



Anaphylaxis Management

Introduction

Corpus Christi Primary School is committed to providing, as far as is practicable, a safe, supportive environment, in which students at risk of anaphylaxis, can participate equally in all aspects of their education. The school is also committed to the provision of competent and prompt emergency care, to ensure the health and optimum outcome for all students who may experience an anaphylactic reaction, whether on or off the school's campus. The key prevention of anaphylaxis in school is the knowledge of students who are at risk, awareness of triggers (allergens) and prevention of exposure to these allergens.

This anaphylaxis policy & supporting guidelines are modelled on the Department of Education and Training's 'Anaphylaxis Guidelines', Victorian Government legislation, Ministerial Order 706 Anaphylaxis Management in Victorian Schools effective 22 April 2014.

Mission Statement as directed in Ministerial Order 706:

Corpus Christi Primary School will comply with the order and guidelines on Anaphylaxis Management as directed by Ministerial Order 706, effective 22 April 2014.

In the event of an anaphylactic reaction, Corpus Christi Primary School's first aid and emergency response procedures and the student's Individual Anaphylaxis Management Plan must be followed.

Purpose

The purpose of the school's policy & supporting guidelines is to:

- » Ensure that the school can assist parents in the management of their child's allergy;
- » Encourage preventative measures to minimise the risk of and promote awareness of anaphylaxis;
- » Provide resources and training for staff in recognizing and responding appropriately to an anaphylactic reaction;
- » Ensure an emergency response strategy is designed and implemented within the school.

Scope

These guidelines apply to all Corpus Christi Primary School sites and to all staff members, non-teaching staff, casual relief teachers and contractors whilst performing duties on behalf of the school.

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 (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, the awareness of triggers (allergens), and prevention of exposure to these triggers.

Adrenaline given through an EPIPEN, auto-injector to the muscle of the outer mid-thigh is the most effective first aid treatment for anaphylaxis.

Responsibilities of Parents & Guardians

Parents and guardians are responsible for ensuring that health information provided to the School is up to date and reviewed regularly to ensure that the accuracy of this information is maintained.

Parents & guardians must notify the school upon enrolment or, as soon as they are aware, that their child has a severe allergy. A comprehensive Anaphylaxis Management Plan, completed by their attending medical practitioner or allergy specialist, must also be submitted upon enrolment or, as soon as they are aware, that their child has a severe allergy.

The Anaphylaxis Management Plan, must be in the regulation Australasian Society of Clinical Immunology and Allergy (ASCIA) colour and, must include an up-to-date photo of the student and clearly state what the child is allergic to and what medication should be administered if an anaphylactic reaction occurs (the Action Plan).

- » Personal Use - ASCIA Action Plan for Anaphylaxis for use with EpiPen (Red);
- » Personal Use - ASCIA Action Plan for Anaphylaxis (personal) for use with Anapen (Red);
- » ASCIA Action Plan for Allergic Reactions (personal) for use when no adrenaline autoinjector has been prescribed (Green).

The Anaphylaxis Management Plan must be completed by the attending doctor and supplied to the school by the parents & guardians:

- » Annually, at the beginning of the school year;
- » At any time the medical management of the allergy is changed;
- » Immediately after a student has an anaphylactic reaction at school;
- » If a student is wishing to travel overseas or interstate as part of a school excursion or camp.

Parents & guardians must ensure that a current photo of their child is attached to the Anaphylaxis Management Plans. The School will ensure that they are made aware that their child's Anaphylaxis Management Plan and accompanying photo will be displayed at various locations throughout the School for the sole purpose of informing all staff members of the allergy & to assist in an emergency response. Photos are displayed on the 'Allergy Buddy' Medical Panel in the staff room and a photo board will be displayed in the Office and First Aid Room to alert staff of all students who have the severe allergy of Anaphylaxis.

Parents & guardians are responsible for providing to the school 1 x (in date) EPIPEN auto-injector and any antihistamine that has been prescribed by the attending medical practitioner and described on the child's Anaphylaxis Management Plan. The school will also maintain an EPIPEN auto-injector for general use.

Parents & guardians are responsible for supplying EPIPENS with a pharmacy label particular to their child and used for that child only.

Parents & guardians are also responsible for supplying alternative food options for the student if necessary to eliminate any risk.

Parents & guardians must ensure that information about any changes to the student's Anaphylaxis Management and emergency contact details must be provided to the school as soon as they become aware of these.

Responsibilities of the School – Prevention Strategies

Members of the Leadership Team will ensure that an Anaphylaxis Management Plan for each student diagnosed with anaphylaxis or allergies, is developed in consultation with the student's parents or guardians and their attending medical practitioner.

