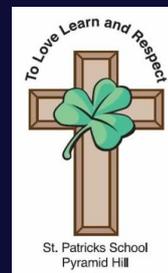


ST. PATRICK'S PRIMARY SCHOOL PYRAMID HILL



Anaphylaxis Policy 2019

Anaphylaxis is a severe and sudden allergic reaction when a person is exposed to an allergen. The most common allergens in children are eggs, peanuts, tree nuts (e.g. cashews), cow's milk, fish and shellfish, wheat, soy, certain insect stings and medications.

Anaphylaxis is a serious health issue for a percentage of the population and the Department recognises the key to preventing an anaphylactic reaction by a student is knowledge, awareness and planning.

Signs and Symptoms of Anaphylaxis include hives/rash, tingling in and around the mouth, abdominal pain, vomiting or diarrhoea, facial swelling, coughing or wheezing, difficulty breathing or swallowing, loss of consciousness or collapse, or cessation of breathing.

Adrenaline given through EpiPen auto injector to the muscle of the outer mid thigh is the most effective first aid treatment for Anaphylaxis.

St. Patrick's Primary School will fully comply with Ministerial Order 706 and the associated guidelines.
<http://www.education.vic.gov.au/school/principals/health/Pages/anaphylaxischools.aspx#link71>

Rationale:

All children have the right to feel safe and well, and know that they will be attended to with due care when in need of first aid.

Our aims are:

To provide as far as practicable a safe and supportive environment in which Learners at risk of anaphylaxis can participate equally in all aspects of the Learner's schooling.

To raise awareness about anaphylaxis and the school's anaphylaxis management policy in the school community.

To engage with parents of Learners at risk of anaphylaxis in assessing risks, developing risk minimization strategies and management strategies for the Learner.

To ensure that each staff member has adequate knowledge about allergies, anaphylaxis and the school's policies and procedures in responding to an anaphylactic reaction.

St. Patrick's Primary School will take all practical steps to provide a safe, healthy environment that takes into consideration the needs of all Learners, including those who may suffer from anaphylaxis.

Individual Anaphylaxis Management Plans:

The Principal will ensure that an Individual Anaphylaxis Management Plan is developed, in consultation with the Learner's parents/carers, for any Learner who has been diagnosed by a Medical Practitioner as being at risk of anaphylaxis.

The Individual Anaphylaxis Management Plan will be in place as soon as practicable after the Learner enrolls, and where possible before their first day of school.

The Individual Anaphylaxis Management Plan will set out the following:

information about the Learner's medical condition that relates to allergy and the potential for anaphylactic reaction, including the type of allergy/allergies the Learner has (based on a written diagnosis from a Medical Practitioner);

strategies to minimise the risk of exposure to known and notified allergens while the Learner is under the care or supervision of school staff, for in-school and out-of-school settings including in the school yard, at camps and excursions, or at special events conducted, organised or attended by the school;

the name of the person(s) responsible for implementing the strategies;

information on where the Learner's medication will be stored;

the Learner's emergency contact details; and

an ASCIA Action Plan.

Note: The red and blue 'ASCIA Action Plan for Anaphylaxis' is the recognised form for emergency procedure plans that is provided by Medical Practitioners to Parents when a child is diagnosed as being at risk of anaphylaxis. An example can be found in Appendix 3 of the Anaphylaxis Guidelines or downloaded from :

<http://www.education.vic.gov.au/school/teachers/health/Pages/anaphylaxisschl.aspx>

School Staff will then implement and monitor the Learner's Individual Anaphylaxis Management Plan.

The Learner's Individual Anaphylaxis Management Plan will be reviewed, in consultation with the Learner's parents:

annually;

if the Learner's medical condition, in so far as it relates to allergy and the potential for anaphylactic reaction, changes;

as soon as practicable after the Learner has an anaphylactic reaction at School; and

if deemed necessary, when the Learner is to participate in an off-site activity, such as camps and excursions, or at special events conducted, organised or attended by the School (eg. class parties, elective subjects, cultural days, fetes, incursions).

It is the responsibility of the Learner's parent/carer to;

provide the ASCIA Action Plan;

inform the School in writing if their child's medical condition, in so far as it relates to allergy and the potential for anaphylactic reaction, changes and if relevant, provide an updated ASCIA Action Plan;

provide an up to date photo for the ASCIA Action Plan when that Plan is provided to the School and when it is reviewed;

provide an Auto Injector device in situations where the Learner is able to self administer, ensuring that the device is within use by date.

Prevention Strategies:

At St. Patrick's Primary School, we aim to minimise the risk to our Learners of an anaphylaxis reaction by implementing prevention strategies;
during classroom activities (including class rotations, specialist and elective classes);
between classes and other breaks;
in the SAKG program;
during recess and lunch times;
before and after school; and
special events including incursions, sports, cultural days, fetes or class parties, excursions and camps.

At St. Patrick's Primary School there is a constant risk of Learners with a severe anaphylactic reaction. We seek to minimize the risk by educating families of food sources to avoid when packing Learners lunch boxes.

Reminders in the school newsletter will be published at the beginning of the school year and as deemed required. Learners will wash hands and wipe tables after eating.

School Management and Emergency Response:

School staff who work with Learners at risk of anaphylaxis must have up to date training in an anaphylaxis management.

At other times while the Learner 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.

The Principal will identify the school staff to be trained. Training will be provided to those staff as soon as practicable after the Learner enrolls. Wherever possible training will take place before the student's first day at school.

