ANAPHYLAXIS
POLICY

Rationale:
- Anaphylaxis is an acute allergic reaction to certain food items and insect stings. The condition develops in approximately 1-2% of the population. The most common allergens are nuts, eggs, cow’s milk and bee or other insect stings, and some medications. It can be life threatening and research indicates it is becoming more prevalent.

Aims:
- To provide a safe and healthy school environment that takes into consideration the needs of all students, including those who may suffer from anaphylaxis.

Implementation:
- Anaphylaxis is a severe and potentially life-threatening reaction to various foods or insect stings.
- Signs and symptoms of anaphylaxis include hives/rash, tingling in or around the mouth, abdominal pain, vomiting or diarrhoea, facial swelling, cough or wheeze, difficulty breathing or swallowing, loss of consciousness or collapse, or cessation of breathing.
- Anaphylaxis is best prevented by knowing and avoiding the allergens.
- Our school will manage anaphylaxis consistent with Ministerial Order 706 by:
  - providing e-training as required for all staff on anaphylaxis management, and briefings twice yearly on anaphylaxis including the administering of an adrenaline auto-injector such as an EpiPen or an Anapen.
  - informing the community about anaphylaxis via a communication plan
  - informing students about allergies, including anaphylaxis causes and first aid, as part of the prep-6 curriculum.
  - not allowing food sharing, and restricting food to that approved by parents
  - keeping the lawns well mown, ensuring children always wear shoes, and not allowing drink cans at school.
  - identifying susceptible students and knowing their allergens
  - requiring parents to provide an ASCIA emergency management plan developed by a health professional and an auto-injector if necessary, both of which will be maintained in the first aid room for reference as required. First aid staff will contact parents if the Use-By date of the injector is close to expiration.
  - All ASCIA Anaphylaxis Action Response Posters will be displayed in the first aid room as appropriate.
  - Individual kits will be made for identified students so as to be immediately available in the case of an anaphylactic reaction. These kits will accompany students on excursions and camps.
  - We will maintain open communication with parents.
- The school won’t ban certain types of foods (eg: nuts) as it is not practicable to do so, and is not a strategy recommended by the Department of Education or the Royal Children’s Hospital. However, the school will request that parents do not send those items to school if at all possible; that the canteen eliminate or reduce the likelihood of such allergens, and the school will reinforce the rules about not sharing food, and not eating foods that parents have not provided or consented to.

Evaluation:
This policy will be reviewed as part of the school’s three-year review cycle, or as required due to changes in relevant Acts, Laws or should situations arise that require earlier consideration

This policy was last ratified by School Council in October 2016

St Johns Ambulance Victoria – 8588 8391
ANAPHYLAXIS RISK MANAGEMENT CHECKLIST

School Name

Address:

Date of Review: Time:

School Contact Person: Name:
(Who provided information collected)

Position:

Review given to: Name:
(If different from above)

Position:

Comments:

1. How many current students are diagnosed with anaphylaxis?...............................

2. Have any students ever had an allergic reaction while at school?
   If Yes, how many times? YES ○ NO ○

3. Have any students had an Anaphylactic Reaction at school?
   If Yes, how many times? YES ○ NO ○

4. Has a staff member been required to administer an EpiPen® to a student?
   If yes, how many times? YES ○ NO ○

St Johns Ambulance Victoria – 8588 8391
ANAPHYLAXIS RISK MANAGEMENT CHECKLIST

Section 1 Anaphylaxis management Plans and ASCIA Action Plans

1. Does every student who has been diagnosed at risk of anaphylaxis have an individual Anaphylaxis Management Plan in place? (see Section 4.1 and Appendix 1, Anaphylaxis Guidelines)?
   - YES ☐ NO ☐

2. Are all Anaphylaxis Management Plans reviewed regularly with parents (at least annually)?
   - YES ☐ NO ☐

2. Do they set out strategies to minimise the risk of exposure to allergens for in-school and out of class settings? During classroom activities, including elective classes
   - YES ☐ NO ☐
   - In canteens or during lunch or snack times
   - YES ☐ NO ☐
   - Before and after school, in the school yard and during breaks
   - YES ☐ NO ☐
   - For special events, such as excursions, sport days, class parties and extra curricular activities?
   - YES ☐ NO ☐
   - For excursions and camps
   - YES ☐ NO ☐
   - Other

4. Do all students who suffer from anaphylaxis have a copy of their ASCIA Action Plan kept at school (provided by the parent)?
   - YES ☐ NO ☐

5. Where are they kept?.................................

6. Do the anaphylaxis action plans have a recent photo of the student with them?
   - YES ☐ NO ☐

Comments

Section 2 Storage and accessibility of the EpiPen

1. Where are the students EpiPen's Stored?

2. How are the EpiPens stored?

3. Is the storage safe (out of reach of students)?
   - YES ☐ NO ☐
   - Is the storage unlocked and accessible to staff at all times?
   - YES ☐ NO ☐

Comments

Is the EpiPen easy to find?
   - YES ☐ NO ☐

Comments

4. Is a copy of students’ ASCIA Action Plans kept together with their EpiPen?
   - YES ☐ NO ☐

Comments

5. Are EpiPen’s and Action Plans clearly labelled with students’ names?
   - YES ☐ NO ☐

Comments

6. Has someone been designated to check the EpiPen’s expiry dates on regular basis?
   - YES ☐ NO ☐

Who?.........................................................................................................................

