



Broadford Primary School

ANAPHYLAXIS POLICY

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, 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 the school.

Adrenaline given through an EpiPen® autoinjector to the muscle of the outer mid thigh is the most effective first aid treatment for anaphylaxis.

PURPOSE

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.

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

The key reference and support for the college regarding anaphalaxis is the [DEECD Anaphalaxis Guidelines](#)

INDIVIDUAL ANAPHYLAXIS MANGEMENT PLANS

Note: A template of an individual anaphylaxis management plan can be found on Page 26 [DEECD Anaphalaxis Guidelines](#)

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 enrolls, and where possible before their first day at the school.

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.

Note: Appendix 2 of the Anaphylaxis Guidelines contains advice about a range of prevention strategies that can be put in place.

- 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.

Note: The red and blue 'ASCIA Action Plan' is the most common form of emergency procedures plan that is provided by medical practitioners to parents when a child is diagnosed as being at risk of anaphylaxis.

- Download from [DEECD Health Support Planning Policy](#)

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.

It is the responsibility of the parent to: -

- provide the emergency procedures plan (ASCIA Action Plan).
- inform the school if their child's medical condition changes, and if relevant provide an updated emergency procedures plan (ASCIA Action Plan).
- provide an up to date photo for the emergency procedures plan (ASCIA Action Plan) when the plan is provided to the school and when it is reviewed.

COMMUNICATION PLAN

Note: the Anaphylaxis Guidelines provides advice about strategies to raise staff and student awareness, working with parents/carers and engaging the broader school community.

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.

The communication plan will include information about what steps will be taken to respond to an anaphylactic reaction by a student in a classroom, in the school yard, on school excursions, on school camps and special event days.

Volunteers and casual relief staff of students at risk of anaphylaxis will be informed of students at risk of anaphylaxis and their role in responding to an anaphylactic reaction by a student in their care by the assistant principal or student wellbeing officer.

What staff need to know:

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

Note: An information DVD will be used for this purpose at staff briefings.

What students need to know: (Be a mate.)

- always take food allergies seriously
- don't share food with friends
- wash you hands before and after eating
- know what your friends are allergic to
- if a friend becomes sick, get help immediately
- be respectful of a friends EpiPen/Anapen
- don't pressure friends to eat food that they are allergic to.

STAFF TRAINING AND EMERGENCY RESPONSE

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.

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.

The principal will identify the school staff to be trained based on a risk assessment.

Note: A risk assessment tool has been included in this information pack to assist principals and can be downloaded from [DEECD Health Support Planning Policy](#)

Training will be provided to these staff as soon as practicable after the student enrolls.

Wherever possible, training will take place before the student's first day at school. Where this is not possible, an interim plan will be developed in consultation with the parents.

The school's first aid procedures and students emergency procedures plan (ASCIA Action Plan) will be followed in responding to an anaphylactic reaction.

Appendices: -

- Anaphylaxis Risk Management Checklist
- Anaphylaxis Management Plan
- Anaphylaxis Action Plan

References :

- [DEECD Anaphylaxis Policy](#)
- [DEECD Health Support Planning Policy](#)

Date Implemented	October 2015
Author	
Approved By	School Council
Approval Authority (Signature & Date)	
Date Reviewed	October 2016
Responsible for Review	Assistant Principal
Next Review Date	October 2017
References	<ul style="list-style-type: none">• DEECD Anaphylaxis Policy• DEECD Health Support Planning Policy

ANAPHYLAXIS RISK MANAGEMENT CHECKLIST

School Name: Broadford Primary School

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? YES ☐ NO ☐
If Yes, how many times? _____
3. Have any students had an Anaphylactic Reaction at school? YES ☐ NO ☐
If Yes, how many times? _____
4. Has a staff member been required to administer an EpiPen® to a student? YES ☐ NO ☐
If yes, how many times? _____

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 ☐
3. 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 at risk of 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 ☐
4. Is the storage unlocked and accessible to staff at all times? YES ☐ NO ☐
Comments: _____
5. Is the EpiPen® easy to find? YES ☐ NO ☐
Comments: _____
6. Is a copy of students' ASCIA Action Plans kept together with their EpiPen®? YES ☐ NO ☐
Comments: _____
7. Are EpiPen's® and Action Plans clearly labelled with students' names? YES ☐ NO ☐
Comments: _____
8. Has someone been designated to check the EpiPen's® expiry dates on regular basis? YES ☐ NO ☐
Who? _____
Comments: _____
9. Has the College signed up to EpiClub (a free reminder service)? YES ☐ NO ☐
10. Do all staff know where the EpiPens® and Action Plans are Stored? YES ☐ NO ☐
Comments: _____
11. Is there a spare EpiPen®? YES ☐ NO ☐
If Yes, what Type?.....
12. Where is it stored? _____
13. 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 ☐
2. 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 ☐
How? _____
6. In an emergency is there a plan for who will be sent to collect the EpiPen® and Action Plan? YES ☐ NO ☐
Who will this be when in the class room? _____
Who will this be when in the school yard? _____
Who will this be at sporting activities? _____
7. Have you checked how long will it 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 ☐
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 <input type="radio"/> NO <input type="radio"/> |
| the causes, symptoms and treatments of anaphylaxis? | YES <input type="radio"/> NO <input type="radio"/> |
| the identities of students diagnosed at risk of anaphylaxis and where their medication is located? | YES <input type="radio"/> NO <input type="radio"/> |
| how to use an adrenaline auto-injecting device, including hands on practice with a trainer adrenaline auto-injecting device | YES <input type="radio"/> NO <input type="radio"/> |
| the school's first aid and emergency response procedures | YES <input type="radio"/> NO <input type="radio"/> |

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 ☐
Comments: _____
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? YES ☐ NO ☐
Comments: _____
3. Do all staff know which students at risk of anaphylaxis? YES ☐ NO ☐
Comments: _____
How is this information kept up to date?
4. Are there strategies in place to increase awareness about severe allergies among students? YES ☐ NO ☐
Comments: _____

Individual Anaphylaxis Management Plan

This plan is to be completed by the principal or nominee on the basis of information from the student's medical practitioner (**ASCIA Action Plan for Anaphylaxis**) provided by the parent.

