

Broadmeadows Valley Primary School ANAPHYLAXIS MANAGEMENT POLICY

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. hazelnuts, cashews and almonds), 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.

AIMS:

- 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 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:

- It is the parents and/or primary care givers responsibility to notify staff at school of their child's anaphylactic condition in writing.
- The Principal will ensure that an individual 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.
- Staff will receive annual training in the treatment and management of anaphylactic students including the correct administration of the Epipen®. All staff will be briefed by a staff member who has up to date anaphylaxis management training. (Note: A DVD from the Anaphylaxis Guidelines Information Pack can also be used for this purpose at staff briefings).
- Teachers and other staff, who conduct classes that students at risk of anaphylaxis attend, will have up to date training in an anaphylaxis management training course..
- Training will be provided to these staff as soon as practicable after the student enrols and where possible before the student's first day at school.
- At other times when the 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 an anaphylaxis management training course.
- For any excursion outside the school setting teachers will use the sign out/in procedure for removing an EpiPen from the sickbay, prior to and on return from the excursion.

- The school's First Aid procedures and students Emergency Procedures Plans (ASCIA Action Plan) will be followed in responding to an anaphylactic reaction.
- The First Aid Officer will be responsible for checking Epipen® expiry dates as well as storage temperatures for Epipens held at the school. Parents and primary carers will be notified a month prior in writing if the EpiPen needs to be replaced.
- Disposal of any used Epipen® will be in accordance with Occupational Health and Safety.
- Parents and/or carers are responsible for ensuring their children have an adequate supply of appropriate medication held at the school and for replacing the EpiPen before it expires.
- Children at risk of anaphylaxis will only eat food that is supplied or permitted by the parent/carer, and will not share food or accept food from any other person.
- There will be regular discussions with students and staff about the importance of washing hands, for all students to only eat their own food and not share food including not purchasing on behalf of other children e.g. at the canteen.

COMMUNICATION

- 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 management policy.
- The communication plan will include information about what steps will be taken to respond to an anaphylactic reaction by a student in the classroom, in the school yard, on school excursions, on school camps and special event days.
- Volunteers and casual relief staff 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 Casual Relief Coordinator.
- The Principal will ensure that all staff are trained and briefed as required.
- As awareness of students with anaphylaxis throughout the school is vital, information regarding students
 individual responses and treatment along with their photo, will be identified on SENTRAL and prominently placed
 in learning neighbourhoods, specialist areas, the sickbay/first aid room, in the CRT Information Handbook and the
 Yard Duty bags. This will include Epipen® administration directions and a copy of the individual student's Action
 Plan.
- Parents/carers of all students need to inform the school in advance if they are bringing cakes, treats or food
 to share with other students as they may cause allergic reactions in at-risk students.
- Use of non-food treats where possible should be encouraged. If food treats are used in class, it is
 recommended that parents/carers provide a treat box with alternative treats. Treat boxes should be clearly
 labelled and only handled by the student.

This policy has been developed in line with Ministerial Order 706. The school will fully comply with this order and the associated Guidelines published and amended by the Department from time to time. The school staff will implement and monitor each student's individual anaphylaxis management plan. This policy must be read in conjunction with:

Ministerial order 706.

http://www.education.vic.gov.au/Documents/school/teachers/health/ministerialorderword.docx

and Anaphylaxis Guidelines

http://www.education.vic.gov.au/Documents/school/teachers/health/anaphylaxisguidelines14.docx.docx

DEFINITIONS:

Allergy:

• The immunological process of reaction to something that the body has identified as an allergen. People genetically programmed to make an allergic response will make antibodies to particular allergens.

Allergic reaction:

A reaction to an allergen. Common signs and symptoms include one or more of the following: hives, tingling
feeling around the mouth, abdominal pain, vomiting and/or diarrhoea, facial swelling, cough or wheeze, difficulty
swallowing or breathing, loss of consciousness or collapse, or cessation of breathing.

Anaphylaxis:

 A severe, rapid and potentially fatal allergic reaction that involves the major body systems, particularly lungs or circulation systems.

