PURPOSE

It is a requirement of all Victorian schools that an Anaphylaxis Management policy is in place for every school with students at risk of anaphylaxis. (Ministerial Order 706 – Anaphylaxis Management in Schools)

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 school.

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

SEVERE ALLERGIC REACTIONS

Reactions usually begin within minutes of exposure and can progress rapidly at any time over a period of up to two hours. A student at risk of anaphylaxis will often recognise the early symptoms of an allergic reaction before any other signs are observable.

Common symptoms are:

- flushing and/or swelling of the face
- itching and/or swelling of the lips, tongue or mouth
- itching and/or a sense of tightness in the throat, hoarseness, difficulty in breathing and/or swallowing
- hives, itchy rash, and/or swelling about the face, body or extremities
- nausea, abdominal cramps, vomiting and/or diarrhoea
- shortness of breath, repetitive coughing and/or wheezing
- faint, rapid pulse, low blood pressure
- light headedness, feeling faint, collapse
- distress, anxiety and a sense of dread

An anaphylactic reaction always requires an emergency response. Prompt treatment with injected adrenaline is required to halt progression and can be lifesaving. Fortunately anaphylactic reactions are usually preventable by implementing strategies for avoiding allergens.
WARRAGUL REGIONAL COLLEGE
ANAPHYLAXIS POLICY
(HEALTH & SAFETY)
August 2015

AIMS

Warragul Regional College cannot guarantee a completely allergen free environment; however we are taking steps to become an “Allergy Aware” school. The school’s policy is aimed at minimizing the risk of anaphylaxis through:

- Greater awareness and education of serious allergies in the school community
- Effective communication between families and the school, including developing anaphylaxis management plans for students with serious allergies
- Training of staff to respond appropriately in an emergency
- Having strategies in place to reduce exposure to allergens

This policy applies to all students, staff and parents at Warragul Regional College, and cooperation is required to ensure a safe environment for at risk students.

IMPLEMENTATION

Communication Plan

Awareness and education about allergies/anaphylaxis in the school community:

- The Principal is 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 policy.
- The Principal is responsible for ensuring that all staff are briefed at least twice a year (the first to be held at the beginning of the school year) by a staff member who has up to date anaphylaxis training, on:
  a. the school’s Anaphylaxis Management Policy
  b. the causes, symptoms and treatment of anaphylaxis
  c. the identities of students diagnosed at risk of anaphylaxis and where their medication is located
  d. how to use an adrenaline auto-injecting device (Epipen), including hands on practice with a qualified Epipen trainer
  e. the school’s first aid and emergency response procedures

- Information is provided to staff in the School Manual, in documents provided to all current families and to new families as part of the enrolment procedures, and also in the school newsletter
- All staff have training in anaphylaxis management and are provided with appropriate medical details of the children in their care
- Staff is to store information of identified students in the front page of the Attendance Roll and to alert casual relief teachers of their role in responding to an anaphylactic reaction by a student. The First Aid Coordinator will provide this information
Photos of students who have an anaphylaxis management plan will be displayed in teacher offices, staff room and first aid room.

It is the parent’s responsibility to educate their affected child in the self-management of their food allergy, including allergy avoidance and how and when to inform an adult if they need help.

**ANAPHYLAXIS MANAGEMENT PLANS**

*Effective communication between families and the school, including developing anaphylaxis management plans for students with serious allergies*

- The Principal is responsible for ensuring that an individual Anaphylaxis Management Plan is developed for any student who has been diagnosed by a medical practitioner as being at risk of anaphylaxis.
- An individual anaphylaxis management plan will be in place as soon as practicable after the student enrols and where possible before the student’s first day at School.
- An individual Anaphylaxis Management Plan will set out the following:
  a. Information about the diagnosis, including the type of allergy/allergies the student has (based on a diagnosis from a medical practitioner)
  b. Strategies to minimise the risk of exposure to allergens while the student is under the care or supervision of school staff, including camps and excursions
  c. The name of the person/s responsible for implementing the strategies
  d. Information on where the student’s medication will be stored
  e. The student’s emergency contact details
- Parents of children with allergies are required to provide medical information so that each child at risk has an Emergency Procedures Plan:
  a. Providing appropriate emergency procedures
  b. Signed by a doctor
  c. Plans to be reviewed (i) annually, (ii) if the student’s medical condition changes, and (iii) immediately after a student has had an anaphylactic reaction at school.
WARRAGUL REGIONAL COLLEGE
ANAPHYLAXIS POLICY
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It is a mandatory requirement that any student who has been prescribed an EpiPen must provide an EpiPen and Anaphylaxis Action Plan for the school, available from http://www.allergy.org.au/content/view/10/3/

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 (Appendix 3)

