**ALBION NORTH PRIMARY SCHOOL**

**ANAPHYLAXIS MANAGEMENT POLICY**

Albion North Primary School will fully comply with Ministerial Order 706 and the associated Guidelines published and amended by the DET from time to time, ensuring policies and procedures are in place to minimise risks associated with severe allergies.

**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 (cashews), 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 those triggers. Partnership between school and parents is important in ensuring that certain foods or items are kept away from the student while at school.

Adrenaline administered through the Epipen or its equivalent to the muscle of the outer thigh is the most effective first aid treatment of 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 schooling
* to raise awareness about anaphylaxis and the school’s anaphylaxis management plan in the school community
* to engage with parents/carers of students at risk of anaphylaxis in assessing risks, developing risk minimisation strategies and the management strategies of 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 or the nominated anaphylaxis supervisors will ensure that parents of students, who have been diagnosed by a medical practitioner as being at risk of anaphylaxis, understand that their medical practitioner must provide an up-to-date individual anaphylaxis management plan to the school as early as possible. The individual anaphylaxis management plan will be in place as soon as practicable after the student enrols, and if possible, prior to the student starting 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 minimise the risk 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
* information on where the student’s medication will be stored
* contact details for the student
* the procedure for managing an emergency (ASCIA Action Plan), which is provided by the parent.

Each student’s individual management plan will be reviewed, in consultation with 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 procedure plan to the school
* inform the school if their child’s medical condition changes, and if relevant, provide an updated emergency procedure plan
* provide an up-to-date photo for the emergency procedure plan when the plan is provided to the school and when it is reviewed.

**COMMUNICATION PLAN**

The principal and the nominated anaphylaxis supervisors 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/plan.

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 and special event days.

The CRT coordinator (or designated person) will ensure CRTs are informed of students at risk and what their role is in responding to an anaphylactic reaction by a student in their care.

This includes:

* being alerted to the relevant anaphylaxis information in class roles, and
* if replacing a specialist teacher, having access to the specialist timetable, which identifies classes with anaphylactic students.

All staff will be briefed once a semester by the nominated anaphylaxis supervisors on

* the school’s anaphylaxis management policy
* the causes, symptoms and treatment of anaphylaxis
* the students diagnosed at risk of anaphylaxis and the location of their medication
* the correct use of the auto adrenaline injecting device
* the school’s first aid and emergency response procedures.

**STAFF TRAINING AND EMERGENCY RESPONSE**

**GENERAL**

* auto adrenaline injecting devices are located in the staffroom in a red bag labelled with the student’s name and instructions for use;
* each students ASCIA plan is located in the red bag and in the first aid room and readily accessible;
* a photo of each individual student at risk is displayed throughout the school. Each classroom/roll has a record of anaphylactic children
* the designated first aid officer or the nominated anaphylaxis supervisors are responsible for checking the expiry dates of the auto adrenaline injecting devices and will notify parents prior to expiry;
* each student’s action plan is updated annually by the student’s medical practitioner;
* each classroom roll has a copy of information of each student at risk of anaphylaxis;
* each yard duty first-aid pack contains laminated anaphylaxis cards with the name of the students at risk of anaphylaxis. In the event of an anaphylactic emergency during recess or lunchtime, the appropriate card is sent to the staffroom so that a staff member can execute a rapid response;
* the school will liaise with parents/carers about food related activities;
* on school camps, excursions and sporting events, the auto adrenaline injecting device will remain close to the student. Consideration is given in planning ahead for food and meals for students at risk of anaphylaxis;
* all students at risk of anaphylaxis must provide an auto injecting device and ASCIA action plan for school camp;
* staff are routinely briefed about students at risk of anaphylaxis.

