



# ANAPHYLAXIS POLICY

## Purpose

To explain to Glenallen School parents, carers, staff and students the processes and procedures in place to support students diagnosed as being at risk of suffering from anaphylaxis. This policy also ensures that Glenallen School is compliant with Ministerial Order 706 and the Department's guidelines for anaphylaxis management.

## Scope

This policy applies to:

- all staff, including causal relief staff and volunteers
- all students who have been diagnosed with anaphylaxis or who may require emergency treatment for an anaphylactic reaction and their parents and carers.

## Policy

Glenallen School will fully comply with Ministerial Order 706 and the associated guidelines published by the Department of Education and Training.

## Anaphylaxis

Anaphylaxis is a severe allergic reaction that occurs after exposure to an allergen. The most common allergens for school aged children are nuts, eggs, cow's milk, fish, shellfish, wheat, soy, sesame, latex, certain insect stings and medications.

## Symptoms

Sights and symptoms of a mild to moderate allergic reactions can include:

- swelling of the lips, face and eyes
- hives or welts
- tingling in the mouth

Signs and symptoms of anaphylaxis, a severe allergic reaction, can include:

- difficult/noisy breathing
- swelling of tongue
- difficulty talking and/or hoarse voice
- wheeze or persistent cough
- persistent dizziness or collapse
- student appears pale or floppy
- abdominal pain and/or vomiting

Symptoms usually develop within ten minutes and up to two hours after exposure to an allergen, but can appear within a few minutes.

## Treatment

- Adrenaline given as an injection into the muscle of the outer mid-thigh is the first aid treatment for anaphylaxis.
- Individuals diagnosed as being at risk of anaphylaxis are prescribed an adrenaline autoinjector for use in an emergency. These adrenaline autoinjectors are designed so that anyone can use them in an emergency.

## Individual Anaphylaxis Management Plans

All students at Glenallen School who are diagnosed as being at risk of suffering from an anaphylactic reaction by a medical practitioner must have an Individual Anaphylaxis Management Plan. When notified of an anaphylaxis diagnosis, the Glenallen School nurse is responsible for developing a plan in consultation with the student's parents/carers.

Where necessary, an Individual Anaphylaxis Management Plan will be in place as soon as practicable after a student enrolls at Glenallen School and where possible, before the student's first day.

Parents and carers must:

- obtain an ASCIA Action Plan for Anaphylaxis from the student's medical practitioner and provide a copy to the school as soon as practicable
- immediately inform the school in writing if there is a relevant change in the student's medical condition and obtain an updated ASCIA Action Plan for Anaphylaxis
- provide an up to date photo of the student for the ASCIA Action Plan for Anaphylaxis when that Plan is provided to the school and each time it is reviewed
- provide the school with a current adrenaline autoinjector for the student that is not expired
- participate in annual reviews of the student's Plan.

Each student's Individual Anaphylaxis Management Plan must include:

- information about the student's medical condition that relates to allergy and the potential for anaphylactic reaction, including the type of allergies the student has
- information about the signs or symptoms the student might exhibit in the event of an allergic reaction based on a written diagnosis from a medical practitioner
- strategies to minimise the risk of exposure to known allergens while the student is under the care or at camps and excursions, or at special events conducted, organised or attended by the school
- the name of the person(s) responsible for implementing the risk minimisation strategies which have been identified in the Plan
- information about where the student's medication will be stored
- the student's emergency contact details
- an up-to-date ASCIA Action Plan for Anaphylaxis completed by the student's medical practitioner.

## Review and updates to Individual Anaphylaxis Plans

A student's Individual Anaphylaxis Plan will be reviewed and updated on an annual basis in consultation with the student's parents/carers. The plan will also be reviewed and, where necessary, updated in the following circumstances:

- as soon as practicable after the student has an anaphylactic reaction at school
- if the student's medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, changes
- when the student is participating in an off-site activity, including camps and excursions, or at special events including fetes and concerts.

Our school may also consider updating a student's Individual Anaphylaxis Management Plan if there is an identified and significant increase in the student's potential risk of exposure to allergens at school.

## Location of plans and adrenaline autoinjectors

Depending on parent choice and availability of adrenaline autoinjectors some students may keep their adrenaline autoinjector in their school bag, rather than in a designated location.

A copy of each student's Individual Anaphylaxis Management Plan will be stored with their ASCIA Action Plan for Anaphylaxis in Sick Bay together with the student's adrenaline autoinjector. Adrenaline autoinjectors must be labelled with the student's name.

A copy of each student's Individual Anaphylaxis Management Plan will be stored with their ASCIA Action Plan for Anaphylaxis in students classroom Medical Management folder.

A copy of each student's ASCIA Action Plan for Anaphylaxis are in all instructional areas, staffroom, sick bay and sub school corridors so that they are easily accessible by school staff in the event of an incident. Whilst some students keep their adrenaline autoinjector in their school bag, medication for those that do not will be stored and labelled with their name in Sick Bay.

Adrenaline autoinjectors for general use are available in the wall mounter First Aid Kit in the sub school first Aid Kits and in the Sick Bay, and are labelled "emergency epipen".

