



# WYPS Anaphylaxis Policy



|   |   |
|---|---|
| <b>Date Implemented</b>                 | 31/5/2022   |
| <b>Document Owner</b>                   | Assistant Principal   |
| <b>Approved By</b>                      | WYPS School Council   |
| <b>Approval Authority SC President</b>  |  31/5/2022 |
| <b>Approval by Principal or Nominee</b> |  31/5/2022 |
| <b>Review Date</b>                      | 2023  |
| <b>References</b>                       |   |

## 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 (eg. cashews), cow's milk, fish and shellfish, wheat, soy, sesame, latex, certain insect stings and medication.

The key to prevention of anaphylaxis 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 ensuring that certain foods or items are kept away from the student while 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 students 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.

## GUIDELINES-Department guidelines

The school will comply with the Ministerial Order 706 and Department guidelines on anaphylaxis management. \*\*

## GUIDELINES – Individual Management Plan

The principal in conjunction with the first aid officer will ensure that an **Individual 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. An individual anaphylaxis management plan will be in place as soon as practicable after the student enrolls and where possible before the first day of school.

The student's Individual Management Plan will be reviewed, in consultation with the student's parents/carers:

- Annually (each November/December) in readiness for the following year.
- If the student's condition changes, or
- Immediately after a student has an anaphylactic reaction at school.

In the event of anaphylactic reaction, the school's first aid and emergency response procedures and the student's individual anaphylaxis management plan must be followed. \*\*

An individual anaphylaxis management plan has two components.

**1. Anaphylaxis Management Student Information** – personal information & strategies proforma which sets 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 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
- 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.

**2. Anaphylaxis Action Plan** – sets out emergency procedures to be taken in the event of an allergic reaction .

The action plan used by the school is that provided by the Australasian Society of Clinical Immunology and Allergy (ASCI).

The Anaphylaxis Action Plan sets out the following:

- Emergency procedures to be taken in the event of an allergic reaction
- Is signed by the medical practitioner who was treating the child on the date the practitioner signs the emergency procedures plan
- Includes an up to date photograph of the student

It is the responsibility of the parent/carer to:

- Support the school in the development of the Individual Management Plan, in particular the Anaphylaxis Action Plan.
- Inform the school if their child's medical condition changes, and if relevant provide an updated Anaphylaxis Action Plan.

#### **GUIDELINES – Communication Plan**

The principal in conjunction with the first aid officer 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 '**Anaphylaxis Emergency Procedure Plan**' details the procedure for responding 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 the needs of these students and their role in responding to an anaphylactic reaction by a student in their care. Specific student related information will be provided to CRTs on arrival at the school each period of employment. This includes a copy of the Anaphylaxis Action Plan for each child in the grade that the CRT is working with.

#### **GUIDELINES – Staff Training**

Teachers and other school staff who conduct classes which students at risk of anaphylaxis attend, or give instruction to students at risk of anaphylaxis must have up to date training in an anaphylaxis management training course.

At Woori Yallock PS this training will involve all teachers, support staff, and administration staff. The Out of School Hours Care staff will be trained in addition to this. All staff will be updated every three years in the anaphylaxis management training course. Every 12 months, staff to complete anaphylaxis online training, then be verified by trained anaphylaxis trainers.

All staff will be briefed 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 for anaphylaxis
- The identities of students diagnosed at risk of anaphylaxis and where their medication is located
- How to use an EpiPen auto adrenaline injecting device
- The school's first aid and emergency procedure plan

#### **GUIDELINES – School Documentation**

Woori Yallock Primary School will develop the following documentation to support its anaphylaxis management plan:

- Anaphylaxis management student information proforma
- This document is completed by parents/carers in conjunction with the first aid officer and kept in the first aid room.
- Anaphylaxis action plan – ASCIA approved
- This action plan is completed by parents/carers and is kept in the first aid room.
- Copies of these action plans are provided to all teachers and staff and are kept in the first aid room, on display in the staff room and in the tub containing the epipens.
- A copy of the action plan is provided to the CRT at the commencement of their teaching allocation
- Anaphylaxis emergency procedure plan
- This document is provided to all teachers and staff and is displayed in the first aid room, general office and OSHC.
- How to administer an EpiPen
- This document is provided to all teachers and staff and is displayed in the first aid room, general office and OSHC.

