

Jells Park Primary School Anaphylaxis Management Policy
--

Purpose

At Jells Park Primary School we believe it is important that school staff and parents are confident about the management of students who have been identified by a medical practitioner as being at risk of an anaphylactic reaction. It is the school's responsibility in consultation with the community to, where possible, minimise allergic reactions, recognise the symptoms and treat the symptoms quickly.

Anaphylaxis is a severe and sudden allergic reaction when a person is exposed to an allergen. The most common allergens in children are eggs, peanuts, tree nuts (e.g. cashews), cow's milk, fish and shellfish, wheat, soy, certain insect stings and medications.

Anaphylaxis is a serious health issue for a percentage of the population and the Department recognises the key to preventing an anaphylactic reaction by a student is knowledge, awareness and planning.

Guidelines

- All students at risk of anaphylaxis will be identified, documented and their identity communicated to all staff.
- The school will develop risk minimization strategies and management strategies for the student.
- The school will ensure that each staff member has appropriate knowledge about allergies, anaphylaxis and the school's policy and procedures to respond to an anaphylactic reaction.(Appendix 4)
- Parents are to provide relevant medical information from a doctor for inclusion on the management plan. The school requires that this information be updated at regular intervals.
- The staff will be given training in relation to the allergy and necessary treatment.
- A reasonable effort will be made to make sure that contact with allergens is avoided.
- All actions and procedures will reflect the ministerial order 706 (December 2015) and the Department of Education and Training's policy/guidelines (as published and amended) requiring all schools to have an Anaphylaxis Management Policy.

Implementation

- All students at risk of anaphylaxis will be placed on an individual anaphylaxis management plan. (ASCIA Individual Anaphylaxis Management Plan - Appendix 1)
- Information about the student and their management plan with a photo will be kept in the first aid area, staff room (subject to parental consent), in yard duty folders and in the classroom roll.
- All Auto-injectors (eg Epipens) will be stored in the designated cabinet of the school office.
- Auto-injectors (eg Epipens) will be taken on all excursions, activities, sporting events and camps where a child with an anaphylaxis condition will be in attendance.
- Staff will liaise with campsite personnel to ensure adequate precautions and safety measures are instituted prior to the camp commencing
- Whilst the student is under the care or supervision of the school, including excursions, yard duty, camps and special events, the Principal must ensure that there is sufficient staff present who have up to date training in anaphylaxis management.
- Where possible, a parent of an anaphylactic child will be invited to attend school camps.
- Individual anaphylaxis management plans will be updated annually, if the condition changes or immediately after the incidence of an anaphylactic occurrence.
- In any level that contains a student with an anaphylaxis condition, a letter of explanation and risk management strategies will be distributed to families (subject to parental consent).

- Identified students will not be isolated or excluded from any school activity unless the safety risks cannot be adequately addressed.
- Anaphylactic Emergency Procedures will be reviewed once a semester by all staff. These details will be kept in each Yard Duty Folder.
- The school's First Aid procedures, and Emergency Management Plan, will be followed when responding to an anaphylactic response.
- All staff will receive anaphylaxis training and will review the Anaphylactic Emergency Procedures twice a year. (Appendix 2)
- The parent of an anaphylactic child must inform the School Canteen and Out of School Hours Care of their child's allergy and the appropriate medical response.
- Hand washing should be encouraged for all staff and students - particularly after eating food.
- At risk students will not be permitted to share snacks or lunches with others.
- The school community will be encouraged not to donate packaging that has contained nut products.
- Staff will be vigilant in reviewing the contents of products used within the school. For example sunscreen, playdough and cooking oil.
- Children known to have anaphylactic conditions will be known by sight to all staff.
- Any child with an allergic condition will not be required to pick up any paper litter.
- The school will educate students and parents about anaphylactic issues through newsletter articles, notices and specific information sessions.
- The school will purchase spare (back-up) adrenaline auto-inject device(s) as part of the school's first aid kit.
- The school will complete an Annual Anaphylaxis Risk Management Checklist (Appendix 3).

