



# Chilwell Primary School

*"Learning for Life"*

Gavan Welsh – Principal

No.2061

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## ANAPHYLAXIS POLICY & PROCESS

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### 1. Rationale:

Chilwell PS will comply fully with Ministerial Order 706 and associated Guidelines published and amended by the Department from time to time.

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 (e.g. 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 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/Anapen® autoinjector to the muscle of the outer mid thigh is the most effective first aid treatment for anaphylaxis.

### 2. Aims:

- 2.1. 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 student's schooling.
- 2.2. To raise awareness about anaphylaxis and the school's anaphylaxis management policy in the school community.
- 2.3. To engage with parents/carers of students at risk of anaphylaxis in assessing risks, developing risk minimisation strategies and management strategies for the student.
- 2.4. To ensure all staff have completed the ASCIA Anaphylaxis e-training and competency check (valid for 2 years)
- 2.5. To ensure that students with anaphylaxis have current Management and Action plans.
- 2.6. To ensure that two Anaphylaxis Briefing presentations are conducted annually.
- 2.7. To ensure that an updated checklist of all staff training and awards is kept.
- 2.8. To ensure the two staff are trained as School Anaphylaxis Supervisors.
- 2.9. To ensure all staff have completed ASCIA Anaphylaxis e-training for Victorian Schools followed by a competency check by the School anaphylaxis Supervisor.

### 3. Individual Anaphylaxis Management Plans:

- 3.1. The principal 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.
- 3.2. The individual anaphylaxis management plan will be in place as soon as practicable after the student enrolls and in place before their first day of school.
- 3.3. The individual anaphylaxis management plan will set 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.
- An emergency procedures plan (ASCIA Action Plan), provided by the parent, that:
  - sets out the emergency procedures to be taken in the event of an allergic reaction;
  - is signed by a medical practitioner who was treating the child on the date the practitioner signs the emergency procedures plan; and
  - includes an up to date photograph of the student.

3.4. The student's individual management plan will be reviewed, in consultation with the student's parents/ carers:

- annually, and as applicable,
- if the student's condition changes, or
- immediately after a student has an anaphylactic reaction at school.

3.5 It is the responsibility of the parent to provide:

- the emergency procedures plan (ASCIA Action Plan).
- Provide an updated photo for the ASCIA Action Plan when the Plan is provided to the School and when it is reviewed
- Inform the school in writing if their child's medical condition, insofar to allergy and the potential for anaphylactic reaction, changes and if relevant, provide an updated ASCIA Plan
- Provide the School with an Adrenaline Autoinjector that is current and not expired for the child

3.6 School Staff will then implement and monitor the student's Individual Anaphylaxis Plan.

#### **4. Communication Plan**

4.1. 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.

4.2. Steps taken if an anaphylactic reaction occurs:

##### 4.2.1. Classroom.

Class teacher to gauge appropriate action. Medication, EpiPen & Action Plan for each child is kept inside the classroom environment. Remove contaminate or the child from danger. Treat in accordance with their Individual Action plan. Contact office by phone, teacher or monitor. Office contacts ambulance, sends assistance with the school anaphylaxis kit from the first aid room to help monitor child or remove grade and contacts parents. Huntingdon street gates opened for ambulance access .All actions taken are to be recorded noting the times and medications given.

##### 4.1.2 Yard.

Each duty teacher has been trained. Each teacher carries a first aid bag which has pictures of affected children together with name and grade.

If a reaction occurs contact is made with office via mobile phones, another staff member or a responsible student. Teacher to stay with the child at all times. Move child to First Aid room if it safe to do so.

School Anaphylaxis Kit and Student Action Plan is taken from the first aid room by the First Aid duty teacher to the student while another teacher retrieves the student's Anaphylaxis Bag from the student's classroom and takes it to the student.

Treat according to the Individual Action Plan. Medication plus EpiPen may be administered if required. All actions need to be recorded accurately.

Office contacts ambulance and parents. Ambulance access via Huntington street gates or back lane gates depending on the location of the student.

A review of procedures will be conducted after the incident and any counselling will be provided if necessary.

#### 4.1.3 Specialists

Contact made by phone, another teacher or responsible student to office and homeroom teacher. Stay with the child at all times. Remove the child from any triggers if required.

Support teachers to remove rest of student from the scene.

Student Anaphylaxis Medication and plan brought from classroom and School Anaphylaxis kit brought from First Aid Room.

Office staff to contact emergency services and parents.

#### 4.1.4 Camps/Excursions. Child's EpiPen/Anapen, medications and management plans to be taken on all camps/excursions. Grade teacher to carry pens and have these children in their groups, if necessary. If a reaction occurs :

- Follow management plan
- EpiPen/Anapen administered if needed
- Contact ambulance
- Teacher stays with child to monitor
- Contact school or venue administration.

#### 4.1.5 Casual Relief Teachers.

Where possible CRT's at Chilwell are few in number and are therefore aware of issues. Classroom teacher to leave this policy out as part of the planning left for CRT. Areas of concern highlighted ie. classroom, yard and location of EpiPen/Anapen indicated.

#### 4.1.6 Out of School Hours Care

All staff will be briefed once 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 of anaphylaxis
- the identities of students diagnosed at risk of anaphylaxis and where their medication is located
- how to use an autoadrenaline injecting device
- the school's first aid and emergency response procedures
- ensure staff have completed the ASCIA Anaphylaxis e-training and verification.

## **5 Staff Training and Emergency Response**

5.1 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. (ASCIA anaphylaxis e-training Vic).

- 5.2 At other times while the student is under the care or supervision of the school, including excursions, yard duty, camps and special event days, the principal must ensure that there is a sufficient number of staff present who have up to date training in an anaphylaxis management training course.
- 5.3 The principal will identify the two school staff to be trained as Supervisors who will ensure that all school staff have successfully completed an ASCIA Anaphylaxis e Training Course in the two years prior.
- 5.4 Staff will undergo annual training including briefings at least twice per calendar year.
- 5.5 The school's first aid procedures and students emergency procedures plan (ASCIA Action Plan) will be followed in responding to an anaphylactic reaction.
- 5.6 Chilwell has its own Anaphylaxis kit which contains adrenaline autoinjectors. This is kept in the first aid room. It also contains first response medication ie. Antihistamine.

## **6 Annual Risk Management Checklist**

- 6.1 The Principal will complete an annual Risk Management Checklist as published by the Department of Education and Early Childhood Development to monitor compliance with their obligations.

## **7 Ratified:**

This policy has been ratified by School Council - October 2016.

Review: Annually