The school's first aid procedures and emergency (ASCIA Action Plan) will be followed in responding to a suspected anaphylactic reaction by a child with no known allergy.

The school will have:

a complete and up to date list of Learners identified as having a medical condition that relates to allergy and the potential for anaphylactic reaction;

details of Individual Anaphylaxis Management Plans and ASCIA Action Plans and where these can be located:

in a classroom, classroom corridor and kitchen

in the staff room and staff toilet area;

on school excursions;

on school camps; and

at special events conducted, organised or attended by the school.

Information about the storage and accessibility of Adrenaline Autoinjectors;

how communication with School Staff, Learners and Parents is to occur in accordance with a communications plan.

Adrenaline Autoinjectors for General Use

The Principal will purchase Adrenaline Autoinjector(s) for General Use (purchased by the School) and as a back up to those supplied by Parents.

The Principal will determine the number of additional Adrenaline Autoinjector(s) required. In doing so, the Principal will take into account the following relevant considerations:

The number of Learners enrolled at the School who have been diagnosed as being at risk of anaphylaxis; the accessibility of Adrenaline Autoinjectors that have been provided by Parents of Learners who have been diagnosed as being at risk of anaphylaxis;

the availability and sufficient supply of Adrenaline Autoinjectors for General Use in specified locations at the School, including

in the school yard, and at excursions, camps and special events conducted or organised by the School; and

the Adrenaline Autoinjectors for General Use have a limited life, usually expiring within 12-18 months, and will need to be replaced at the School's expense, either at the time of use or expiry, whichever is first.

Note: Adrenaline Autoinjectors for General Use are available for purchase at any chemist. No prescriptions are necessary.

'Learner Background Information' Communication

Our 'Confidential Learner Background Information' collation will inform staff of Learners with a medical condition that relates to allergy and the potential for anaphylactic reaction and their role in responding to an anaphylactic reaction by a Learner in their care. This will be updated annually prior to school commencement in Term One.

It is the responsibility of the Principal of the School to ensure that school staff are updated with this communication twice annually.

Staff Training

The following school staff will be appropriately trained:

School staff who conduct classes that Learners with a medical condition that relates to allergy and the potential for anaphylactic reaction; and

Any further school staff that are determined by the Principal.

The identified school staff will undertake the following training:

an Anaphylaxis Management Training Course in the three years prior;

Complete ASCIA Anaphylaxis online e-learning module

participate in a staff meeting, to occur twice per calendar year (with the first meeting to be held at the beginning of the school year) on:

the School's Anaphylaxis Management Policy;

the causes, symptoms and treatment of anaphylaxis;

the identities of the students with a medical condition that relates to an allergy and the potential for anaphylactic reaction, and where their medication is located;

how to use an Adrenaline Autoinjector, including hands on practise with a trainer Adrenaline Autoinjector device;

the School's general first aid and emergency response procedures; and

the location of, and access to, Adrenaline Autoinjector that have been provided by parents or purchased by the School for general use.

The meeting must be conducted by a member of school staff who has successfully completed an Anaphylaxis Management Training Course in the last 12 months.

In the event that the relevant training and briefing has not occurred, the Principal will develop an interim Individual Anaphylaxis Management Plan in consultation with the parents of any affected Learner with a medical condition that relates to allergy and the potential for anaphylactic reaction. Training will be provided to relevant school staff as soon as practicable after the Learner enrolls, and preferably before the Learner's first day at school.

The Principal will ensure that while the Learner is under the care or supervision of the school, including excursions, yard duty, camps and special event days, there is a sufficient number of school staff present who have successfully completed an Anaphylaxis Management Training Course in the three years prior.

Annual Risk Management Checklist

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.

Note: A template of the Risk Management Checklist can be found at Appendix 4 of the Anaphylaxis Guidelines for Victorian Schools or the Department's website:

<http://www.education.vic.gov.au/school/teachers/health/Pages/anaphylaxisschl.aspx>

an Individual Anaphylaxis Management Plan (that includes an individual ASCIA Action Plan for Anaphylaxis) for each affected Learner, developed in consultation with the Learner's parents/carers and medical practitioner.

information and guidance in relation to the school's management of anaphylaxis, including:

prevention strategies to be used by the school to minimise the risk of an anaphylactic reaction for in-school and out-of-school settings;

school management and emergency response procedures that can be followed when responding to an anaphylactic reaction;

the purchase of spare or 'backup' adrenaline auto-injection devices(s) as part of the school first aid kit(s), for general use;

development of a "Confidential Learner Background Information" to raise staff, Learner and school community awareness about severe allergies ;

regular training and updates for school staff in recognising and responding appropriately to an anaphylactic reaction, including competently administering an EpiPen/Anapen; and

completion of an Annual Anaphylaxis Risk Management Checklist.

Partnership between the school and parents is important in ensuring that certain foods or items are kept away from the Learner while at school.

References

Department of Education and Early Childhood Development

<http://www.education.vic.gov.au/healthwellbeing/health/anaphylaxis.htm>

Australian Society of Clinical Immunology and Allergy

<http://www.allergy.org.au/content/view/10/3/>

Related Legislation

Children's Services and Education Legislation (Anaphylaxis Management) Amendment Act 2008 (Vic) - 14 July 2008

Ministerial Order 90 Anaphylaxis Management in Schools – minimum standard for school registration under Part 1V of the Education and Training Reform Act

Evaluation:

We will monitor the implementation of this policy by;

Re-reading annually

Termly practice at scenarios involving staff and Learners

Created February 2019

Next Review 2020