

Dorset Primary School 5132 ANAPHYLAXIS POLICY

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.

PURPOSE:

To provide a safe and supportive environment in which students at risk of anaphylaxis can participate equally in all aspects of the student's schooling.

Students who have been diagnosed with an acute anaphylactic reaction to nominated allergen will require an EpiPen administered by a trained staff member.

BROAD AIMS:

1. To have the required number of qualified first aid people with training in recognition of an anaphylactic reaction and EpiPen administration. Annual training for staff to continue and a bi-annual "briefing" or update on policies and procedures.
2. Staff to be aware of those students who require EpiPen treatment in the event of an anaphylactic reaction.
3. Strategies to reduce risk of exposure to anaphylactic triggers to be discussed between students, staff (including canteen staff & CRT staff) and parents.
4. For trained staff to know the emergency procedure in the event of an anaphylactic reaction.
5. For student's at risk of anaphylaxis to have a signed (by a medical practitioner) ASCIA (Australasian Society of Clinical Immunology and Allergy) Action Plan for Anaphylaxis provided by their parent or guardian.
6. To provide EpiPen treatment to a student with a prescribed EpiPen in the event of an anaphylactic reaction.
7. School to have a communication plan to provide staff, students and parents information about anaphylaxis and the school's anaphylaxis management policy.
8. That an annual meeting takes place between parent/s/guardian and teaching staff to discuss and update the Action Plan for Anaphylaxis provided.
9. Annual Anaphylaxis Risk Management Checklist completion.

GUIDELINES:

- Each child diagnosed with a risk of anaphylaxis, will have a signed (by a medical practitioner) ASCIA (Australasian Society of Clinical Immunology and Allergy) Action Plan for Anaphylaxis, provided by their parent or guardian located in the school first aide room with the prescribed EpiPen.
- Each child with a diagnosed risk of anaphylaxis will have an alert card with an up to date photograph located on display in selected strategic positions, documenting the allergen risk and treatment.
- Each child with a diagnosed risk of anaphylaxis will have their name on a coloured alert card that is located in every teacher's first aid bag carried while on yard duty.
- The first aid coordinator will keep all information regarding students at risk up to date and annually review Anaphylaxis Management Plans.
- Consultation will occur between students, parents and staff via a communication plan to inform of strategies to reduce the risk of exposure to anaphylactic triggers including:
 - during classroom activities
 - during snack and lunch time
 - before and after school, in the yard and during breaks
 - for special events such as cooking, incursions, sports days and class parties
 - for excursions and camp

- The school will follow a communication plan to inform staff, students and parents about anaphylaxis and the school's policy.

PREVENTING ALLERGIC REACTIONS

- Each child with a diagnosed risk of anaphylaxis will have an alert card with a photograph located on display in the staff room, classroom and with EpiPen documenting the allergen risk.
- Each child with a diagnosed risk of anaphylaxis will have their name on a coloured alert card that is located in every teacher's first aid bag carried while on yard duty.
- Students will not be allowed to share food or snacks at any time.
- Staff will be made aware that sunscreens, play-doh and cooking oil may contain nut products.
- Staff will be made aware that bee, wasp and insect stings may cause allergic reactions in children.
- Staff will be made aware that eggs and some dairy products may cause allergic reactions in children.
- Classroom teachers of those children diagnosed with a risk of anaphylaxis will be aware of the risks during cooking sessions and will provide alternative ingredients.
- Hand washing for all staff and students will occur regularly, particularly after eating food or cooking.

INDIVIDUAL ANAPHYLAXIS MANAGEMENT PLAN

- The Principal of the school is responsible for ensuring that an individual anaphylaxis management plan is developed for any student who has been diagnosed by a medical practitioner as being at risk of anaphylaxis in consultation with the student's parents.
- The individual anaphylaxis management plan must be in place as soon as practicable after the student's enrolment.
- The individual anaphylaxis management plan must include:
 - a) Information about diagnosis including the allergy or allergies.
 - b) Strategies to minimise the risk of exposure to the allergen while the student is under the supervision of school staff, for in-school and off campus settings.
 - c) The name of the person responsible for implementing the strategies.
 - d) Information as to where student medication is stored.
 - e) The student's emergency contact details.
 - f) An emergency procedure plan provided by the parent that is signed by the medical practitioner including the student's photograph.
 - g) Requirement for the annual review of the individual management plan or more often if the student's medical condition changes or immediately after the student has an anaphylactic reaction at school.
- It is the responsibility of the parent to provide the emergency procedure plan, inform the school if the student's medical condition changes and to provide an up to date photograph of the student when the plan is reviewed annually.