### **Risk Minimisation Strategies**

To reduce the risk of a student suffering from an anaphylactic reaction at Glenallen School, we have put in place the following strategies:

- A Nut Awareness Policy, which asks all staff and students not to bring any whole nut or nut products to school.
- Students are discouraged from sharing food.
- Students in the same classroom as a student with an Anaphylaxis are asked not to bring to school the food that the student is allergic to.
- Staff and students are regularly reminded to wash their hands after eating.
- A presentation is given to the staff twice yearly to present each student who has Anaphylaxis, their allergies and their management.
- Each student's ASCIA Action Plan for Anaphylaxis with student photo are in all instructional areas, sick bay and sub school corridors.
- General use autoinjectors are available in the wall mounter First Aid Kit in each sub school First Aid Kit and in the Sick Bay, and are labelled "emergency epipen".
- Information regarding Anaphylaxis and Allergies is put in the parent's newsletter to keep families informe.

### **Adrenaline autoinjectors for general use**

Glenallen School will maintain a supply of adrenaline autoinjectors 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 the wall mounter First Aid Kit in the sub school first Aid Kits and in the Sick Bay, and are labelled "emergency epipen".

The School Nurse is responsible for arranging the purchase of adrenaline auto-injectors for general use, and will consider:

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

## Emergency Response

In the event of an anaphylactic reaction, the emergency response procedures in this policy must be followed, together with the school's general first aid procedures, emergency response procedures and the student's Individual Anaphylaxis Management Plan.

A complete and up to date list of students identified as being at risk of anaphylaxis is maintained by the school nurse and stored on the school network <J:\Administration\Medical\2018 medical memos>.

All instructional areas, sick bay and sub school corridors display the ACSIA managements of students. For camps, excursions and special events, a designated staff member will be responsible for maintaining a list of students at risk of anaphylaxis attending the special event, together with their Individual Anaphylaxis Management Plans and adrenaline autoinjectors, where appropriate.

If a student experiences an anaphylactic reaction at school or during a school activity, school staff must:

Step	Action
1.	Lay the person flat Do not allow them to stand or walk If breathing is difficult, allow them to sit Be calm and reassuring Do not leave them alone Seek assistance from another staff member or reliable student to locate the student's adrenaline autoinjector or the school's general use autoinjector, and the student's Individual Anaphylaxis Management Plan, stored at [insert location] If the student's plan is not immediately available, or they appear to be experiencing a first time reaction, follow steps 2 to 5
2.	Administer an EpiPen or EpiPen Jr (if the student is under 20kg) <ul style="list-style-type: none"><li>Remove from plastic container</li><li>Form a fist around the EpiPen and pull of the blue safety release (cap)</li><li>Place orange end against the student's outer mid-thigh (with or without clothing)</li><li>Push down hard until a click is heard or felt and hold in place for 3 seconds</li><li>Remove EpiPen</li><li>Note the time the EpiPen is administered</li><li>Retain the used EpiPen to be handed to ambulance paramedics along with the time of administration</li></ul>
3.	Call an ambulance (000)
4.	If there is no improvement or severe symptoms progress (as described in the ASCIA Action Plan for Anaphylaxis), further adrenaline doses may be administered every five minutes, if other adrenaline autoinjectors are available.
5.	Contact the student's emergency contacts.

If a student appears to be having a severe allergic reaction, but has not been previously diagnosed with an allergy or being at risk of anaphylaxis, school staff should follow steps 2 – 5 as above.

Note: If in doubt, it is better to use an adrenaline autoinjector than not use it, even if in hindsight the reaction is not anaphylaxis. Under-treatment of anaphylaxis is more harmful and potentially life threatening than over treatment of a mild to moderate allergic reaction. Refer to page 41 of the Anaphylaxis Guidelines].

## Communication Plan

This policy will be available on Glenallen School's website so that parents and other members of the school community can easily access information about Glenallen School's anaphylaxis management procedures.

The parents and carers of students who are enrolled at Glenallen School and are identified as being at risk of anaphylaxis will also be provided with a copy of this policy.

As part of the Induction Program, the Assistant Principal is responsible for ensuring that all relevant staff, including casual relief staff and volunteers are aware of this policy and Glenallen School's procedures for anaphylaxis management. Casual relief staff and volunteers who are responsible for the care and/or supervision of students who are identified as being at risk of anaphylaxis will also receive a verbal briefing on this policy. <J:\Administration\Medical\Epipen\Anaphylaxis PD>

### **Staff training**

Staff at Glenallen School will receive appropriate training in anaphylaxis management, consistent with the Department's Anaphylaxis Guidelines.

Staff who are responsible for conducting classes that students who are at risk of anaphylaxis attend, and any further staff that the principal identifies, must have completed:

- an approved face-to-face anaphylaxis management training course in the last three years, or
  - an approved online anaphylaxis management training course in the last two years
- Glenallen School uses the following training course ASCIA eTraining course 22303VIC,

Staff are also required to attend a briefing on anaphylaxis management and this policy at least twice per year, facilitated by a staff member who has successfully completed an anaphylaxis management course within the last 2 years. Glenallen School Nurses are accredited Anaphylaxis Supervisors and will supervise each briefing, which will address:

- this policy
- the causes, symptoms and treatment of anaphylaxis
- the identifies of students with a medical condition that relates to allergy 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 enrolls at Example School who is at risk of anaphylaxis, the principal 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.

### **Further information and resources**

- School Policy and Advisory Guide:
  - [Anaphylaxis](#)
  - [Anaphylaxis management in schools](#)
- Allergy & Anaphylaxis Australia: [Risk minimisation strategies](#)
- ASCIA Guidelines: [Schooling and childcare](#)
- Royal Children's Hospital: [Allergy and immunology](#)

### **Evaluation**

The principal will complete the Department's Annual Risk Management Checklist for anaphylaxis management to assist with the evaluation and review of this policy and the support provided to students at risk of anaphylaxis.