Stockdale Road Primary School
ANAPHYLAXIS

Background:
Anaphylaxis is a severe allergic reaction that is potentially life threatening. It must be treated as a medical emergency, requiring immediate treatment and urgent medical attention. Anaphylaxis is an allergic reaction which often involves more than one body system – skin, respiratory, gastro-intestinal or cardiovascular. The most common allergens in school-aged children are peanuts, eggs, tree nuts (cashews), cow’s milk, fish, and shell fish, wheat soy, sesame, latex and certain insect stings. Reactions usually begin within minutes of exposure and can progress rapidly over a period of up to two hours or more. Fortunately anaphylactic reactions are uncommon and they are usually a preventable and treatable event. Adrenaline given through an EpiPen autoinjector to the muscle of the outer mid-thigh is the most effective first aid treatment for anaphylaxis.

Purpose:
The purpose of this document is:
• 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 schooling.
• to provide a supportive school environment that understands and responds to individual health needs.
• to raise awareness about anaphylaxis and the school’s anaphylaxis management policy in the school community.
• to engage with parents/carers of students at risk of anaphylaxis in assessing risks, developing risk minimisation strategies and management strategies for the student.
• to ensure that school staff has adequate knowledge about allergies, anaphylaxis and the school’s policy and procedures in responding to an anaphylactic reaction.

Responsibility of all members of the School Community:
Parents, students and teachers have an expectation that the environment at (Traralgon) Stockdale Road Primary School is a safe setting. They will work together to implement daily management strategies to minimise the risk of a reaction while a student or staff member is at school. The key to prevention of anaphylaxis 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/s while at school.
Responsibility of Parents and Carers:
• to inform the school of an anaphylaxis diagnosis and its causes for their child.
• to discuss strategies with the school.
• to provide up-to-date medical information of their child’s allergy.
• to provide an Anaphylaxis Action Plan – this includes the child’s photo, allergic triggers, signs and symptoms of a reaction and the first aid response / medication.
• to provide medication and/or an EpiPen and ensure it has not expired. This to be replaced during the year if and when needed.
• to inform the school if their child’s medical condition changes, and, if relevant provide an updated emergency procedures plan.
• to educate their child/ren on how to avoid food allergens and/or other triggers.
• to educate their child/ren to recognise the symptoms of anaphylaxis and seek aid.

Responsibility of Students:
• to seek aid when they recognise the symptoms of anaphylaxis.

Responsibility of Teachers and all School Staff:
• to work with parents to develop individual Anaphylaxis Management Plans for students diagnosed at risk of anaphylaxis.
• to know the students who are at risk of anaphylaxis.
• teachers and other school staff who conduct classes that students at risk of anaphylaxis attend, or give instruction to students at risk of anaphylaxis must have up-to-date training in anaphylaxis management.
• to be educated so they recognise the signs and symptoms of a severe allergic reaction.
• to be educated in the use of EpiPens and ways of preventing anaphylactic shock.
• know how to administer the single pre-measured dose of adrenaline via the auto injector called EpiPen.
• to act according to each child’s or staff member’s individualised Anaphylaxis Action Plan.
• to liaise regularly with parents.
• Casual relief staff of students at risk of anaphylaxis will be informed of the possible triggers for a reaction and the individual management plan.

Responsibility of the Principal:
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. The individual anaphylaxis management plan will be in place as soon as practicable after the student enrols, and where possible before their first day of school.

The school will have in place a communication plan to provide information to staff, students and parents about anaphylaxis and the school’s anaphylaxis management plan.

The student’s medication (medicine and/or EpiPen) to be clearly labelled with the student’s name, grade and room number as well as the medication expiry date. The medication and the Anaphylaxis Action Plan to be kept in an unlocked location in the First Aid room so it can be accessed in an emergency.

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 will ensure that there is a sufficient number of staff present who have up to date training in an anaphylaxis management.

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 device.
• the school’s first aid and emergency response procedure.

This policy is to be reviewed in 3 years time to be endorsed by School Council.

This policy was last ratified by School Council in …….  

August 2008

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**Individual Anaphylaxis Management Plans:**
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 the 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 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 signed the emergency procedures plan
  - includes an up to date photograph of the student

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.
- Immediately after a student has had an anaphylactic reaction at school.