### Staff training

The principal will ensure that the following school staff are appropriately trained in anaphylaxis management:

* School staff who conduct classes attended by students who are at risk of anaphylaxis and any other member of school staff as required by the principal based on a risk assessment.
* Staff who are required to undertake training must have completed:
* an approved face-to-face anaphylaxis management training course in the last three years (with 22303VIC, or 22300VIC or 10313NAT], or
* an approved online anaphylaxis management training course in the last two years.

Staff are also required to attend a briefing on anaphylaxis management and this policy at least twice per year (with the first briefing to be held at the beginning of the school year), facilitated by a staff member who has successfully completed an anaphylaxis management course within the last 2 years including the two School Anaphylaxis Supervisors. Each briefing will address:

* this policy
* the causes, symptoms and treatment of anaphylaxis
* the identities of students with a medical condition that relates to allergies and the potential for anaphylactic reaction, and where their medication is located
* how to use an adrenaline autoinjector, including hands on practice with a trainer adrenaline autoinjector
* the school’s general first aid and emergency response procedures
* the location of, and access to, adrenaline autoinjectors that have been provided by parents or purchased by the school for general use.

When a new student enrols at Albion North Primary School who is at risk of anaphylaxis, the principal or the Anaphylaxis Supervisor/s will develop an interim plan in consultation with the student’s parents and ensure that appropriate staff are trained and briefed as soon as possible.

The principal or the anaphylaxis supervisor/s will ensure that while students at risk of anaphylaxis are under the care or supervision of the school outside of normal class activities, including in the school yard, at camps and excursions, or at special event days, there is a sufficient number of school staff present who have been trained in anaphylaxis management.

**ANAPHYLAXIS COMMUNICATION PLAN**

Albion North Primary School has taken steps to ensure effective communication of students at risk of anaphylaxis.

1. Anaphylaxis action plans are located in the sick bay and include student’s photos.
2. Anaphylaxis action plans including photos are located in attendance rolls in the classrooms and staffroom.
3. All staff undergo regular briefings on anaphylaxis, the symptoms and emergency responses.
4. All staff with a student at risk of anaphylaxis will be briefed at the beginning of the year, to ensure their awareness of the issues related to these students.
5. Parents/carers of anaphylactic students will be contacted each year to ensure we have the most up-to-date anaphylactic management plan available.

**EMERGENCY MANAGEMENT**

During recess and lunchtimes

*Anaphylactic episode*

- Identify the student and verify they have an individual anaphylactic management plan.

- Contact the staffroom immediately via individualised laminated anaphylaxis card.

- The notified staff member to assist the yard duty teacher by collecting the anaphylaxis red bag, the spare epipen and the defibrillator. Contact 000 by a mobile phone or hands free phone for emergency medical assistance and clearly explain that this child is suffering a suspected anaphylactic reaction.

- Trained school member to administer the adrenaline auto injector as soon as possible.

During instruction time (in classrooms or specialists)

*Anaphylactic episode*

- Identify the student and verify they have an individual anaphylactic management plan. See classroom roll or display if in specialist room.

- Get assistance from the office by sending two students with an individualised anaphylaxis card. Office member to collect the hands free phone and the student’s Anaphylaxis red bag from the staffroom and take it to the classroom.

- Contact 000 on the way to the classroom for emergency medical assistance and clearly explain that this child is suffering a suspected anaphylactic reaction.

- Trained school member to administer the adrenaline auto injector as soon as possible.

Communication to parents:

This information will be provided to parents at the start of each school year via the newsletter. A separate note may be sent home to parents at specific year levels if deeded necessary.

**ANAPHYLAXIS COMMUNICATION/ MANAGEMENT**

Adrenaline auto injectors for general use:

Albion North P.S will maintain a supply of adrenaline auto injector(s) for general use, as a back-up to those provided by parents and carers for specific students, and also for students who may suffer from a first time reaction at school.

Adrenaline autoinjectors for general use will be stored in Staff Room and labelled “general use”.

