

PURPOSE

To explain to Glen Katherine Primary School (GKPS) 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 GKPS is compliant with Ministerial Order 706 and the Department's guidelines for anaphylaxis management.

SCOPE

This policy applies to:

- all staff, including casual 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

School Statement

GKPS 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 medication.

Symptoms

Signs and symptoms of a mild to moderate allergic reaction 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.
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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 GKPS who are diagnosed by a medical practitioner as being at risk of suffering from an anaphylactic reaction must have an Individual Anaphylaxis Management Plan. When notified of an anaphylaxis

diagnosis, the principal of GKPS 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 GKPS 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 GKPS as soon as practicable
- immediately inform GKPS 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 GKPS and each time it is reviewed
- provide GKPS with a current adrenaline autoinjector for the student that has 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 allergies 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 supervision of school staff, including in GKPS yard, at camps and excursions, or at special events conducted, organised or attended by GKPS
- 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 Management Plans

A student's Individual Anaphylaxis Management 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 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

A copy of each student's Individual Anaphylaxis Management Plan will be stored with their ASCIA Action Plan for Anaphylaxis at the First Aid Room, together with the student's adrenaline autoinjector. Adrenaline autoinjectors must be labelled with the student's name.

Risk Minimisation Strategies

GKPS will ensure that the following risk minimisation strategies are in place:

- Nut products are not supplied through GKPS Canteen and Out of School Hours Care Programs
- A copy will also be attached to their student Compass File
- Each child's auto-injector pen will be clearly labelled and stored correctly (at room temperature and away from light) in an unlocked, easily accessible area within the First Aid Room.
- GKPS's labelled back-up auto-injector pens will be stored in the office, above the Accounts desk, if a child requires a second auto-injector pen in a rare, severe reaction.
- GKPS's labelled auto-injector pens will be used generally in the event of an emergency, where no other devices are available, and where a student is having a first-time reaction without a medical diagnosis of anaphylaxis.

- The First Aid officer will check the expiry date on the auto-injector pen monthly and check that the fluid is clear. (if rusty or cloudy it will not be given) together with ensuring that students' emergency contact details are up to date.
- Photos of children at risk of an anaphylactic reaction will be displayed in yard duty folders, classroom teacher's office, Class CRT Folder, the First Aid Room, canteen, Out of School Hours Care and specialist areas.
- An Emergency Management Plan will be developed for each child at risk for the classroom, the yard and on other school activities eg. Excursions, sporting activities, camps.
- All teachers on yard duty will carry a communication device (personal mobile phone) to notify the first aid officer/general office of an anaphylactic reaction in the yard. The teacher must stay with the child awaiting the officer to bring the auto-injector pen to the site. Mobile phones *must* be taken on all incursions, excursions and camps.
- Auto-injector pens and Management Plans must be signed out of the First Aid Room whenever a child participates in off-site activities (eg camps, excursions, sporting events)
- Procedures are in place to minimize the risk of anaphylaxis when students are on school excursions and school camps. These provisions should include:
 - the provision of an up to date ASCIA Action Plan and a list of any prescribed medication from all at risk students prior to attending the activity
 - identification of the student/s at risk with all staff attending the activity
 - prior *written* notification to the camp manager informing them of students with food allergies
 - clear understandings of school staff attending camp and allergy affected students regarding food requirements and management
 - reminding students and reinforcing the fact that students are not to share food with each other including food utensils and containers
 - reminding children not to allow eating on transportation to and from the venue, or in rooms, (reducing exposure to allergens) nor for staff or parent helpers to purchase or provide food to children during the activity

Adrenaline autoinjectors for general use

GKPS will maintain a supply of adrenaline autoinjector(s) 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.

There are currently 4 adrenaline devices approved by the Therapeutic Goods Administration for use in Australia: the EpiPen®, the Anapen®, Jext® and Neffy®. All devices can be used when provided by families for students, however, the principal or allocated staff member can only use EpiPen®, Anapen® or Jext® adrenaline autoinjector for general use. For more information about which autoinjector to purchase for general use, refer to [Adrenaline autoinjectors for general use](#).

Adrenaline autoinjectors for general use will be stored at the General Office and Science Room and labelled "general use".

The principal is responsible for arranging the purchase of adrenaline autoinjectors for general use, and will consider:

- the number of students enrolled at GKPS at risk of anaphylaxis
- the accessibility of adrenaline autoinjectors supplied by parents
- the availability of a sufficient supply of autoinjectors for general use in different locations at GKPS, as well as at camps, excursions and events
- the limited life span of adrenaline autoinjectors, and the need for general use adrenaline autoinjectors 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 GKPS'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 First Aid Officer and stored at the First Aid Room. 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.	<ul style="list-style-type: none"> ● 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 GKPS's general use autoinjector, and the student's Individual Anaphylaxis Management Plan, stored at First Aid Room. ● 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"> ● Remove from plastic container ● Form a fist around the EpiPen and pull off the blue safety release (cap) ● Place orange end against the student's outer mid-thigh (with or without clothing) ● Push down hard until a click is heard or felt and hold in place for 3 seconds ● Remove EpiPen ● Note the time the EpiPen is administered ● Retain the used EpiPen to be handed to ambulance paramedics along with the time of administration
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.
6.	The principal or a staff member allocated to do so must contact the Incident Support and Operations Centre (ISOC) on 1800 126 126 to report 'High' or Extreme' severity incidents to report the incident. Incidents assessed as 'Low' or 'Medium' can be reported directly into EduSafe Plus by the principal or their allocated staff member.