References

- DET Anaphylaxis Management in Schools at link:
<https://www.education.vic.gov.au/school/teachers/health/Pages/anaphylaxischl.aspx>

Appendix

- 1 – Individual Anaphylaxis Management Plan
- 2 - Anaphylactic Emergency Procedures
- 3 - Anaphylaxis Risk Management Checklist
- 4 – Medical Emergency Action Plan

Evaluation

This policy will be reviewed as part of the school's four-yearly cycle of policy review, or earlier if required.

Appendix 1

Insert individual management plan once it has been reviewed

Appendix 2

Anaphylactic Symptoms

Symptoms of a severe anaphylactic reaction include;

- Difficulty breathing or noisy breathing.
- Rash or spots, which may look hive-like.
- 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.

Anaphylaxis Emergency Procedures

- Each Yard Duty teacher will be provided with a blue auto-injector (eg epipen) card in their First Aid bag. This is to be immediately sent to the office in an anaphylactic emergency.
- Each classroom teacher will have a blue auto-injector (eg epipen) card that is readily available that can be sent to the office in an anaphylactic emergency.
- Any staff member receiving a blue auto-injector (eg epipen) card will immediately take the auto-injector to the child and ensure that 000 is called.
- The teacher in charge of a camp or excursion will be responsible for making contact with 000, after ensuring that the auto-injector (eg epipen) is appropriately administered. The school and parents of the child suffering the anaphylactic reaction will be contacted once the auto-injector (eg epipen) has been administered and 000 has been called.

Appendix 3

Annual Risk Management Checklist

School name:	
Date of review:	
Who completed this checklist?	Name:
	Position:
Review given to:	Name
	Position
Comments:	
General information	
1. How many current students have been diagnosed as being at risk of anaphylaxis, and have been prescribed an adrenaline auto-injector?	
2. How many of these students carry their adrenaline auto-injector on their person?	
3. Have any students ever had an allergic reaction requiring medical intervention at school?	<input type="checkbox"/> Yes <input type="checkbox"/> No
a. If Yes, how many times?	
4. Have any students ever had an anaphylactic reaction at school?	<input type="checkbox"/> Yes <input type="checkbox"/> No
a. If Yes, how many students?	
b. If Yes, how many times	
5. Has a staff member been required to administer an adrenaline auto-injector to a student?	<input type="checkbox"/> Yes <input type="checkbox"/> No
a. If Yes, how many times?	
6. If your school is a government school, was every incident in which a student suffered an anaphylactic reaction reported via the Incident Reporting and Information System (IRIS)?	<input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION 1: Training

7. Have all school staff who conduct classes with students who are at risk of anaphylaxis successfully completed an approved anaphylaxis management training course, either: <ul style="list-style-type: none">• online training (ASCIA anaphylaxis e-training) within the last 2 years, or• Accredited face to face training (22300VIC or 10313NAT) within the last 3 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. Does your school conduct twice yearly briefings annually? If no, please explain why not, as this is a requirement for school registration.	<input type="checkbox"/> Yes <input type="checkbox"/> No
9. Do all school staff participate in a twice yearly anaphylaxis briefing? If no, please explain why not, as this is a requirement for school registration.	<input type="checkbox"/> Yes <input type="checkbox"/> No
10. If you are intending to use the ASCIA Anaphylaxis e-training for Victorian Schools: <ul style="list-style-type: none">a. Has your school trained a minimum of 2 school staff (School Anaphylaxis Supervisors) to conduct competency checks of adrenaline auto-injectors (EpiPen®)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<ul style="list-style-type: none">b. Are your school staff being assessed for their competency in using adrenaline auto-injectors (EpiPen®) within 30 days of completing the ASCIA Anaphylaxis e-training for Victorian Schools?	<input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION 2: Individual Anaphylaxis Management Plans