St Johns Ambulance Victoria – 8588 8391
Comments

7. Has the College signed up to EpiClub (a free reminder service)?
   YES ☐ NO ☐

8. Do all staff know where the EpiPens® and Action Plans are Stored?
   YES ☐ NO ☐

9. Is there a spare EpiPen®?
   If Yes, what Type? ...........................................................................................................
   YES ☐ NO ☐

10. Where is it stored?
    11. Is it clearly labelled as the ‘backup EpiPen®’?
        YES ☐ NO ☐

Section 3 Prevention Strategies

1. Have you done a risk assessment of the potential for accidental exposure to allergens for a student with anaphylaxis?
   YES ☐ NO ☐

2. Has the school implemented any of the prevention strategies (in Appendix 2 of the Guidelines)?
   YES ☐ NO ☐

3. Which ones?

4. Others:

5. Is there always a trained staff member on yard duty?
   YES ☐ NO ☐

6. How many staff have completed training? ..................................................

Section 4 Training and Emergency Response

1. Have all staff responsible for the care of students with anaphylaxis been trained?
   YES ☐ NO ☐

1. When does their training need to be renewed? ...........................................................

3. Do all staff have an understanding of the causes, signs and symptoms of anaphylaxis and of their role in the school’s first aid and emergency response procedures?
   YES ☐ NO ☐

4. Have you planned how the alarm will be raised if an allergic reaction occurs?

   In the class room?
   YES ☐ NO ☐

   How?

   In the school yard?
   YES ☐ NO ☐

   How?

   At school camps and excursions?
   YES ☐ NO ☐

   How?

   On special event days, such as sports days?
   YES ☐ NO ☐

   How?

5. Does your plan include who will call the Ambulance?
   YES ☐ NO ☐

6. In an emergency is there a plan for who will be sent to collect the EpiPen® and Action Plan?
   Who will this be when in the class room? .........................................................................
   YES ☐ NO ☐

   Who will this be when in the school yard? ......................................................................
   YES ☐ NO ☐

   Who will this be at sporting activities? ..........................................................................
   YES ☐ NO ☐

7. Have you checked how long it will take to get to the EpiPen® and Action Plan to a student from various areas of the school?
   YES ☐ NO ☐

   How long? ..................................................

   When in the class room?
   YES ☐ NO ☐

   How long? ..................................................

   When in the school yard?
   YES ☐ NO ☐
Section 5: Communicating with staff, students and parents / carers

1. Is there a communication plan in place to provide information about anaphylaxis and the school’s policies to staff, students and parents/carers?  
   YES ☐ NO ☐

2. Are there procedures in place for informing casual relief teachers of students at risk of anaphylaxis and the steps required for prevention and emergency response?  
   Comments

   2.  Do all staff know which students suffer from anaphylaxis?  
      Comments

   How is this information kept up to date?

4. Are there strategies in place to increase awareness about severe allergies among students?  
   Comments

How long.................................
When at sports fields? YES ☐ NO ☐
How long?.................................

8. On excursions or other out of school event is there a plan for who will look after the EpiPen® and Action Plan? YES ☐ NO ☐
Who will do this on excursions?.........................
Who will do this on camps?.........................
Who will do this on sporting activities?.........................

9. Is there a process for post incident support in place? YES ☐ NO ☐

10. Have all staff been briefed on:-
   the school’s Anaphylaxis Management Policy? YES ☐ NO ☐
   the causes, symptoms and treatments of anaphylaxis? YES ☐ NO ☐
   the identities of students diagnosed at risk of anaphylaxis and where their medication is located? YES ☐ NO ☐
   how to use an adrenaline auto-injecting device, including hands on practice with a trainer adrenaline auto-injecting device YES ☐ NO ☐
   the school’s first aid and emergency response procedures YES ☐ NO ☐
**Anaphylaxis Management Plan**

**Cover Sheet**
This Plan is to be completed by the principal or nominee on the basis of information from the student's medical practitioner provided by the parent/carer.

<table>
<thead>
<tr>
<th>PRIMARY SCHOOL</th>
<th>Phone Number</th>
<th>Student's name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of birth:</td>
<td></td>
<td>Year level:</td>
</tr>
<tr>
<td>Severely allergic to:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other health conditions:</td>
<td></td>
<td></td>
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<tr>
<td>Medication at school:</td>
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<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Parent/carer contact:</th>
<th>Parent/carer information (1)</th>
<th>Parent/carer information (2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name:</td>
<td>Name:</td>
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<tr>
<td>Relationship:</td>
<td>Relationship:</td>
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<td>Home phone:</td>
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<td>Work phone:</td>
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<td>Mobile:</td>
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<td>Address:</td>
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</tbody>
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Other emergency contacts (if parent/carer not available):
Medical practitioner contact:

Emergency care to be provided at school:

EpiPen® storage:

The following Anaphylaxis Management Plan has been developed with my knowledge and input and will be reviewed on

<table>
<thead>
<tr>
<th>Signature of parent:</th>
<th>Date:</th>
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<tr>
<th>Signature of principal (or nominee):</th>
<th>Date:</th>
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## Strategies To Avoid Allergens

<table>
<thead>
<tr>
<th>Student’s name:</th>
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<tbody>
<tr>
<td>Date of birth:</td>
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<tr>
<td>Year level:</td>
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<tr>
<td>Severe allergies:</td>
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</tbody>
</table>

Other known allergies:

<table>
<thead>
<tr>
<th>Risk</th>
<th>Strategy</th>
<th>Who?</th>
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