

ANAPHYLAXIS

POLICY

Rationale:

1. Anaphylaxis is a potentially life threatening, severe allergic reaction caused by exposure to an allergen.
2. The most common allergens in school aged children include peanuts, eggs, tree nuts (eg cashews), cow's milk, fish and shellfish, wheat, soy, sesame, latex, certain insect stings and some medications.
3. Signs and symptoms include rash/welts, difficult/noisy breathing, swelling of lips/tongue, tingling around mouth, tight throat, vomiting, loss of consciousness.
4. Anaphylaxis is best prevented by knowing and avoiding the allergens, and regular communication between the school and the school community.
5. In the event of an anaphylactic reaction the school will follow their first aid and emergency response procedures. The students' individual anaphylaxis management plan will be followed.
6. Responsibility for managing this condition is shared by all and is responsive to the needs of the affected children.

Aims:

1. To minimise risk of occurrence of anaphylaxis by liaising with carers and staff and identifying individual allergy triggers and develop management plans.
2. To inform the school community about the school's anaphylaxis policy.
3. To ensure that each staff member has adequate knowledge about anaphylaxis management and the school's policy and procedures in responding to an anaphylactic reaction.
4. To consider anaphylaxis management when arranging school activities.
5. To provide a safe and supportive environment for children at risk of anaphylaxis.

Implementation:

1. 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. Staff will familiarise themselves with each management plan.
2. The individual anaphylaxis management plan will be in place as soon as practicable after the student enrolls, and where possible before their first day of school.
3. The individual anaphylaxis management plan will set out the following:
 - a. Information about the diagnosis, including the type of allergy or allergies the student has (based on a diagnosis from a medical practitioner).
 - b. Strategies to minimise the risk of exposure to allergens while the student is under the care or supervision of school staff, for in-school and out of school settings including camps and excursions.
 - c. The students emergency contact details.
 - d. Information on where the student's medication will be stored.
 - e. The emergency procedures to be taken in the event of an allergic reaction.
4. The student's individual management plan will be reviewed, in consultation with the student parents/carers annually and:
 - a. if the student's condition changes, or
 - b. immediately after a student has an anaphylactic reaction at school.

5. It is the responsibility of the parent to:
 - a. provide the emergency procedures plan (signed by a medical practitioner) together with a current photo of their child.
 - b. inform the school in writing if their child's medical condition changes, and if relevant provide an updated emergency procedures plan (ASCIA Action Plan).
 - c. provide and maintain a current EpiPen, Anapen or similar as described in ASCIA Plan.
6. It is the responsibility of the school to:
 - a. inform volunteers and casual relief staff of students at risk of anaphylaxis and their role in responding to an anaphylactic reaction.
 - b. inform the school community of the need to minimise the risk of anaphylaxis by following school policy on not sharing food and avoiding sending in food that can cause anaphylaxis.
 - c. ensure that if these food items are brought to school, insofar that is reasonable to do so, the child who brings them will eat in a separate space within the class spaces and will wash their hands and face after eating.
 - d. reinforce rules about not eating foods unless provided from home and not sharing.
 - e. encourage children to wash hands after eating.
 - f. send the school newsletter and department newsletters to all families, at the start of each year, outlining which food types students in our school may have an anaphylactic reaction to. These newsletters will also contain a request that these foods not be sent to school.
 - g. have teachers liaise with parents of anaphylactic students when using food as part of the curriculum, eg cooking.
 - h. provide regular anaphylaxis training to all staff and ensure staff is updated if any changes to individual management plans.
7. Training will cover;
 - a. the school's anaphylaxis management policy
 - b. the causes, symptoms and treatment of anaphylaxis
 - c. the identities of students diagnosed at risk of anaphylaxis and where their medication is located
 - d. how to use an auto-adrenaline injecting device (EpiPen or AnaPen)
 - e. the school's first aid and emergency response procedures
 - f. 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.
 - g. Have teachers liaise with the parents of anaphylactic students when using food as part of the curriculum, for example cooking.

Evaluation:

- This policy will be reviewed as part of the school's three-year review cycle

This policy was last ratified by School Council in....

July 2015