11. Does every student who has been diagnosed as being at risk of anaphylaxis and prescribed an adrenaline auto-injector have an Individual Anaphylaxis Management Plan which includes an ASCIA Action Plan for Anaphylaxis completed and signed by a prescribed medical practitioner?	<input type="checkbox"/> Yes <input type="checkbox"/> No
12. Are all Individual Anaphylaxis Management Plans reviewed regularly with parents (at least annually)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
13. 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	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. In canteens or during lunch or snack times	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. Before and after school, in the school yard and during breaks	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. For special events, such as sports days, class parties and extra-curricular activities	<input type="checkbox"/> Yes <input type="checkbox"/> No
e. For excursions and camps	<input type="checkbox"/> Yes <input type="checkbox"/> No
f. Other	<input type="checkbox"/> Yes <input type="checkbox"/> No

14. Do all students who carry an adrenaline auto-injector on their person have a copy of their ASCIA Action Plan for Anaphylaxis kept at the school (provided by the parent)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
a. Where are the Action Plans kept?	
15. Does the ASCIA Action Plan for Anaphylaxis include a recent photo of the student?	<input type="checkbox"/> Yes <input type="checkbox"/> No
16. Are Individual Management Plans (for students at risk of anaphylaxis) reviewed prior to any off site activities (such as sport, camps or special events), and in consultation with the student's parent/s?	<input type="checkbox"/> Yes <input type="checkbox"/> No
SECTION 3: Storage and accessibility of adrenaline autoinjectors	
17. Where are the student(s) adrenaline auto-injectors stored?	
18. Do all school staff know where the school's adrenaline auto-injectors for general use are stored?	<input type="checkbox"/> Yes <input type="checkbox"/> No
19. Are the adrenaline auto-injectors stored at room temperature (not refrigerated) and out of direct sunlight?	<input type="checkbox"/> Yes <input type="checkbox"/> No
20. Is the storage safe?	<input type="checkbox"/> Yes <input type="checkbox"/> No
21. Is the storage unlocked and accessible to school staff at all times? Comments:	<input type="checkbox"/> Yes <input type="checkbox"/> No
22. Are the adrenaline auto-injectors easy to find? Comments:	<input type="checkbox"/> Yes <input type="checkbox"/> No
23. Is a copy of student's individual ASCIA Action Plan for Anaphylaxis kept together with the student's adrenaline auto-injector?	<input type="checkbox"/> Yes <input type="checkbox"/> No
24. Are the adrenaline auto-injectors and Individual Anaphylaxis Management Plans (including the ASCIA Action Plan for Anaphylaxis) clearly labelled with the student's names?	<input type="checkbox"/> Yes <input type="checkbox"/> No
25. Has someone been designated to check the adrenaline auto-injector expiry dates on a regular basis? Who?	<input type="checkbox"/> Yes <input type="checkbox"/> No
26. Are there adrenaline auto-injectors which are currently in the possession of the school which have expired?	<input type="checkbox"/> Yes <input type="checkbox"/> No