Anaphylaxis "Action Plan":

 A medical management plan prepared and signed by a doctor; it must provide the child's name and allergies, and clear instructions on treating an anaphylactic episode. An example of this is the Australian Society of Clinical Immunology and Allergy (ASCIA) action plan.

Anaphylaxis "Management Plan":

• A plan completed by the Principal or nominee on the basis of information from the students medical practitioner provide by the parent/carer. This plan outlines strategies to avoid allergens and minimise risks to the student.

Children with Anapylaxis:

• Those children whose allergies have been medically diagnosed, and who are at risk of anaphylaxis.

Anaphylaxis management training:

• Training provided by a person designated by the Principal which includes recognition of allergic reactions, treatment and practise with an Epipen® trainer. Training should also include strategies for anaphylaxis prevention.

ASCIA:

Australasian Society of Clinical Immunology and Allergy.

Epipen® kit:

A container, for example an insulated lunch pack. The kit should contain a current Epipen®, a copy of an
anaphylaxis action plan, and telephone contact details for the child's parents/primary care giver, the
doctor/medical service and the person to be notified in the event of a reaction if the parent/primary care giver
cannot be contacted. The kit should also contain a container (such as a tooth brush holder) to store a used
Epipen® until safe disposal can be arranged.

APPENDIX

Proforma 1: This Plan is to be completed by the First Aid Officer 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 | | | | |
| (if parent/carer not available): | | | | |
| Medical practitioner contact: | | | | |
| Emergency care to be | | | | |
| provided at school: | | | | |
| Epipen® storage: | | | | |
| | | | | |
| The following Anaphylax reviewed on | kis Management Plan has beer | developed w | rith my knowledge and input and will be | |
| | | | | |
| Signature of parent: | | | Date: | |
| Signature of Principal (or nominee): | | | Date: | |

Strategies To Avoid Allergens to be completed with the parent

| Student's name: | | |
|------------------------|-------------|------|
| Date of birth: | Year level: | |
| Severe allergies: | | |
| | | |
| Other known allergies: | | |
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| Risk | Strategy | Who? |
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Proforma 2: Annual Risk Management Checklist

| School Name: | | | |
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| Date of Review: | | | |
| Who completed this checklist? | Name: | | |
| this checklist: | Position: | | |
| Review given to: | Name | | |
| | Position | | |
| Comments: | | | |
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| General Informat | ion | | |
| | rent students have been diagnosed as being at risk of and have been prescribed an Adrenaline Autoinjector? | | |
| 2. How many of person? | these students carry their Adrenaline Autoinjector on their | | |
| _ | nts ever had an allergic reaction requiring medical t school? | □ Yes | □ No |
| a. If Yes, how | w many times? | | |
| 4. Have any stud | ents ever had an Anaphylactic Reaction at school? | ☐ Yes | □ No |
| a. If Yes, how many students? | | | |
| b. If Yes, how | v many times | | |
| 5. Has a staff member been required to administer an Adrenaline Autoinjector to a student? | | ☐ Yes | □ No |

