What is anaphylaxis?

Anaphylaxis is a severe, rapidly progressive allergic reaction that is potentially life threatening. Although allergic reactions are common in children, severe life threatening allergic reactions are uncommon and deaths are rare. However, deaths have occurred and anaphylaxis is therefore regarded as a medical emergency that requires a rapid response. 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 school and parents are important in ensuring that certain foods or items are kept away from the student while at school. Adrenaline given through an autoinjector to the muscle of the outer mid-thigh is the most effective first aid treatment for anaphylaxis.

- All food brought into the school to share must include an ingredients list.
- Students diagnosed with Anaphylaxis must not eat food brought in to share.

Signs and symptoms
The symptoms of a mild to moderate allergic reaction can include:
- swelling of the lips, face and eyes
- hives or welts
- abdominal pain and/or vomiting.

Symptoms of anaphylaxis (a severe allergic reaction) can include:
- difficulty breathing or noisy breathing
- swelling of the tongue
- swelling/tightness in the throat
- difficulty talking and/or a hoarse voice
- wheezing or persistent coughing
- loss of consciousness and/or collapse
- young children may appear pale and floppy.

Symptoms usually develop within 10 minutes to one hour of exposure to an allergen but can appear within a few minutes.
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.

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.

Individual Anaphylaxis Management Plans
Every student who has been diagnosed as at risk of anaphylaxis will have an individual Anaphylaxis Management Plan. The student’s Anaphylaxis Management Plan will clearly set out:

- the type of allergy or allergies.
- the student’s emergency contact details.
- practical strategies to minimise the risk of exposure to allergens for in-school and out of class settings, including:
  » during classroom activities
  » in canteens or during lunch or snack times
  » before and after school, in the yard and during breaks
  » for special events such as incursions, sport days or class parties
  » for excursions and camps.
- the name of the person/s responsible for implementing the strategies.
- information on where the EpiPen® will be stored.

The Anaphylaxis Management Plan will also include an individual ASCIA Action Plan, which sets out the emergency procedures to be taken in the event of an allergic reaction. (ASCIA, the Australasian Society of Clinical Immunology and Allergy, is the peak body of immunologists and allergists in Australia).

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.
The role and responsibilities of the Parent:

- complete an ASCIA Action Plan in consultation with their child’s medical practitioner and provide a copy to the school. The ASCIA Action Plan must be signed by the student’s medical practitioner and have an up to date photograph of the student. 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.
- Provide an in-date autoinjector.

The role and responsibilities of the Principal

This Principal or nominee has overall responsibility for implementing strategies and processes for ensuring a safe and supporting environment for students at risk of anaphylaxis. The Principal will:

- Actively seek information to identify students with severe life threatening allergies at enrolment.
- Conduct a risk assessment of the potential for accidental exposure to allergens while the student is in the care of the school.
- Meet with parents/carers to develop an Anaphylaxis Management Plan for the student. This includes documenting practical strategies for in-school and out-of-school settings to minimise the risk of exposure to allergens, and nominating staff who are responsible for their implementation.
- Request that parents provide an ASCIA (Australasian Society of Clinical Immunology and Allergy) Action Plan that has been signed by the student’s medical practitioner and has an up to date photograph of the student.
- Ensure that parents provide the student’s EpiPen® and that it is not out of date.
- Ensure that staff obtain training in how to recognise and respond to an anaphylactic reaction, including administering an EpiPen®.
- Develop a communication plan to raise student, staff and parent awareness about severe allergies and the school’s policies.
- Provide information to all staff so that they are aware of students who are at risk of anaphylaxis, the student’s allergies, the school’s management strategies and first aid procedures. This can include providing copies or displaying the student’s ASCIA Action Plan in canteens, classrooms and staff rooms, noting privacy considerations.
- Ensure that there are procedures in place for informing casual relief teachers of students at risk of anaphylaxis and the steps required for prevention and emergency response.
- Ensure that any external canteen provider can demonstrate satisfactory training in the area of anaphylaxis and its implications on food handling practices.
- Allocate time, such as during staff meetings, to discuss, practise and review the school’s management strategies for students at risk of anaphylaxis. Practise using the trainer EpiPen® regularly.
- Encourage ongoing communication between parents/carers and staff about the current status of the student’s allergies, the school’s policies and their implementation.
- Review the student’s Anaphylaxis Management Plan annually or if the student’s circumstances change, in consultation with parents.
The role and responsibilities of all school staff

School staff who are responsible for the care of students at risk of anaphylaxis have a duty to take steps to protect students from risks of injury that are reasonably foreseeable. This may include administrators, canteen staff, casual relief staff, and volunteers. Members of staff are expected to:

- Know the identity of students who are at risk of anaphylaxis.
- Understand the causes, symptoms, and treatment of anaphylaxis.
- Obtain training in how to recognise and respond to an anaphylactic reaction, including administering an EpiPen®.
- Know the school’s first aid emergency procedures and what your role is in relation to responding to an anaphylactic reaction.
- Keep a copy of the student’s ASCIA Action Plan (or know where to find one quickly) and follow it in the event of an allergic reaction.
- Know where the student’s EpiPen® is kept. Remember that the EpiPen® is designed so that anyone can administer it in an emergency.
- Know and follow the prevention strategies in the student’s Anaphylaxis Management Plan.
- Plan ahead for special class activities or special occasions such as excursions, incursions, sport days, camps and parties. Work with parents/carers to provide appropriate food for the student.
- Be aware of the possibility of hidden allergens in foods and of traces of allergens when using items such as egg or milk cartons in art or cooking classes.
- Be careful of the risk of cross-contamination when preparing, handling and displaying food.
- Make sure that tables and surfaces are wiped down regularly and that students wash their hands after handling food.
- Raise student awareness about severe allergies and the importance of their role in fostering a school environment that is safe and supportive for their peers.
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. See attachment A.

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 about students at risk of anaphylaxis and their role in responding to an anaphylactic reaction by a student in their care when signing in for the day.

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 autoadrenaline 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.

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

Limits on nut and peanut products:

- Shepparton East Primary School will ask that food containing nuts should not be brought to school.
- Foods which are discouraged include nuts or products including, but not limited to, Nutella, peanut butter, fruit & nut bars, or other products containing nuts in the ingredients. This does not include foods that contain the warning “may contain traces of nuts”.
- Despite all reasonable efforts to restrict nuts and nut products at Shepparton East Primary School, exposure to nuts or nut products may still occur and parents, staff and at-risk students must always remain vigilant to avoid exposure to unsafe foods.

EVALUATION

This policy will be reviewed as part of the school’s three-year review cycle.
The school’s Anaphylaxis policy is to be published on the school’s website.

Parents need to supply current epipens. The students’ epipens and the school’s spare epipens are located in the Sick Bay.

Identification of anaphylactic students
The name and photograph of each student who has anaphylaxis will be displayed in the following locations:
- Sick Bay
- In Emergency Folder located in the office

Replacement/Volunteer Staff
CRT staff are given information regarding the identity of any students with anaphylaxis specifically included in their class as well as others in the school. They will also be instructed on how to administer an epipen or anapen.

Post incident action
- Debriefing meeting with staff involved and affected
- Discussion with parents regarding incident prevention
- Review individual management plan
- Implement updated risk prevention strategies.