The principal is responsible for arranging the purchase of adrenaline autoinjectors for general use, and will consider:

* the number of students enrolled at Albion North Primary School at risk of anaphylaxis
* the accessibility of adrenaline autoinjectors supplied by parents
* the availability of a sufficient supply of autoinjectors for general use in different locations at the school, as well as at camps, excursions and events
* the limited life span of adrenaline autoinjectors, and the need for general use adrenaline autoinjectors to be replaced when used or prior to expiry.

Classroom including specialists:

* Every teacher will receive individual anaphylactic management plans (including photographs) for all anaphylactic children in their grade level. If the child goes to a specialist class this allows for all staff to be aware of the potential hazards.
* Individual management plans will be placed in all classroom rolls and displayed in all specialist rooms. Specialists will have the names pf all children who have anaphylaxis.

CRTs

* Photographs of anaphylaxis management plans are placed in the classroom rolls.
* The CRT coordinator will draw attention to any child who is at risk of anaphylaxis.
* Specialist teachers have a booklet with the names of all anaphylactic students.

Minimising exposure:

* Children are expected to eat their play lunch and lunch in their classroom. No sharing food rule is in place.
* There will be regular communication with parents via the newsletter and notes sent home reminding them that nuts are not banned, however they should exercise caution when preparing lunches and snacks.

**Emergency Response Procedure for In-School Environment**

**Classrooms –**

In the case of an anaphylaxis reaction:

1. Send the individualised laminated Anaphylaxis card to the office with 2 students.
2. Office staff member to collect the hands free phone & the student’s Anaphylaxis kit from the staffroom and take the kit to the classroom.
3. Call 000 on way to classroom.
4. Staff member to administer the adrenaline auto injector as soon as possible.

**Yard –**

In the case of an anaphylaxis reaction:

1. Yard duty teacher to send the laminated Anaphylaxis card to the staffroom with 2 students.
2. Yard duty teacher to call 000.
3. Staff member to collect hands free phone (just in case the yard duty teacher doesn’t have a phone) and student’s Anaphylaxis kit.
4. Trained school staff member to administer the adrenaline auto injector as soon as possible.

**Emergency Response Procedure for Out of School Environment**

**Excursions –**

* Student risk assessment Management Plans **must** be taken to all camps and excursions.
* A trained member of staff **must** attend camps and excursions.
* First Aid Kits (with epipen/anapen) **must** be taken to camps and excursions.
* First Aid Kits **must** be close to student with anaphylaxis (e.g. bushwalks, swimming, rotational groups etc.)
* Phone/s **must** be taken to camps and excursions.
* Phone/s **must** be accessible at all times.

In the case of an anaphylaxis reaction:

- Staff member to Call 000.

- Lay the person flat. Do not allow them to stand or walk. If breathing is difficult allow them to sit.

- Trained school staff member to administer the adrenaline auto injector as soon as possible.

- Additional staff member to inform camp/excursion company.

**ANAPHYLAXIS MANAGEMENT**

Schools are encouraged not to ban nut products, but to raise awareness of the risks associated with anaphylaxis and to implement practical age-appropriate strategies to minimise exposure to known allergens.

Parents are free to pack the foods of their choice for their children to eat at school, however are mindful that at this school we have children who are anaphylactic, a condition that can cause death.

Teachers at Albion North Primary School will reinforce that we don’t share food and that we should wash our hands after eating. Where it is known that students have brought nut products at school and there is an anaphylactic student in the classroom, the teacher will take all precautions to minimise risk. Parents can help us maintain a safe environment by ensuring nut products are placed in a sealed container or sealed plastic bag.

Food such as cakes or other foods may be sent to school to celebrate birthdays, however where possible a full list of ingredients needs to be provided. On special occasions when food is freely available, teachers will ensure that a safe environment is maintained for all students. Prior to commencing units of work that involve cooking, teachers will discuss the individual needs of students at risk with parents.

Parents who have concerns or require clarification are urged to speak to the classroom teacher. Alternatively, they can contact the office for further information.

### Updated: 2019

### Amended: March 2019

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