Kunyung Primary School

**Anaphylaxis Management**

**Policy**

**SCHOOL STATEMENT**

Kunyung Primary School will fully comply with Ministerial Order 706 and associated guidelines published and amended by the Department from time to time.

**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.

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 schools and parents are important in preventing exposure to triggers while the child is 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.

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.

**STAFF TRAINING**

All School Staff will be appropriately trained:

* To meet the Anaphylaxis Training of MO706. See table below for further details

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Completed by** | **Course** | **Provider** | **Cost** | **Valid for** |
| **All school staff**  **AND**  **2 staff** per school or per campus (School Anaphylaxis Supervisor) | ASCIA Anaphylaxis e-training for Victorian Schools followed by a competency check by the School Anaphylaxis Supervisor  *Course in Verifying the Correct Use of Adrenaline Autoinjector Devices 22303VIC* | ASCIA  *Asthma Foundation* | *Free to all schools*  *Free from the Asthma Foundation (for government schools)* | *2 years*  *3 years* |

In addition, all staff will participate in a briefing to occur twice in a calendar year (with the first briefing to be held at the beginning of the school year) on the following points and as per the Department Guidelines - page 3:

* the School’s Anaphylaxis Management Policy;
* the causes, symptoms and treatment of anaphylaxis;
* the identities of the students with a medical condition that relates to an allergy and the potential for anaphylactic reaction, and where their medication is located;
* how to use an Adrenaline Autoinjector, including hands on practise with a trainer Adrenaline Autoinjector device;
* the School’s general first aid and emergency response procedures; and
* the location of, and access to, Adrenaline Autoinjector that have been provided by Parents or purchased by the School for general use.

The briefing must be conducted by a member of School Staff nominated as the school Anaphylaxis Supervisor who has successfully completed an Anaphylaxis Management Training Course in the last two years.

In the event that the relevant training has not occurred for a member of staff who has a child in their class at risk of Anaphylaxis, the Principal will develop an interim Individual Anaphylaxis Management Plan in consultation with the Parents of any affected student with a medical condition that relates to allergy and the potential for anaphylactic reaction. Training will be provided to relevant School Staff as soon as practicable after the student enrols, and preferably before the student’s first day at School.

The Principal will ensure that while the student is under the care or supervision of the School, including excursions, yard duty, camps and special event days, there is a sufficient number of School Staff present who have successfully completed an Anaphylaxis Management Training Course

**INDIVIDUAL ANAPHYLAXIS MANAGEMENT PLANS**

The principal will ensure that an Individual Anaphylaxis 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 student’s medical condition that relates to allergy and the potential for anaphylactic reaction, including the type of allergy/allergies the student has (based on a written diagnosis from a medical practitioner)
* strategies to minimise the risk of exposure to known and notified allergens while the student is under the care or supervision of school staff, for in-school and out-of-school settings including in the school yard, 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 strategies
* information on where the student's medication will be stored
* the student's emergency contact details
* an ASCIA Action Plan for Anaphylaxis.

School staff will then implement and monitor the student’s Individual Anaphylaxis Management Plan.

The student’s Individual Anaphylaxis Management Plan will be reviewed, in consultation with the student’s parents in all of the following circumstances:

* annually
* if the student's medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, changes
* as soon as practicable after the student has an anaphylactic reaction at school
* when the student is to participate in an off-site activity, such as camps and excursions, or at special events conducted, organised or attended by the school (eg. class parties, elective subjects, cultural days, fetes, incursions).

It is the responsibility of the parents to:

* obtain and provide the ASCIA Action Plan
* inform the school in writing if their child’s medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, changes and if relevant, provide an updated ASCIA Action Plan
* provide an up to date photo for the ASCIA Action Plan when that Plan is provided to the school and when it is reviewed
* provide the school with an adrenaline autoinjector that is current (the date has not expired) for their child.
* participate in an annual review

**RISK MINIMISATION STRATEGIES**

The school will use the checklist and recommendations in the Anaphylaxis Guidelines (Resource 1) to implement Risk Minimisation and Prevention Strategies in-school and out-of-school settings which include (but are not limited to) the following:

* during classroom activities (including class rotations, specialist and elective classes);
* between classes and other breaks;
* in the canteen;
* during recess and lunchtimes;
* before and after school; and special events including incursions, sports, cultural days, fetes or class parties, excursions and camps.

Some of the preventions strategies that will be implemented by our school to assist anaphylaxis management include:

* providing professional development for all staff including the identification and response to anaphylaxis and the proper use of an EpiPen®/Anapen®.
* identifying susceptible students and knowing their allergens
* informing the community about anaphylaxis via the newsletter
* restrict sharing of lunch-box food
* keeping the lawns well mown and encouraging children always wear shoes
* requiring parents to provide an Emergency Management Plan developed in consultation with a health professional and an EpiPen®/Anapen® if necessary, both of which will be maintained in the first aid room for reference as required
* ensuring the school keeps a spare, in date EpiPen®/Anapen® for adult and child use in the 1st aid room

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®/Anapen®.
* 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®/Anapen® is kept. Remember that the EpiPen®/Anapen® 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 and school community awareness about severe allergies and the importance of their role in fostering a school environment that is safe and supportive for their peers.