A Communication Plan will be developed to ensure that all staff members, non-teaching staff & casual relief teachers are aware of every student with anaphylaxis and severe allergies and ensure that they understand the requirements of individual Management Plans of each of the students under their care.

Members of the Leadership Team will ensure that Anaphylaxis Management Plans are current and displayed at various locations throughout the School for the sole purpose of informing all staff members of the allergy & to assist in an emergency response.

Members of the Leadership Team will ensure that care and diligence applies at other times while the student is under the care or supervision of the school in the following settings:

- » School excursions
- » School camps
- » School yard
- » Special event days conducted or organised by the school
- » Sport days.

Staff Training – Prevention Strategies

Members of the Leadership Team will take responsibility for arranging the comprehensive education of all staff members & non-teaching staff in the Management of Anaphylaxis, (as set out below) and the education of all students for in-school and out-of-school settings.

All staff members & non-teaching staff will undergo and hold current accredited Anaphylaxis Management Certificates, which is renewed on its expiration every 3 years. It is preferred that all causal relief teachers also hold this accreditation.

In accordance with Ministerial Order 706 compulsory regular bi -annual updates for school staff in recognising and responding appropriately to an anaphylactic reaction will be conducted by a competent member of the school's Leadership Team, or nominated representative, including competently administering an EPIPEN.

EPIPENS

Corpus Christi Primary School will provide an appropriate number of Generic EPIPENS, in accordance with Ministerial Order 706, which should provide sufficient back up for students' prescribed with EPIPENS in any anaphylaxis emergency.

These EPIPENS are located in detachable, fully insulated individual pouches, on the Allergy Buddy Medical Panel on the staff room wall so that they are readily accessible to all members of the Leadership Team, staff members & non-teaching staff at all times.

Additional generic EPIPENS will also be located in detachable, fully insulated individual pouches, on the Allergy Buddy Medical Panel on the staff room wall and will be available for distribution to staff members instructing a sporting team or attending an excursion or for emergency use on School Camps as a back- up EPIPEN.

Staff members are responsible for the safe transport and administration of EPIPENS on excursions.

An EPIPEN register is kept in the First Aid Room recording all students with EPIPENS, its strength and expiry date.

Members of the Leadership Team will regularly check the expiry date on all EPIPENS and advise parents when their child's EPIPEN is due to expire. A new EPIPEN must be provided by the expiry date and if this does not occur and parents have been notified on a number of occasions, it may be necessary to exclude the child from attending school until current medication is supplied.

Emergency Response

Corpus Christi Primary School has developed an emergency response procedure to ensure an immediate response in the case of a student suffering an anaphylactic or allergic reaction. This emergency response procedure is detailed within the school's emergency management plan & is displayed in the Staffroom and First Aid Room.

All staff members, non-teaching staff and casual relief teachers are made aware and reminded of the Emergency Response Procedures listed below bi-annually.

The emergency response procedure is as follows:

- » Anaphylaxis Management Plans are displayed in prominent locations around the school. Staff members in the care of students with Anaphylaxis Management Plans are provided with copies and these are to be kept in their induction folder as well as with the class roll and emergency response holder. Specialist teachers also maintain copies of Anaphylaxis Management Plans for all students in their care. These are located in their induction folder.
- » Cards with the student's photo, allergy, name, class and emergency contact phone numbers are kept in bum bags used by staff members who conduct yard duty and on the individual pouches from the Allergy Buddy Medical Panel used for sporting events and excursions.

Onsite

In the case of an anaphylactic or allergic reaction these cards are to be sent with a runner to the Staffroom (during recess & lunchtime) or Front Office (all other times). In case of severe reaction, ideally, FOUR (4) people are needed-

- The person who has found the child, stays with the child and uses the cordless, mobile, class phone or alert card system to attain and administer the EpiPen
- The responding staff member will access the affected student's pen, a mobile phone or cordless phone (located adjacent to Allergy Buddy) and return to the incident site. This person calls the ambulance and stays on the phone with the dispatcher until the ambulance arrives to report accurate information to the ambulance officers (including the condition of the child).
- In the meantime, office/admin staff (or teachers not in the act of teaching) should be alerted and one instructed to wait at the front of the school to direct the ambulance
- A second office/admin staff (or teacher not in the act of teaching) should contact the parents to inform them of the event, the condition of their child and actions taken;

The student **MUST NOT BE MOVED**. 'Lay the person flat. Do not allow them to stand or walk. If breathing is difficult allow them to sit.'

