



St John Bosco's School

Anaphylaxis Management Policy

Introduction

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 an 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 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.

Individual Anaphylaxis Management Plans

The Principal 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 enrolls, and if possible, prior to the student starting school.

Roles and Responsibilities of School Staff:

- Know and understand the School's Anaphylaxis Management Policy.
- Know which students are at risk of anaphylaxis.
- Understand the causes, symptoms and treatment of anaphylaxis.
- Obtain current training in how to recognise and respond to anaphylaxis, including administering an adrenaline autoinjector.
- Know the school's first aid emergency procedures and their role in responding to an anaphylactic reaction.
- Know where each student's adrenaline autoinjector and ASCIA Action Plan for Anaphylaxis are located.
- Know and follow the prevention and risk minimisation strategies in the student's Individual Anaphylaxis Management Plan.
- Plan ahead for special activities (such as art, cooking, sport days, special occasions, incursions and excursions) and liaise with parents/guardians in advance.
- Avoid the use of food treats in class or as rewards.

- 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.
- Be aware of the risk of cross contamination when preparing, handling and displaying food.
- Ensure that tables and surfaces are wiped down regularly and that students wash their hands after handling food.
- Raise student awareness about severe allergies and the importance of their role in fostering a safe school environment for their peers.

Roles and responsibilities of the School Anaphylaxis Supervisor

- Work with principals to develop, implement and review the school's Anaphylaxis Management Policy and each student's Individual Anaphylaxis Management Plan.
- Obtain current training in how to recognise and respond to anaphylaxis, including administering an adrenaline autoinjector.
- Verify the correct use of adrenaline autoinjector (trainer) devices by other school staff undertaking the ASCIA Anaphylaxis e-training for Victorian Schools.
- Provide access to the adrenaline autoinjector (trainer) device for practice use by school staff.
- Lead the twice-yearly Anaphylaxis School Briefing.
- Provide or arrange current training to other staff members to recognise and respond to anaphylaxis.
- Keep an up-to-date register of students at risk of anaphylaxis and of the training undertaken by school staff.
- Work with First Aid staff to regularly review the Individual Anaphylaxis Management Plans to:
 - Ensure that the student's emergency contact details are up-to-date
 - Ensure that the ASCIA Action Plan for Anaphylaxis matches the supplied adrenaline autoinjector
 - Check that the adrenaline autoinjector is not out-of-date or discoloured
 - Inform parents/guardians in writing a month prior to the expiry date if the adrenaline autoinjector needs replacing
 - Ensure that adrenaline autoinjectors are stored correctly in an unlocked, easily accessible place and that this storage area is appropriately labelled.
- Work with staff to conduct regular risk prevention, assessment, minimisation and management strategies.
- Work with staff to develop strategies to raise school staff, student and community awareness about severe allergies.
- Provide or arrange post-incident support (e.g. counselling) to students and staff as required.

The individual anaphylaxis management plan will set out the following:

- information about the diagnosis, including the type of allergy or allergies 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
- 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:

- Notify school of their child's allergies and provide appropriate medical information.
- Assist the school in the development of an Individual Anaphylaxis Management Plan for their child and participate in reviews of this Plan.
- Ensure that the school is notified of changes to the child's medical condition or emergency contact details.
- Provide an ASCIA Action Plan for Anaphylaxis completed by the child's doctor.

- Provide an adrenaline autoinjector clearly labelled with child's name to the school. Some upper primary and high school students choose to carry their adrenaline autoinjector on their person, and this is documented in their Individual Anaphylaxis Management Plan. These students must also have an additional adrenaline autoinjector kept in an agreed location (e.g. the first aid room).
- Provide any other medication indicated on the child's ASCIA Action Plan for Anaphylaxis and ensure that it is in date.
- Promptly replace the child's adrenaline autoinjector if it is used or out-of-date.
- Provide an updated ASCIA Action Plan for Anaphylaxis after a change in the health condition of the child, through annual (or as required) reviews by a medical practitioner or after an allergic reaction.
- Assist school staff in planning and preparation for the student prior to school camps, field trips, excursions or special events (e.g. class parties, cultural days, fetes or sport days). Supply alternative food options for the student when needed.
- Educate the child about their allergies and how to minimise the risk of exposure (such as not sharing food if allergic to food, or taking precautions when outdoors if allergic to insects).