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.

For first time anaphylactic reactions, the school's general use adrenaline autoinjector device must be used. If the general use device is not immediately available in an anaphylaxis emergency, staff may use another student's adrenaline device, including the EpiPen®, Anapen®, Jext® or Neffy® device. This may save a life. If another student's adrenaline device is used in an anaphylaxis emergency, the school must notify the parents of the student whose device was used and immediately replace the device.

Where possible, schools should consider using the correctly dosed adrenaline device depending on the weight of the student. However, in an emergency if there is no other option available, any device should be administered to the student.

Communication Plan

This policy will be available on GKPS's website so that parents and other members of GKPS community can easily access information about GKPS's anaphylaxis management procedures. The parents and carers of students who are enrolled at GKPS and are identified as being at risk of anaphylaxis will also be provided with a copy of this policy.

- **GKPS** will be responsible for ensuring that a **Communication Plan** is developed to provide information to all staff, students and parents about anaphylaxis and GKPS's Anaphylaxis Management Policy.
- This will include the following practices:
- All **staff** will be briefed at least twice per year by a staff member who has up-to-date anaphylaxis management training on:
 - GKPS's anaphylaxis management policy
 - the causes, symptoms and treatment of anaphylaxis
 - the preventative strategies in place
 - the identities of students diagnosed at risk of anaphylaxis and where their medication is located
 - how to use an auto-injector pen
 - GKPS's first aid and emergency response procedures

- Volunteers, casual relief staff and external providers e.g. music support staff, will be informed of students at risk of anaphylaxis, GKPS's preventative strategies and the emergency procedures through clear display of anaphylaxis management plans in relevant classrooms.
- Educating class members about allergies, recognising symptoms and why they need to develop and follow class procedures that help to minimise the risk for a classmate that may be at risk of anaphylaxis.

These procedures should include:-

- discussion about allergies, who is affected and how all class members need to co-operate in helping to minimise the risk of an allergic reaction
- ensuring that all students are discouraged from sharing food with each other including food utensils and containers
- having regular discussions with students about the importance of washing hands, making sure that tables and surfaces are wiped down regularly and that students wash their hands after handling food
- developing a simple list of actions the class will take to ensure that the risk of an allergic reaction is minimised
- Notifying all **parents/guardians** of the prevalence of children who are anaphylactic and educating them through regular up to date information on anaphylaxis management and prevention through both school and grade communications.
- Informing **parents/guardians**, *in writing*, when a student in the class is at risk of Anaphylaxis, letting them know what the allergen is, e.g. nut products and encouraging those parents to provide other food items for lunch and snacks for their child during school time.
- Seeking *written parental permission* from parents for all children to participate in food-related activities e.g. tasting, cooking *prior* to the commencement of the activity. (Be aware of the possibility of hidden allergens in cooking and in Art and Science classes e.g. egg or milk cartons)

The principal is responsible for ensuring that all relevant staff, including casual relief staff, canteen staff and volunteers are aware of this policy and GKPS'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, their role in responding to an anaphylactic reaction and where required, the identity of students at risk.

The principal is also responsible for ensuring relevant staff are trained and briefed in anaphylaxis management, consistent with the Department's *Anaphylaxis Guidelines*.

Staff training

The principal will ensure that the following school staff are appropriately trained in anaphylaxis management:

- First Aid Officer
- School staff who conduct classes attended by students who are at risk of anaphylaxis
- School staff who conduct specialist classes, all canteen staff, admin staff, first aiders and any other member of school staff as required by the principal based on a risk assessment.
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Staff who are required to undertake training 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.

GKPS uses the following training course ASCIA eTraining course 22578 VIC.

[Note, for details about approved staff training modules, refer to chapter 5 of the [Anaphylaxis Guidelines](#)].

Staff are also required to attend a briefing on anaphylaxis management and this policy at least twice per year (with the first briefing to be held at the beginning of GKPS year), facilitated by a staff member who has successfully completed an anaphylaxis management course within the last 2 years including School Anaphylaxis Supervisor. Each briefing will address:

- this policy
- the causes, symptoms and treatment of anaphylaxis
- the identities of students with a medical condition that relates to allergies 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
- GKPS'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 GKPS for general use.

When a new student enrolls at GKPS 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.

The principal will ensure that while students at risk of anaphylaxis are under the care or supervision of GKPS outside of normal class activities, including in GKPS yard, at camps and excursions, or at special event days, there is a sufficient number of school staff present who have been trained in anaphylaxis management.

COMMUNICATION

this policy will be communicated to our school community in the following ways:

- Available publicly on our school's website
- Included in staff induction processes and staff training
- Discussed at staff briefings/meetings as required

FURTHER INFORMATION AND RESOURCES

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

EVALUATION

The First Aid Officer 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.

Policy last reviewed	[insert date]
Approved by	Principal
Next scheduled review date	[insert date – noting that this policy has a mandatory review cycle of 1 year]