It is the parent's responsibility to provide the school with a copy of the student's ASCIA Action Plan for Anaphylaxis containing the emergency procedures plan (signed by the student's medical practitioner) and an up-to-date photo of the student - to be appended to this plan; and to inform the school if their child's medical condition changes.

School		Phone	
Student			
DOB		Year level	
Severely allergic to:			
Other health conditions			
Medication at school			
EMERGENCY CONTACT DETAILS (PARENT)			
Name		Name	
Relationship		Relationship	
Home phone		Home phone	
Work phone		Work phone	
Mobile		Mobile	
Address		Address	
EMERGENCY CONTACT DETAILS (ALTERNATE)			
Name		Name	
Relationship		Relationship	
Home phone		Home phone	
Work phone		Work phone	
Mobile		Mobile	
Address		Address	
Medical practitioner contact	Name		
	Phone		

Emergency care to be provided at school	
Storage location for adrenaline autoinjector (device specific) (EpiPen®)	

ENVIRONMENT

To be completed by principal or nominee. Please consider each environment/area (on and off school site) the student will be in for the year, e.g. classroom, canteen, food tech room, sports oval, excursions and camps etc.

Name of environment/area:

Risk identified	Actions required to minimise the risk	Who is responsible?	Completion date?

Name of environment/area:

Risk identified	Actions required to minimise the risk	Who is responsible?	Completion date?

Name of environment/area:

Risk identified	Actions required to minimise the risk	Who is responsible?	Completion date?

Name of environment/area:			
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(continues on next page)

ACTION PLAN FOR Anaphylaxis

Name: _____

Date of birth: _____

For EpiPen® adrenaline (epinephrine) autoinjectors

SIGNS OF MILD TO MODERATE ALLERGIC REACTION

- Swelling of lips, face, eyes
- Hives or welts
- Tingling mouth
- Abdominal pain, vomiting (these are signs of anaphylaxis for insect allergy)

ACTION FOR MILD TO MODERATE ALLERGIC REACTION

- For insect allergy - flick out sting if visible
- For tick allergy - freeze dry tick and allow to drop off
- Stay with person and call for help
- Locate EpiPen® or EpiPen® Jr adrenaline autoinjector
- Give other medications (if prescribed) _____
- Phone family/emergency contact

Mild to moderate allergic reactions (such as hives or swelling) may not always occur before anaphylaxis

WATCH FOR ANY ONE OF THE FOLLOWING SIGNS OF ANAPHYLAXIS (SEVERE ALLERGIC REACTION)

- Difficult/noisy breathing
- Swelling of tongue
- Swelling/tightness in throat
- Wheeze or persistent cough
- Difficulty talking and/or hoarse voice
- Persistent dizziness or collapse
- Pale and floppy (young children)

ACTION FOR ANAPHYLAXIS

1 Lay person flat - do NOT allow them to stand or walk

- If unconscious, place in recovery position
- If breathing is difficult allow them to sit



2 Give EpiPen® or EpiPen® Jr adrenaline autoinjector

3 Phone ambulance* - 000 (AU) or 111 (NZ)

4 Phone family/emergency contact

5 Further adrenaline doses may be given if no response after 5 minutes

6 Transfer* person to hospital for at least 4 hours of observation

If in doubt give adrenaline autoinjector

Commence CPR at any time if person is unresponsive and not breathing normally

ALWAYS give adrenaline autoinjector FIRST, and then asthma reliever puffer if someone with known asthma and allergy to food, insects or medication has SUDDEN BREATHING DIFFICULTY (including wheeze, persistent cough or hoarse voice) even if there are no skin symptoms

Asthma reliever medication prescribed: ☐ Y ☐ N

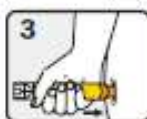
How to give EpiPen®



Form fist around EpiPen® and PULL OFF BLUE SAFETY RELEASE



Hold leg still and PLACE ORANGE END against outer mid-thigh (with or without clothing)



PUSH DOWN HARD until a click is heard or felt and hold in place for 10 seconds
REMOVE EpiPen® and gently massage injection site for 10 seconds

Instructions are also on the device label

This Individual Anaphylaxis Management Plan will be reviewed on any of the following occurrences (whichever happen earlier):

- annually
- if the student's medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, changes
- as soon as practicable after the student has an anaphylactic reaction at school
- when the student 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).
- I have been consulted in the development of this Individual Anaphylaxis Management Plan.
- I consent to the risk minimisation strategies proposed.

Risk minimisation strategies are available at Chapter 8 – Risk Minimisation Strategies of the Anaphylaxis Guidelines

Signature of parent:	
Date:	
I have consulted the parents of the students and the relevant school staff who will be involved in the implementation of this Individual Anaphylaxis Management Plan.	
Signature of principal (or nominee):	
Date:	