Anaphylaxis 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/plan.

The communication plan will include information about what steps will be taken to respond to an anaphylactic reaction by a student in classroom, in the school yard, on school excursions and special event days.

St John Bosco's School has taken steps to ensure effective communication of students at risk of anaphylaxis.

1. Anaphylaxis action plans are located in the first aid room and include students' photos.
2. Anaphylaxis action plans including photos are located in all classrooms near first aid tubs.
3. Specialist classrooms have a list of students with anaphylaxis in the Student Information Folder
4. All staff undergo regular briefings on anaphylaxis, the symptoms and emergency responses.
5. All staff with a student at risk of anaphylactic responses in their classroom, will be briefed to ensure their awareness of the issues related to these students.
6. Parents/carers of anaphylactic students will be contacted each year to ensure we have the most up-to-date anaphylactic management plan available.

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 Information Folders, and
- if replacing a specialist teacher, having access to the specialist timetable, which identifies classes with students with anaphylaxis.

This Anaphylaxis Management Policy 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 deemed necessary.

Minimising Exposure

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 I ask that you are mindful that at this school we have children and teachers who are anaphylactic, a condition that can cause death.
- Teachers at St John Bosco's 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 to 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. Children are expected to eat their play lunch and lunch in the classroom.

- 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.

Staff Training and Emergency Response

Teachers and other school staff who conduct classes with students at risk of anaphylaxis will have up-to-date training in an anaphylaxis management training course.

At other times while a student is under the care or supervision of the school, including excursions, yard duty, camps and special event days, the principal will ensure that there is a sufficient number of staff present who have up-to-date training in an anaphylaxis management.

General

- personal auto adrenaline injecting devices are located in the student's classroom in the first aid tub labelled with the student's name and instructions for use;
- each student's action plan is displayed in the classroom;
- generic auto adrenaline injecting devices are also located in the first aid room, yard duty bags, and excursion bags.
- each student's ASCIA plan is located in the first aid room and readily accessible;
- a photo of each individual student at risk is displayed in the Student Information Folders.
- the designated first aid officer is 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;
- in the event of a suspected anaphylactic emergency, an ambulance will be called;
- 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 adrenaline injecting device and ASCIA action plan for school camp;
- staff are routinely briefed about students at risk of anaphylaxis.

Emergency Management

Anaphylactic episode during recess and lunch times

1. Identify the child and verify they have an individual anaphylactic management plan.
2. Contact the office immediately. Staff member to go to place of student with mobile phone.
3. Use the child's personal or yard duty epipen, if not available send for the epipen. Contact 000 by a mobile phone for emergency medical assistance, clearly explain that this child is suffering a suspected anaphylactic reaction

Anaphylactic episode during instruction time (in classrooms or specialists)

1. Identify the child and verify they have an individual anaphylactic management plan. See Student Information Folder.
2. Contact the office immediately. Staff member to go to place of student with mobile phone.
3. Get assistance from neighbouring classroom teacher as help is sought from the office.
4. Administer treatment there whilst contacting 000 by a mobile phone for emergency medical assistance, clearly explain that this child is suffering a suspected anaphylactic reaction

At excursions/sports/camp:

- the School will inform the camp of any students with anaphylaxis to ensure that appropriate arrangements are made for students participating at camp
- the auto adrenaline injecting device will accompany students at risk of anaphylaxis to all excursions, sports events and camps
- the injecting device will be kept within close proximity of the student
- in the event of an anaphylactic episode, the supervising teacher will administer the auto adrenaline injection
- the supervising teacher will ring 000 for medical assistance
- if the episode takes place at another school or establishment, first aid assistance will be sought
- for school camps: Parents will be fully informed of the relevant considerations such as:
 - the remoteness of the camp (distance to nearest hospital)
 - mobile telephone coverage. (In some locations, coverage is not reliable)