Offsite

The emergency response procedure for excursions, camps, sporting events or other 'off-site' activities, where there is no designated first aid station manned by school staff, is as follows:

- At risk students are to remain with their teacher (who is trained in the recognition of anaphylaxis and the administration of the Adrenaline Autoinjector) during field trips, excursions and sporting events
- The Adrenaline Autoinjector (as well as a back-up generic Adrenaline Autoinjector) and a copy of the Individual Anaphylaxis Management Plan for each student at risk of anaphylaxis will be carried by the at risk child's teacher in the Allergy Buddy individual pouch. An operational mobile phone must also be taken
- » The Teacher will administer the EPIPEN
- » An ambulance must be phoned for immediately. If the area is remote, staff members are required to follow instructions from emergency services to ensure efficient access to the student;

- » Contact must then be made with the parents/guardian to inform them of the event, the condition of their child and actions taken;
- » Contact must then be made with School Principal/Deputy Principal (or person in charge) to inform them of the event, the condition of the child and actions taken;
- » A staff member must remain with the student at all times, until a parent or guardian arrives at the hospital
- » Staff members will inform other students in their care of the event, keeping them calm, whilst providing appropriate counselling and debriefing.

For whole school offsite activities where we remain within a common area the emergency response procedure would be as if we would be at school. The alert would be sent to the designated manned station.

Communication Strategy

The following communication strategy has been developed to provide information to all staff members, students and parents about anaphylaxis and the school's anaphylaxis management. All staff members & non-teaching staff are to be provided with information on children who are at risk of anaphylactic or allergic reactions including a photographic summary of all students with an allergy.

All Casual Relief Teachers are made aware of any students in their care who may suffer from a anaphylactic or allergic reaction.

The communication strategy includes information about steps that will be taken to respond to an anaphylactic reaction by a student in the following school environments:

- » School excursions
- » School camps
- » School yard
- » Special event days conducted or organised by the school
- » Sport days

All staff members, non-teaching staff and others who are responsible for the care of students such as sporting coaches, must maintain current Anaphylaxis Management accreditation, and must ensure that at all times, they know where the student's individual EPIPEN and Anaphylaxis Management Plan is kept and have an emergency strategy in place to enact in the event of a anaphylactic or allergic reaction.

The communication strategy includes publication procedures, where all staff members & non-teaching staff are advised by members of the Leadership Team at a scheduled staff meeting and via e-mail of the students' individual Anaphylaxis Management Plans.

The communication strategy will also ensure that casual relief teachers & volunteers who are responsible for the students at risk of an anaphylactic or allergic reaction are adequately informed and understand their role in responding to an event by a student in their care.

All staff members & non-teaching staff will be made aware and reminded of the following at least twice a year:

- » The school's Anaphylaxis Management Policy;
- » The causes, symptoms and treatment of anaphylaxis;
- » The identities of students diagnosed who are at risk of anaphylaxis and the location of their medication;
- » How to use an adrenaline auto-injecting device,(EPIPEN) including hands on practise with a trainer adrenaline auto-injecting device;
- » The school's first aid and emergency response procedures.

In the event of an Anaphylactic Emergency, and in consideration for staff welfare, attending staff will be provided with appropriate post-emergency de-briefing, counselling and guidance as required and appropriate.

Risk Management Strategies

All attempts will be made to minimize the risk of an anaphylactic or allergic reaction by identifying offending allergens within the school environment.

The school has a 'no share/trade policy' for food in the classroom, school yard, for special events and 'out of school' settings (e.g. sports day or excursion).

A review of individual student's Anaphylaxis Management Plans must be conducted annually in consultation with parents/guardian & their attending doctor.

Additional Risk Management Strategies listed below will also be enacted:

Classrooms/Learning Areas	
1.	A copy of the student's Individual Anaphylaxis Management Plan will be displayed in the classroom. The ASCIA Action Plan will be easily accessible. The Adrenaline Autoinjector will be kept in the Allergy Buddy Medical Panel in the staffroom.
2.	Children can participate in cooking and experimenting with food however extra precaution should be taken: <ul style="list-style-type: none"> » Parents need to approve all ingredients (foods can be hidden or listed under different names) » The use of some foods in cooking experiments may need to be restricted depending on the allergies of the children » A note will be sent home, informing parents of such activities and permission sought.
3.	Non-food treats are used where possible. Parents of students with a food allergy must provide a treat box (containing treats/goodies approved by them) for times of celebration: birthdays, awards, rewards etc. Treat boxes are to be clearly labelled and only handled by the student.
4.	Food from outside sources will not be given to a student who is at risk of anaphylaxis and unless there is parent approval.
5.	Treats for the other students in the class should not contain the substance to which the student is allergic. It is recommended to use non-food treats where possible.
6.	Products labelled 'may contain traces of nuts' should not be served to students allergic to nuts. Products labelled 'may contain milk or egg' should not be served to students with milk or egg allergy and so forth.
7.	Be aware of the possibility of hidden allergens in food and other substances used in cooking, food technology, science and art classes (e.g. egg or milk cartons, empty peanut butter jars). The use & reuse of boxes or cartons that have contained offending food products e.g. nut based cereal boxes, egg cartons, milk cartons, play-dough etc. is to be avoided.
8.	Ensure all cooking utensils, preparation dishes, plates, and knives and forks etc are washed and cleaned thoroughly after preparation of food and cooking.
9.	Tables/benches should be cleaned thoroughly after meals or food preparation/consumption.
10.	Staff will have regular discussions with students about the importance of washing hands, eating their own food and not sharing/trading food.
11.	At risk students must have all food containers/drink bottles clearly labelled.

12. A Deputy Principal will inform casual relief teachers, specialist teachers and volunteers of the names of any students at risk of anaphylaxis, the location of each student's Individual Anaphylaxis Management Plan and Adrenaline Autoinjector, the School's Anaphylaxis Management Policy, and each individual person's responsibility in managing an incident. i.e. seeking a trained staff member.

Yard

1. All School Staff on yard duty will be trained in the administration of the Adrenaline Autoinjector (i.e. EpiPen®/ Anapen®) to be able to respond quickly to an anaphylactic reaction if needed.
2. The Adrenaline Autoinjector and each student's Individual Anaphylaxis Management Plan are easily accessible from the yard - Located on the Allergy Buddy Medical Panel located in the staffroom.
3. A Communication Plan in place so the student's medical information and medication can be retrieved quickly if a reaction occurs in the yard. All yard duty staff carry emergency cards in yard-duty bags as well as a cordless phone. All staff on yard duty are to be aware of the School's Emergency Response Procedures and how to notify the general office/first aid team of an anaphylactic reaction in the yard.
4. Yard duty staff must also be able to identify, by face, those students at risk of anaphylaxis.
5. In the Lunch area, at risk students only to handle their own containers and waste. All containers/drink bottles must be clearly labelled. These students are NOT to place their lunchboxes in class tubs.
6. There will be regular cleaning of the lunch area. All waste will be disposed of correctly and gloves supplied
7. Students with anaphylactic responses to insects should be encouraged to stay away from water or flowering plants. School Staff should liaise with Parents to encourage students to wear long-sleeved garments when outdoors.
8. Lawns and clover are to be mowed and outdoor bins covered.
7. Students should keep drinks and food covered while outdoors.

Special events (e.g. sporting events, incursions, class parties, etc.)

1. School Staff supervising the special events must be trained in the administration of an Adrenaline Autoinjector to be able to respond quickly to an anaphylactic reaction if required.
2. School Staff should avoid using food in activities or games, including as rewards.
3. For special occasions, Parents need to approve all ingredients (foods can be hidden or listed under different names). The use of some foods in cooking experiments may need to be restricted depending on the allergies of the children.

A note will be sent home, informing parents of such activities and permission sought. Alternatively, School Staff could consult Parents in advance to either develop an alternative food menu or request the Parents to send a meal for the student.
4. Parents of other students should be informed in advance about foods that may cause allergic reactions in students at risk of anaphylaxis and request that they avoid providing students with treats whilst they are at School or at a special School event.
5. Party balloons should not be used if any student is allergic to latex.

Field trips/excursions/sporting events

1. If a School has a student at risk of anaphylaxis, sufficient School Staff supervising the special event must be trained in the administration of an Adrenaline Autoinjector and be able to respond quickly to an anaphylactic reaction if required.
2. At risk students are to remain with their teacher (who is trained in the recognition of anaphylaxis and the administration of the Adrenaline Autoinjector) during field trips, excursions and sporting events.
3. School Staff should avoid using food in activities or games, including as rewards.
4. The Adrenaline Autoinjector (as well as a back-up generic Adrenaline Autoinjector) and a copy of the Individual Anaphylaxis Management Plan for each student at risk of anaphylaxis will be carried by the at risk child's teacher in the Allergy Buddy individual pouch. An operational mobile phone must also be taken.
5. For each field trip, excursion etc., a risk assessment should be undertaken for each individual student attending who is at risk of anaphylaxis. The risks may vary according to the number of anaphylactic students attending, the nature of the excursion/sporting event, size of venue, distance from medical assistance, the structure of excursion and corresponding staff-student ratio.

