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.

To 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.

PURPOSE
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 the student’s schooling.

The 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 minimization 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.

INDIVIDUAL ANAPHYLAXIS MANAGEMENT PLANS
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.

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 allergy or allergies the student has (based on a diagnosis from a medical practitioner).
• strategies to minimize the risk of exposure to allergens while the student is under the care of supervision of 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 parents, 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
  - this management plan will be displayed in the sick bay

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.

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 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.

All staff will be briefed once each semester 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

Note: A DVD has been included in this information pack that can be used for this purpose at staff briefings.

**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 has up-to-date training in an anaphylaxis management training course.

The principal will identify the school staff to be trained based on a risk assessment.

Training will be provided to these staff as soon as practicable after the student enrols.

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 students emergency procedures plan (ASCIA Action Plan) will be followed in responding to an anaphylactic reaction.

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 anaphylactic reaction at school.

It is the responsibility of the parent to:
• provide the emergency procedures plan (ASCIA Action Plan).
• Provide 2 Epipens – one for the office/sickbay, one for the classroom (this is to be negotiated with the parent because of costs)
• 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

**PROCEDURE FOR EPIPEN EMERGENCY**

1. **Staff** need to be informed of the students who are anaphylactic.

2. Class teacher needs to have a plan of the anaphylaxis / allergy specific to the student

3. Photos and management plan of these students are displayed in the classroom, staffroom, canteen, sickbay area and out of school hours. Information is attached stating their condition after permission has been granted by the parents

4. The student’s EpiPens are kept in the sickbay cupboard. (unlocked) and in the classroom. They are in individual cases labelled with the student’s name and expiry date of the EpiPen. A photograph of the student is on the case. Inside is a toothbrush case to dispose of the syringe once it has been administered. Date and time of administration needs to be recorded in each case preferably in the first aid register

5. **Whilst on yard duty staff carry a bag containing EpiPen card/s.** This card will be sent to the school office in the event of an emergency.

The following procedure is to occur:

**PERSON ONE** - Stays with the child at all times

**PERSON TWO** - Locates the EpiPen and takes it to the child. Informs Principal or Person in Charge. They take EpiPen to child.

**PERSON ONE or** - Administers EpiPen
PRINCIPAL or PERSON IN CHARGE

PERSON TWO - Contacts an ambulance on 000. Explains situation. Contacts parent / carer.

PERSON THREE - Meets ambulance.

PERSON ONE - Complete First Aid Report

PRINCIPAL - Organises debriefing with teachers.

5. STAFF
   All staff should be made aware of the child, the allergies and the presence of an EpiPen. This includes specialist staff and emergency teachers.

6. FOOD
   Staff know that the student eats only the food they bring to school and doesn’t accept food from other students. In consultation with the parents specific food can be organised for them on special days e.g. birthdays.

7. CANTEEN
   All canteen staff should be informed of the child’s allergy. A photograph of student/s should be displayed in the canteen.

8. CARD SYSTEM
   Yard duty teachers carry a bag containing photos of these students and in the event of an emergency assists them in identifying the student and requesting the EpiPen.

9. EXCURSIONS
   Provision must be made for the EpiPen to be taken on excursions. It is the responsibility of the class teacher to carry the EpiPen at all times if leaving the school with the student. Should the parent attend the excursion it is acceptable for the parent to have their own EpiPen, however the student must be with the parent so that provision can be made in the event of an emergency.

10. CAMPS
    It is recommended that if students are on camp the closest hospital or medical centre be informed of the student’s anaphylaxis and if they have provision for this student in the event of an emergency. A medical plan for the student needs to be taken on camp and presented to the hospital / medical centre.

11. FIRST AID CO-ORDINATOR
    It is the responsibility of the First Aid Co-ordinator to check the use-by-date of the EpiPen and notify parents. It is the parents responsibility for replacing the EpiPen.

12. DISPLAN DRILL
    To ensure that procedures work a drill may need to take place. Parents should be notified that students will be part of this DISPLAN drill.

STEPS FOR ADMINISTERING EPIPEN

1. Form a fist around the EpiPen (black tip down)
2. With the other hand, pull off the grey safety cap.
3. Hold the black tip near the upper outer thigh, then push down hard so the EpiPen is at a 90degree angle to thigh. (listen for click as needle is activated.) The EpiPen can go through a thin layer of clothing if necessary.
4. Hold firmly in thigh, and count slowly to ten. (equal to ten seconds)
5. Remove the EpiPen from thigh – the 1.5cm needle will be visible.
6. Massage the injection site for 10 – 20 seconds. Note the time you gave the EpiPen.

***Above information and procedures are based on guidelines from 'The Department of Allergy – Royal Children’s Hospital Victoria – Anaphylaxis / EpiPen Training Manual***