

# Lilydale Primary School

No: 0876



## **Anaphylaxis Management Policy**

#### Rationale

At Lilydale Primary School it is important that school staff and the parent/carer are confident about the management of students who have been identified by a medical practitioner as being at risk of an anaphylactic reaction.

Anaphylaxis is an acute reaction to certain food items and insect stings. It is a severe and potentially life-threatening condition. The condition develops in approximately 1 - 2% of the population. The most common allergens are nuts, eggs, cow's milk, soy, fish and shellfish, seafood, wheat, sesame, latex and bee or other insect-stings, and some medications.

Signs and symptoms of anaphylaxis vary from mild/moderate hives/rash, tingling in or around the mouth, abdominal pain, vomiting or diarrhoea, facial swelling to severe (anaphylaxis) cough or wheeze, difficulty breathing or swallowing, loss of consciousness or collapse, or cessation of breathing. Anaphylaxis is best prevented by knowing and avoiding the allergens.

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 auto injector to the muscle of the outer mid-thigh is the most effective first aid treatment for anaphylaxis.

#### Aims

- To provide a safe and healthy school environment that takes into consideration the needs of all students, including those who may suffer from anaphylaxis, and to ensure we manage the care of students at risk of anaphylaxis.
- 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*

Our school will manage anaphylaxis by:-

- Ensuring staff are provided with professional development which identifies symptoms and processes in the
  event of an anaphylactic reaction, the appropriate response to anaphylaxis and the proper use of an EpiPen or
  Anapen
- Ensuring staff are aware of the symptoms of reactions by conducting bi-annual briefings and practices with EpiPen, EpiPen Jr or Anapen as used by the student.
- Identifying susceptible students and knowing their allergens.
- Informing the community about anaphylaxis via the newsletter.
- Informing parents, by letter, of existing severe allergies, reminding families of the need for vigilance when sending food for class parties.
- Discouraging food sharing, and restricting food to that approved by parents.
- Keeping the lawns well mown and ensuring children always wear shoes outdoors.
- Ensuring parents update their child's information to the school as required.
- Determining the most suitable location to allow for storage at the appropriate temperature, by negotiation between school management, the parents and the child's teacher, annually.

- Supporting this emergency plan further at the school level via an Anaphylaxis Emergency Management Plan. Copies will be located in first aid room, classrooms and administration offices. Student photo is in staff room and first aid room.
- Strongly discouraging certain types of foods including nuts and products which contain nuts. Banning food is not a strategy recommended by the Royal Children's Hospital. The school will request that parents do not send these items to school in classes known to have anaphylactic students.
- Schools must determine the number of backup adrenaline auto-injection devices to be purchased for general use, taking into account the number of students at risk of anaphylaxis and the likely availability of a backup device in various settings, including school excursions and camps.
- First Aid Coordinator will check the dates each term and will notify parents that the EpiPen is about to expire.
- Maintaining a 'back-up' EpiPen for emergencies.
- Schools must complete the Anaphylaxis Risk Management Checklist on an annual basis.

## Parents will be required to:

- Provide an EpiPen and ensuring that it is within the labeled guidelines and use by date.
- Provide an emergency management plan developed by a health professional, which is reviewed annually, and an EpiPen. The plan must outline the student's known allergies and the types of reactions to be expected.

#### In the event of an anaphylactic reaction the school will adhere to the individual's anaphylaxis plan:

<ul> <li>Lay the person flat – do NOT stand or walk</li> </ul>	<ul> <li>Then contact the parent</li> </ul>
<ul> <li>If the patient is suffering breathing difficulties</li> </ul>	If there is no improvement in 5 minutes, administer the
they could be sat up	school's EpiPen.
<ul> <li>Administer the EpiPen as prescribed</li> </ul>	
<ul> <li>Call an Ambulance – Ring 000</li> </ul>	

## Individual Anaphylaxis Management Plan

- The Principal will ensure that an individual management plan is developed, in consultation with the student's parent(s), for any student who have 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 individual anaphylaxis management plan will set out the following:
  - Information about the diagnosis, including the type of allergies the 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 of the school staff, for in-school and out of school settings 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.
  - 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;
    - 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 photograph of the student.
- 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 anaphylaxis reaction at school
- 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.

#### **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 anaphylaxis management policy.
- The communication plan will include 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.
- Volunteers and casual relief staff of the students at risk of anaphylaxis will be informed of students at risk
  of anaphylaxis and their role in responding to an anaphylactic reaction by a student in their care by the daily
  organiser.
- All staff will be briefed twice a year 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 auto adrenaline injecting device
  - The school's first aid and emergency response procedures

## Staff Training and Emergency Response

- Teachers and other school staff who conduct classes which students at risk of anaphylaxis attend, or give
  instruction to students at risk of anaphylaxis must have up to date training in an anaphylaxis management
  training course.
- At other times while the student is under the care or supervision of the school, including excursions, yard duty, camps and special event days, the Principal must ensure that there is a sufficient number of staff present who have up to date training in an anaphylaxis management training course.
- All staff to be fully trained every 3 years.
- Training will be provided to new staff as soon as practicable.
- Wherever possible, training will take place before the student's first day at school. Where this is not possible, an interim plan will be developed in consultation with the parents.
- The school's first aid procedures and student's emergency procedures plan (ASCIA Action Plan) will be followed in responding to an anaphylactic reaction.

#### **Evaluation**

This policy will be reviewed every three years or following an incident or event to make sure the information is current and all person/s are aware of how to respond to a reaction. This policy must be submitted to School Council for approval.

Schools must meet with the parents/carers of each student diagnosed as at risk, to develop an Individual Anaphylaxis Management Plan, which includes an ASCIA Action Plan for Anaphylaxis, completed and signed by a medical practitioner. This information must be distributed to all appropriate teachers.

Reviewed 2023