**SCHOOL PLANNING AND EMERGENCY RESPONSE**

In complying with Ministerial Order 706, the **Principal** will ensure:

* an Individual Anaphylaxis Management Plan will be developed and reviewed regularly by the Principal or nominee in consultation with the student’s parents;( The plan will be in place as soon as practicable after the student enrols and where possible, before their first day of school
* a template of an Individual Anaphylaxis Management Plan can be found in Appendix 3 of the guidelines at [www.education.vic.gov.au/school/teachers/health/Pages/anaphylaxisschl.aspx](http://www.education.vic.gov.au/school/teachers/health/Pages/anaphylaxisschl.aspx)
* prevention strategies are in place for in and out of school activities;
* a communication plan to provide information to all staff (including volunteers and casual relief staff), students and parents about anaphylaxis and the school’s management policy. It will include the steps the school will take to respond to an anaphylactic reaction whether the student is in class, the school yard, on camp or an excursion or a special event day;
* the Anaphylaxis Risk Management Checklist is completed on an annual basis;
* the school purchases spare or 'backup’ adrenaline auto-injection devices(s) which will be stored as part of the school first aid kit(s), for general use;
* school staff will regularly review epiPen kits, checking for currency;
* school staff will ensure that individual epiPens will be signed in and out accordingly by students and parents as required.
* the plan will is reviewed annually, if the condition changes, or immediately after a student has an anaphylactic reaction at school or if the student is to participate in an off-site activity such as an excursion or camp or will attend a special event such as the school fete or a class party.
* The Principal will ensure that while the student is under the care or supervision of the school, sufficient trained staff are present

It is the responsibility of the **parent/carer** to:

* Provide the emergency procedures plan (ASCIA Action Plan) to the school upon diagnosis;
* Inform the school if their child’s condition changes, and if relevant, an updated ASCIA Action Plan)
* Provide an up to date photo when the plan is provided and subsequently reviewed;
* Provide the school with an Adrenaline Autoinjector that is current and not expired.

**School staff** will implement and monitor the Individual Anaphylaxis Management Plan.

**In the event of an anaphylactic reaction**, the school’s first aid and emergency management response procedures and the student’s Individual Anaphylaxis Management Plan will be followed:

The school will ensure that:

* a nominated staff member will immediately call the ambulance
* the 1st aid officer or a nominated staff member will immediately locate the student's Adrenaline Autoinjector and the student's Individual Anaphylaxis Management Plan, which includes the student’s ASCIA Action Plan and administer the Adrenaline Autoinjector in accordance with the instructions in the student's ASCIA Action Plan. This staff member will remain with the student who is displaying symptoms of anaphylaxis at all times.
* a nominated staff member will wait for ambulance at the designated entrance.
* contact the student’s emergency contact person and then contact Security Services Unit on 9589-6266

**Important:** Where there is no marked improvement and severe symptoms as described in the student’s ASCIA Action Plan for Anaphylaxis are present, a second injection of the same dose may be administered after 5 to 10 minutes.

If any uncertainty exist, the school may also call the Royal Children’s Hospital Anaphylaxis Advisory Line on 1300 725 911.

Staff are reminded that their duty of care extends to all students and must not leave the class unsupervised or reduce the number of staff required for yard supervision.

If the anaphylactic emergency occurs in:

* Classrooms - the classroom phone or a personal mobile phone will be used to raise the alarm that a reaction has occurred. The teacher will also send a red ‘emergency’ card with two children to the office area to raise an alarm which triggers getting an Adrenaline Autoinjector to the child and other emergency response protocols.
* School Yard - staff raise the alarm and send a message to the office.
* Excursions and Camps - Each individual camp and excursion requires risk assessment for each individual student attending who is at risk of anaphylaxis.

Emergency procedures will vary accordingly but in general the student’s Individual Anaphylaxis Management Plan will be followed and emergency management response procedures will be followed:

In the event of an anaphylactic reaction which has involved a student in the school's care and supervision, a post-incident review will take place with all parties including a thorough review of the management processes that were implemented.

Students and staff may benefit from post-incident counseling provided, for example, by the Student Welfare Coordinator or school psychologist.

**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 by the assistant principal or student wellbeing officer.

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

**References:**

<http://www.education.vic.gov.au/Documents/school/teachers/health/AnaphylaxisGuidelines.pdf>

<http://www.education.vic.gov.au/Documents/school/teachers/health/Anaphylaxis_MinisterialOrder706.pdf>

**ANNUAL RISK MANAGEMENT CHECKLIST**

The Principal will complete an annual Risk Management Checklist as published by the Department of Education and Early Childhood Development to monitor compliance with their obligations.

**Ratified by School Council (date): November 2016**

**Year for Review November 2018**