s Epipen
6. Administration Officer and Assistant Principal are responsible (each term) for checking the ‘use by date’ to ensure the Epipen and anti-histamine medication are not out of date
7. All student medication is sent home with the child at the end of the School year.

INDIVIDUAL ACTION PLANS

1. Student’s Individual Action Plan is to be provided by parents annually, i.e. at the beginning of each school year and within given time frame updated
2. Copy of student’s Individual Action Plan to be placed in the Medical Action Plan file
3. Copy of student’s Individual Action Plan to be placed on the wall in the teacher staffroom
4. Staff are alerted to all student medical information in the staff meeting immediately after updated information is received from parents
5. Notification of students’ allergies/triggers are given to Canteen, including Medical Action File
6. Relief teachers are provided with a Medical Action File upon arrival at school (Assistant Principal)
7. Outline of Medical Action Plan for all students with anaphylaxis to be fixed by ‘contact’ to front of all duty files. Students’ names and allergy are also to be listed on the file.

8. Parents will give written permission annually for school to display student’s Individual Action Plan in the classrooms and staffroom.

9. A student’s Individual Action Plan is reviewed after each ‘reaction’ if appropriate.

**EPIPEN EMERGENCY**

Emergency ‘Epipen Alert’ cards will be kept in all classrooms. In the event of a child having an Anaphylactic reaction the Epipen is to be administered immediately. An ‘Epipen Alert’ card is to be sent to the office where an ambulance will be called and the back-up Epipen brought to the child by another staff member. (Back-up Epipen is to be administered should symptoms reappear due to the ambulance being delayed)

Immediately after a student has had an anaphylactic reaction staff must call an ambulance and state, “a child is having an anaphylactic reaction and requires an intensive care ambulance”. If the student is wearing a Medic Alert bracelet then the number on the bracelet should be given over the telephone.

**CAMPS**

The Camps and Excursions Form must be completed fully as required for all off-site events

1. If the student requires an EpiPen, without anti-histamine, it will be kept with student at all times on their person or with a responsible adult supervising the student in the case of a small child or child with impairment. This is the Class Teacher’s responsibility

2. All Medical Action Plans for students on Camp are to be taken and to be in the care of the Class Teacher and or the adult supervising the student

3. Class Teacher/s to ensure all medications for mild and severe reactions are taken to camp in conjunction with a full First Aid Kit

4. At the Pre-Camp Parent meeting, teacher/s should discuss meal plans with parents and make alternative plans if necessary

5. Class Teacher/s are responsible for advising camp staff of students’ food/ allergy requirements, checking the menu in advance, checking food preparation at the camp and the overall care of the student regarding their allergy.

6. Class Teacher/s are to ensure that a spare EpiPen is taken in the First Aid Kit to camp

7. Parents of students on camp are to be advised of the travelling time to and from the nearest hospital with an emergency section

8. Two mobile phones should be taken on camp and one kept close to student at all times.
EXCURSIONS INCLUDING SPORTING EVENTS

1. If the student requires an EpiPen, without anti-histamine, it will be kept with student at all times on their person or with a responsible adult supervising the student in the case of a small child or child with impairment. This is the Class Teacher’s responsibility.

2. All Medical Action Plans for students on Excursion are to be taken and to be in the care of the Class Teacher and or the adult supervising the student.

3. Class Teacher/s to ensure all medications for mild and severe reactions are taken on the excursion in conjunction with a First Aid Kit.

4. Class Teacher/s are be responsible for checking if there is anything the child might come into contact with on the excursion, which could contain allergens (not just food items) and make arrangements with parents or the provider if necessary.

5. The School mobile phone should be taken on all excursions.

ALL BUS TRAVEL

First Aid kits are required for all bus travel, including bus shuttle runs. e.g. to and from swimming lessons. These are to be collected on departure and returned on arrival at school by the Class Teacher.

SWIMMING LESSONS

A full First Aid kit must stay with supervising teachers at swimming lessons.

COMMUNITY EDUCATION

• Classmates of an anaphylactic student shall be made aware of the condition and symptoms each year.

• The School will promote awareness of anaphylaxis on an on-going basis to all staff, students and parents.

• Staff receive annual training in anaphylactic awareness, recognition and management.

• The School Nurse will train all staff annually on the administration of Epipens. All new staff will be trained on joining the school.

• All relief staff will be trained on the use of an EpiPen at the beginning of the school year.

• An annual review of this policy will be conducted.

• Regular mock emergencies will be run to test that all areas of concern have been covered.
CHECKLIST:

- Copies of Student Medical Action plans
- Medications including EpiPens, anti-histamines
- Asthma (bumbag) containing Ventolin and spacer
- Other medications if required
- First Aid kit
- School mobile phone

REVIEW HISTORY

Originally Released 2005
Reviewed 2008
2013
2014

NEXT REVIEW 2019