27. Has the school signed up to EpiClub (optional free reminder services)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
28. Do all school staff know where the adrenaline auto-injectors, the ASCIA Action Plans for Anaphylaxis and the Individual Anaphylaxis Management Plans are stored?	<input type="checkbox"/> Yes <input type="checkbox"/> No
29. Has the school purchased adrenaline auto-injector(s) for general use, and have they been placed in the school's first aid kit(s)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
30. Where are these first aid kits located? Do staff know where they are located?	<input type="checkbox"/> Yes <input type="checkbox"/> No
31. Is the adrenaline auto-injector for general use clearly labelled as the 'General Use' adrenaline auto-injector?	<input type="checkbox"/> Yes <input type="checkbox"/> No
32. Is there a register for signing adrenaline auto-injectors in and out when taken for excursions, camps etc?	<input type="checkbox"/> Yes <input type="checkbox"/> No
SECTION 4: Risk Minimisation strategies	
33. 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?	<input type="checkbox"/> Yes <input type="checkbox"/> No
34. Have you implemented any of the risk minimisation strategies in the Anaphylaxis Guidelines? If yes, list these in the space provided below. If no please explain why not as this is a requirement for school registration.	<input type="checkbox"/> Yes <input type="checkbox"/> No
35. Are there always sufficient school staff members on yard duty who have current Anaphylaxis Management Training?	<input type="checkbox"/> Yes <input type="checkbox"/> No
SECTION 5: School management and emergency response	
36. Does the school have procedures for emergency responses to anaphylactic reactions? Are they clearly documented and communicated to all staff?	<input type="checkbox"/> Yes <input type="checkbox"/> No
37. Do school staff know when their training needs to be renewed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
38. Have you developed emergency response procedures for when an allergic reaction occurs?	<input type="checkbox"/> Yes <input type="checkbox"/> No
a. In the class room?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. In the school yard?	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. In all school buildings and sites, including gymnasiums and halls?	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. At school camps and excursions?	<input type="checkbox"/> Yes <input type="checkbox"/> No
e. On special event days (such as sports days) conducted, organised or attended by the school?	<input type="checkbox"/> Yes <input type="checkbox"/> No
39. Does your plan include who will call the ambulance?	<input type="checkbox"/> Yes <input type="checkbox"/> No

40. Is there a designated person who will be sent to collect the student's adrenaline auto-injector and individual ASCIA Action Plan for Anaphylaxis?	<input type="checkbox"/> Yes <input type="checkbox"/> No
41. Have you checked how long it takes to get an individual's adrenaline auto-injector and corresponding individual ASCIA Action Plan for Anaphylaxis to a student experiencing an anaphylactic reaction from various areas of the school including:	<input type="checkbox"/> Yes <input type="checkbox"/> No
a. The class room?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. The school yard?	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. The sports field?	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. The school canteen?	<input type="checkbox"/> Yes <input type="checkbox"/> No
42. On excursions or other out of school events is there a plan for who is responsible for ensuring the adrenaline auto-injector(s) and Individual Anaphylaxis Management Plans (including the ASCIA Action Plan) and the adrenaline auto-injector for general use are correctly stored and available for use?	<input type="checkbox"/> Yes <input type="checkbox"/> No
43. Who will make these arrangements during excursions?	
44. Who will make these arrangements during camps?	
45. Who will make these arrangements during sporting activities?	
46. Is there a process for post-incident support in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No
47. Have all school staff who conduct classes attended by students at risk of anaphylaxis, and any other staff identified by the principal, been briefed by someone familiar with the school and who has completed an approved anaphylaxis management course in the last 2 years on:	
a. The school's Anaphylaxis Management Policy?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. The causes, symptoms and treatment of anaphylaxis?	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. The identities of students at risk of anaphylaxis, and who are prescribed an adrenaline auto-injector, including where their medication is located?	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. How to use an adrenaline auto-injector, including hands on practice with a trainer adrenaline auto-injector?	<input type="checkbox"/> Yes <input type="checkbox"/> No
e. The school's general first aid and emergency response procedures for all in-school and out-of-school environments?	<input type="checkbox"/> Yes <input type="checkbox"/> No
f. Where the adrenaline auto-injector(s) for general use is kept?	<input type="checkbox"/> Yes <input type="checkbox"/> No
g. Where the adrenaline auto-injectors for individual students are located including if they carry it on their person?	<input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION 6: Communication Plan

48. Is there a Communication Plan in place to provide information about anaphylaxis and the school's policies?	
a. To school staff?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. To students?	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. To parents?	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. To volunteers?	<input type="checkbox"/> Yes <input type="checkbox"/> No
e. To casual relief staff?	<input type="checkbox"/> Yes <input type="checkbox"/> No
49. Is there a process for distributing this information to the relevant school staff?	<input type="checkbox"/> Yes <input type="checkbox"/> No
a. What is it?	
50. How will this information kept up to date?	
51. Are there strategies in place to increase awareness about severe allergies among students for all in-school and out-of-school environments?	<input type="checkbox"/> Yes <input type="checkbox"/> No
52. What are they?	