## **PREVENTION STRATEGIES**

### **NUT/FOOD ALLERGIES:**

- Teachers of children at risk of anaphylaxis have current anaphylaxis training.
- Replacement teachers are made aware of children at risk of anaphylaxis and emergency procedures.
- Child's anaphylaxis management plan is easily located in classroom. Also in 1<sup>st</sup> Aid room and Epipen tub.
- Children with allergies are instructed never to share food.
- Children in grade are told never to share food with each other and particularly allergic child.
- Children with allergies are made known to all class members.
- Children in class receive specific explanations regarding child's food allergy and consequences/actions to be taken if that food is ingested by the allergic child.
- Teacher supervises eating times.
- All food being used during cooking activities in class or in specialist Kitchen Garden Cooking sessions must be checked, labels read, to ensure they contain no nuts.
- In the event of class parties the child should only consume food at the party that has no chance of nuts/their food allergen being in food eg. food supplied by his/her parents, fruit or food whereby labels can be checked. A note is to be sent home regarding no food containing nuts to be brought to party.
- School camps to be alerted prior to arrival. Class teacher to confirm with staff at camp that child's food is to be nut free. Camp staff to be made aware of child's identity.
- Epipen and child's anaphylaxis plan are to be taken to all school camps and on excursions/sports days.
- During camp or excursions child must be in the care of a teacher/aide who has current anaphylaxis training.

### **INSECT BITE ALLERGIES:**

- Teachers of children at risk of anaphylaxis have current anaphylaxis training.
  - Replacement teachers are made aware of children at risk of anaphylaxis and emergency procedures.
  - Child's anaphylaxis management plan is easily located in classroom. Also in 1<sup>st</sup> Aid room and Epipen tub.
  - Children in class receive specific explanations regarding child's insect bite allergy and consequences/actions to be taken if the child is bitten.
  - Encourage child to play in areas deemed low risk. Keep away from base of trees, gardens and grass areas covered in spring flowers.
  - Bees, wasps or ants nests to be removed by professionals.
  - Keep plants that are known to attract stinging insects to a minimum.
  - Child to wear enclosed shoes, when outside, and bright coloured clothes are to be avoided.
  - Keep open drinks covered as they can attract insects.
- Be aware of insects near the drinking taps

### **ANAPHYLAXIS COMMUNICATION:**

#### **STAFF**

- All staff have an Anaphylaxis folder in their classrooms. This contains students' action plans, with photo, Emergency Procedures Plan and instructions on Epipen use.

- All staff are familiar with Emergency Procedures Plan. Copies are also at the office, in the First Aid room and in the EpiPen container in the staff room.
- Students' ASCIA Action Plans, with current photos, are on display in the staff room, first aid room and kept with each child's EpiPen and management plan.
- All staff are trained in Anaphylaxis Management and the use of EpiPens once every 3 years. Staff receive twice yearly briefings, incorporating practise use of EpiPen, in line with department guidelines. Every 12 months staff to complete anaphylaxis online training then be verified by anaphylaxis trainers.
- Replacement teachers are made aware of children at risk of anaphylaxis and emergency procedures.
- New staff will be fully briefed re Anaphylaxis Management.

#### **PARENTS**

- At the beginning of each year parents of students at risk will meet to discuss their child's Individual Management Plan. They will be made aware of the Anaphylaxis policy and emergency procedures plan.
- Parents are to supply an updated ASCIA action plan each year. They will be notified by phone and note at least 2 weeks before their child's EpiPen expires.
- In the event of an anaphylactic episode parents will be consulted whilst plans and procedures are reviewed.
- When necessary, all parents will be made aware of relevant information regarding anaphylaxis via the newsletter or class notes, particularly in relation to class parties.

#### **STUDENTS**

- Students in classes with a child at risk of anaphylaxis will be made aware of this. They will receive instructions and information, appropriate to their age, regarding anaphylaxis, emergency procedures and restrictions on sharing food and/or safe playing areas for students at risk from insect bites.