| a. If Yes, how many times? | | |
|--|-------|--------|
| 6. Was every incident in which a student suffered an anaphylactic reaction reported via the CASES21? | ☐ Yes | □ No |
| SECTION 1: Individual Anaphylaxis Management Plans | | |
| 7. Does every student who has been diagnosed as being at risk of anaphylaxis and prescribed an Adrenaline Autoinjector have an Individual Anaphylaxis Management Plan and ASCIA Action Plan completed and signed by a prescribed Medical Practitioner? | ☐ Yes | s 🗆 No |
| 8. Are all Individual Anaphylaxis Management Plans reviewed regularly with Parents (at least annually)? | ☐ Yes | s 🗆 No |
| 9. Do the Individual Anaphylaxis Management Plans set out strategies to minimise the risk of exposure to allergens for the following in-school and out of class settings? | | |
| a. During classroom activities, including elective classes | ☐ Yes | s 🗆 No |
| b. In canteens or during lunch or snack times | ☐ Yes | s 🗆 No |
| c. Before and after School, in the school yard and during breaks | ☐ Yes | s 🗆 No |
| d. For special events, such as sports days, class parties and extra-curricular activities | ☐ Yes | s 🗆 No |
| e. For excursions and camps | ☐ Yes | s 🗆 No |
| f. Other | ☐ Yes | s 🗆 No |
| 10. Do all students who carry an Adrenaline Autoinjector on their person have a copy of their ASCIA Action Plan kept at the School (provided by the Parent)? | ☐ Yes | s 🗆 No |
| a. Where are they kept? | | |
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| 11. Does the ASCIA Action Plan include a recent photo of the student? | ☐ Yes | s 🗆 No |
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| SECTION 2: Storage and Accessibility of Adrenaline Autoinjectors | | |
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| 12. Where are the student(s) Adrenaline Autoinjectors stored? | | |
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| 13. Do all School Staff know where the School's Adrenaline Autoinjectors for | ☐ Yes | □ No |
| General Use are stored? | | |
| 14. Are the Adrenaline Autoinjectors stored at room temperature (not | ☐ Yes | □ No |
| refrigerated)? | | |
| 15. Is the storage safe? | ☐ Yes | □ No |
| 16. Is the storage unlocked and accessible to School Staff at all | ☐ Yes | □ No |
| times? Comments: | | |
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| 17. Are the Adrenaline Autoinjectors easy to find? | ☐ Yes | □ No |
| Comments: | | |
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| 18. Is a copy of student's Individual Anaphylaxis Management Plan (including | ☐ Yes | П № |
| the ASCIA Action Plan) kept together with the student's Adrenaline | | _ 1,0 |
| Autoinjector? 19. Are the Adrenaline Autoinjectors and Individual Anaphylaxis Management | ☐ Yes | П |
| Plans (including the ASCIA Action Plans) clearly labelled with the student's | | □ N0 |
| names? | | |
| 20. Has someone been designated to check the Adrenaline Autoinjector expiry dates on a regular basis? | ☐ Yes | □ No |
| | | |
| Who? | | |
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| 21 Ano thous Advangling Autoinisetons which are converted in the case. | | |
| 21. Are there Adrenaline Autoinjectors which are currently in the possession of the School and which have expired? | ☐ Yes | ⊔ N0 |
| 22. Has the School signed up to EpiClub or ANA-alert (optional free | ☐ Yes | П № |
| reminder services)? | | L 110 |
| 1 | 1 | |

| 23. Do all School Staff know where the Adrenaline Autoinjectors and the Individual Anaphylaxis Management Plans are stored? | ☐ Yes | □ No |
|---|-------|------|
| 24. Has the School purchased Adrenaline Autoinjector(s) for General Use, and have they been placed in the School's first aid kit(s)? | ☐ Yes | □ No |
| 25. Where are these first aid kits located? | | |
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| 26. Is the Adrenaline Autoinjector for General Use clearly labelled as the 'General Use' Adrenaline Autoinjector? | ☐ Yes | □ No |
| 27. Is there a register for signing Adrenaline Autoinjectors in and out when taken for excursions, camps etc? | ☐ Yes | □ No |
| SECTION 3: Prevention Strategies | | |
| 28. Have you done a risk assessment to identify potential accidental exposure to allergens for all students who have been diagnosed as being at risk of anaphylaxis? | ☐ Yes | □ No |
| 29. Have you implemented any of the prevention strategies in the Anaphylaxis Guidelines? If not record why? | ☐ Yes | □ No |
| | | |
| 30. Have all School Staff who conduct classes with students with a medical condition that relates to allergy and the potential for anaphylactic reaction successfully completed an Anaphylaxis Management Training Course in the three years prior and participated in a twice yearly briefing? | ☐ Yes | □ No |
| 31. Are there always sufficient School Staff members on yard duty who have successfully completed an Anaphylaxis Management Training Course in the three years prior? | ☐ Yes | □ No |
| SECTION 4: School Management and Emergency Response | | |
| 32. Does the School have procedures for emergency responses to anaphylactic reactions? Are they clearly documented and communicated to all staff? | ☐ Yes | □ No |
| 33. Do School Staff know when their training needs to be renewed? | ☐ Yes | □ No |
| 34. Have you developed Emergency Response Procedures for when an allergic reaction occurs? | ☐ Yes | □ No |
| a. In the class room? | ☐ Yes | □ No |