All School Staff members present during the field trip or excursion need to be aware of the identity of any students attending who are at risk of anaphylaxis and be able to identify them by face.
6. The School should consult Parents of anaphylactic students in advance to discuss issues that may arise; to develop an alternative food menu; or request the Parents provide a meal (if required).
7. Parents may wish to accompany their child on field trips and/or excursions. This should be discussed with Parents as another strategy for supporting the student who is at risk of anaphylaxis.
8. Prior to the excursion taking place School Staff should consult with the student's Parents and Medical Practitioner (if necessary) to review the student's Individual Anaphylaxis Management Plan to ensure that it is up to date and relevant to the particular excursion activity.

Camps and remote settings

1. Prior to engaging a camp owner/operator's services the School will make enquiries as to whether it can provide food that is safe for anaphylactic students. If a camp owner/operator cannot provide this confirmation to the School, then the School should consider using an alternative service provider.
2. The camp cook should be able to demonstrate satisfactory training in food allergen management and its implications on food-handling practices, including knowledge of the major food allergens triggering anaphylaxis, cross-contamination issues specific to food allergy, label reading, etc.
3. Our school will not sign any written disclaimer or statement from a camp owner/operator that indicates that the owner/operator is unable to provide food which is safe for students at risk of anaphylaxis. Schools have a duty of care to protect students in their care from reasonably foreseeable injury and this duty cannot be delegated to any third party.
4. Our School will conduct a risk assessment and develop a risk management strategy for students at risk of anaphylaxis. This should be developed in consultation with Parents of students at risk of anaphylaxis and camp owners/operators prior to the camp dates.
5. School Staff will consult with Parents of students at risk of anaphylaxis and the camp owner/operator to ensure that appropriate risk minimisation and prevention strategies and processes are in place to address an anaphylactic reaction should it occur. **If these procedures are deemed to be inadequate, further discussions, planning and implementation will need to be undertaken.**
6. If our school has concerns about whether the food provided on a camp will be safe for students at risk of anaphylaxis, we should also consider alternative means for providing food for those students.

7.	Use of substances containing allergens should be avoided where possible.
8.	Camps should avoid stocking peanut or tree nut products, including nut spreads. Products that 'may contain' traces of nuts may be served, but not to students who are known to be allergic to nuts.
9.	The student's Adrenaline Autoinjector (and back-up generic Adrenaline Autoinjector), Individual Anaphylaxis Management Plan, including the ASCIA Action Plan for Anaphylaxis and a mobile phone must be taken on camp.
10.	Prior to the camp taking place School Staff should consult with the student's Parents to review the students Individual Anaphylaxis Management Plan to ensure that it is up to date and relevant to the circumstances of the particular camp.
11.	School Staff participating in the camp should be clear about their roles and responsibilities in the event of an anaphylactic reaction. Check the emergency response procedures that the camp provider has in place. Ensure that these are sufficient in the event of an anaphylactic reaction and ensure all School Staff participating in the camp are clear about their roles and responsibilities.
12.	Contact local emergency services and hospitals well prior to the camp. Advise full medical conditions of students at risk, location of camp and location of any off camp activities. Ensure contact details of emergency services are distributed to all School Staff as part of the emergency response procedures developed for the camp.
13.	The Adrenaline Autoinjector should remain close to the student and School Staff must be aware of its location at all times.
14.	The Adrenaline Autoinjector will be carried by the teacher in the Allergy Buddy Individual Pouch and taken to all activities. The back-up Generic Adrenaline Autoinjector will remain in the first aid kit. Remember that all School Staff members still have a duty of care towards the student even if they do carry their own Adrenaline Autoinjector.
15.	Students with anaphylactic responses to insects should always wear closed shoes and long-sleeved garments when outdoors and should be encouraged to stay away from water or flowering plants.
16.	Cooking and art and craft games should not involve the use of known allergens.

Annual Anaphylaxis Risk Management Checklists

In accordance with requirements of Ministerial Order 706, Corpus Christi Primary School will conduct an annual Anaphylaxis Risk Management Checklist to ensure that all aspects of its Anaphylaxis Management policy & procedure have been implemented. Gaps identified as a result of completing the Anaphylaxis Risk Management Checklist, will be brought to the Leadership Team's attention immediately, where appropriate actions will be assigned and entered into the School's Compliance Register.

Refer to the School's Anaphylaxis Risk Management Checklist, located within it Occupational, Health & Safety Management System.

Evaluation:

This policy will be reviewed as part of the school's review cycle.

This Policy was last ratified in July 2014.