• Parents/guardians of an allergic child are responsible for supplying the EpiPen and other required medication and ensuring that the medication has not expired.
• It is the responsibility of the parent to:
  a. inform the School if their child’s medical condition changes and, if relevant, provide an updated emergency procedures plan
  b. provide an up to date photo for the emergency procedures plan when that plan is provided to the School and when it is reviewed.
• Individual EpiPens are stored in the main Office. School Epipens are in OSH. Classroom.
• Parents are advised that students with severe allergies will have their photos and anaphylaxis plans displayed in the staff and First Aid rooms. Every staff member will have a photo of every at risk student in their roll as a reference point, for teaching staff to ensure they can provide the best possible care in cases of emergency. This information will also be held in the canteen.
• School staff should make themselves familiar with the photographs of students with severe allergies. Children who are highly allergic to any allergens are at risk of anaphylaxis if exposed. Those who have had a previous anaphylactic reaction are at increased risk. If an exposure to an allergen is thought to have occurred and the student feels unwell in any way, the Student Action Plan will be followed including any appropriate emergency measures such as hospitalisation and the parents will be notified.
STAFF TRAINING

Training of staff to respond appropriately in an emergency

As a part of the duty of care owed to students, teachers are required to administer first aid when necessary and within the limits of their skill, expertise and training.

- In the case of anaphylaxis, this includes following the student’s Action Plan and administering an EpiPen if necessary. It should be noted that a teacher’s duty of care is greater than that of an ordinary citizen in that a teacher is obliged to assist an injured student, while an ordinary citizen may choose to do nothing.
- The student's individual Allergy Management Plan will document the action required. Any student with an identified anaphylactic reaction will have his/her Action Plan documented in the anaphylactic area of the medical details section on the school database.
- The names of students who are at risk of severe allergy and the nature of these allergies, are individually recorded on class lists, medical alert lists and student files.
- Staff who takes students off campus for any reason eg. Excursions, sporting activities must take a "Confidential Student Medical Alert with Contacts" Report. This is to be taken with them and kept secure. Staff is to check that students have their EpiPens with them before leaving.
- Teachers and other school staff who conduct classes which students at risk of anaphylaxis attend, or give instruction to students at risk of anaphylaxis 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 will ensure that there is a sufficient number of staff present who has up to date training in an anaphylaxis management training course.
- The Principal is responsible for identifying the school staff that are to be trained based on an assessment of the risk of an anaphylactic reaction occurring while the student is under the care or supervision of the school. This training will be provided as soon as practicable after the student enrolls, where possible before the student's first day at the School. Where this is not possible, an interim plan will be developed in consultation with the parents.
- The school's first aid procedures and the student’s emergency procedures plan must be followed in responding to an anaphylactic reaction.
## ALLERGEN STRATEGIES

### Having strategies in place to reduce exposure to allergens:

Warragul Regional College will endeavour to take reasonable measures to minimise the allergen exposure of members of the school community. The School will aim, where possible, to limit allergen exposure to students at school.

- A key feature of our risk minimisation strategy is to inform all students of the risks of sharing lunches. Regular discussions with all classes will emphasise the importance of eating their own food and of not sharing foods, as this poses a significant risk for some students.
- It is generally requested that parents/guardians avoid sending nuts or nut spreads such as Nutella and peanut butter to school in lunchboxes, particularly if a class member has a known nut allergy. Notification of this will be made at the beginning of the school year in relevant classes/home groups.
- Other risk minimisation strategies are listed below and it is requested that all staff, students and families familiarise themselves with the recommendations to make the environment as safe as possible for those in the school community affected with serious allergies.

<table>
<thead>
<tr>
<th>RISK</th>
<th>STRATEGY</th>
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<tbody>
<tr>
<td>Trigger food in canteen (eg peanut butter)</td>
<td>- Identify foods that contain or are likely to contain trigger substances</td>
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<td>- Clearly label foods that may contain nuts</td>
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<td>- Parents are requested to liaise with the canteen supervisor.</td>
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<td>- Canteen staff is to be given a list of anaphylactic students with photographs.</td>
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<td>Planned class parties</td>
<td>- Advise parents of risk foods ahead of time so that they can provide suitable foods and request that risk foods are avoided.</td>
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<td>- Parents of students with allergy to organise specific foods for their child</td>
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<td>Insect bite allergies</td>
<td>- Ensure all students wear shoes at all times</td>
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<tr>
<td>Medication allergies</td>
<td>- Inform school community of policy about administration of medications</td>
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<td>- Parents must send medication in original package with a signed letter giving times &amp; doses</td>
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<td>- All medication is to be stored in a locked cupboard</td>
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<td>Latex allergies</td>
<td>- Arrange for allergic students or staff to avoid use of party balloons and contact with swimming caps and latex gloves if latex allergy in known</td>
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<td>- Ask all students before giving a band aid</td>
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<td>Science, crafts, cooking</td>
<td>- Careful planning of cooking and science classes to remove of risk food items.</td>
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<td></td>
<td>- Art/craft items can also be risk items (eg egg cartons, milk containers, peanut butter jars, cereal boxes).</td>
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<tr>
<td>Camps &amp; excursions</td>
<td>- Teachers attending will be notified of any students with allergies and of their specific action plan. The camp facility will be notified about any students with allergies.</td>
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