| b. In the school yard? | Yes | No |
|---|-----|----|
| c. In all School buildings and sites, including gymnasiums and halls? | Yes | No |
| d. At school camps and excursions? | Yes | No |
| e. On special event days (such as sports days) conducted, organised or attended by the School? | Yes | No |
| 35. Does your plan include who will call the Ambulance? | Yes | No |
| 36. Is there a designated person who will be sent to collect the student's Adrenaline Autoinjector and Individual Anaphylaxis Management Plan (including the ASCIA Action Plan)? | Yes | No |
| 37. Have you checked how long it will take to get to the Adrenaline Autoinjector and Individual Anaphylaxis Management Plan (including the ASCIA Action Plan) to a student from various areas of the School including: | Yes | No |
| a. The class room? | Yes | No |
| b. The school yard? | Yes | No |
| c. The sports field? | Yes | No |
| 38. On excursions or other out of school events is there a plan for who is responsible for ensuring the Adrenaline Autoinjector(s) and Individual Anaphylaxis Management Plans (including the ASCIAAction Plan) and the Adrenaline Autoinjector for General Use are correctly stored and available for use? | Yes | No |
| 39. Who will make these arrangements during excursions? | | |
| 40. Who will make these arrangements during camps? | | |
| 41. Who will make these arrangements during sporting activities? | | |
| 42. Is there a process for post incident support in place? | Yes | No |
| 43. Have all School Staff who conduct classes that students with a medical condition that relates to allergy and the potential for an anaphylactic reaction and any other staff identified by the Principal, been briefed on: | | |

| a. The School's Anaphylaxis Management Policy? | ☐ Yes | □ No |
|--|-------|------|
| b. The causes, symptoms and treatment of anaphylaxis? | ☐ Yes | □ No |
| c. The identities of students with a medical condition that relates to allergy | ☐ Yes | □ No |
| and the potential for an anaphylactic reaction, and who are prescribed | | |
| an Adrenaline Autoinjector, including where their medication is | | |
| located? | | |
| d. How to use an Adrenaline Autoinjector, including hands on practise with | ☐ Yes | □ No |
| a trainer Adrenaline Autoinjector? | | |
| e. The School's general first aid and emergency response procedures for | ☐ Yes | □ No |
| all in- school and out-of-school environments? | | |
| | ☐ Yes | □ No |
| f. Where the Adrenaline Autoinjector(s) for General Use is kept? | | |
| g. Where the Adrenaline Autoinjectors for individual students are located | ☐ Yes | □ No |
| including if they carry it on their person? | | |
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| SECTION 4: Communication Plan | | |
| 44. Is there a Communication Plan in place to provide information about | | |
| anaphylaxis and the School's policies? | | |
| a. To School Staff? | ☐ Yes | □ No |
| | | |
| b. To students? | ☐ Yes | □ No |
| | | |
| c. To Parents? | ☐ Yes | □ No |
| d. To volunteers? | ☐ Yes | □ No |
| d. 10 volunteers: | l res | |
| e. To casual relief staff? | ☐ Yes | □ No |
| | | |
| 45. Is there a process for distributing this information to the relevant School Staff? | ☐ Yes | □ No |
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| a. What is it? | | |
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| 46. How is this information kept up to date? | | |
| 40. How is this information kept up to date. | | |
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| 47. Are there strategies in place to increase awareness about severe allergies | ☐ Yes | □ No |
| among students for all in-school and out-of-school environments? | | |
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| 48. What are they? | |
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| The ASCIA Anaphylaxis Action Plan (Proforma) can be downloaded using the following link: | |
| http://www.allergy.org.au/health-professionals/ascia-plans-action-and-tro | eatment |
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| Evaluation: | |
| This policy will be reviewed as part of the school's four year review cycle. | |
| Ratification This school policy was ratified at the Broadmeadows Valley Primary School Council meeting o/20 | n |
| School Council President Principal | |