



# Olinda Primary School

## Anaphylaxis Policy

2017

Ministerial Order 706 – Anaphylaxis Management in Schools

**Principal: Cornelia Sheeran**  
**School Council President: Sharryn Veto**

<b>Date Approved</b>	April 2017
<b>Approved By</b>	School Council
<b>Next Review Date</b>	April 2020
<b>Responsible for Review</b>	Principal
<b>References</b>	Victorian Government Schools Policy and Advisory Guide

## **School Statement**

Olinda Primary School will fully comply with Ministerial Order 706 and the associated Guidelines published and amended by the Department from time to time.

The school has the responsibility to develop and maintain an Anaphylaxis Management Policy and individual anaphylaxis management plans for any student or staff who has been diagnosed by a medical practitioner as being at risk of anaphylaxis.

The principal will ensure the individual management plans are developed in consultation with the student's parents. The Individual Anaphylaxis Management Plan will be in place as soon as practicable after the student enrolls and where possible before their first day of school.

## **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.

Signs and symptoms of an anaphylaxis reaction 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.

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 school regarding anaphylaxis is the [DEECD Anaphylaxis Guidelines](#)

## Individual Anaphylaxis Management Plans

A template of an individual anaphylaxis management plan can be found on Page 26 [DEECD Anaphylaxis 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 or at special events conducted, organised or attended by the school.

*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.

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, insofar as it relates to allergy and the potential for anaphylactic reaction changes, or
- as soon as practicable after a student has an anaphylactic reaction at school and
- 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)

It is the responsibility of the parent to:

- provide the emergency procedures plan (ASCIA Action Plan)
- inform the school in writing if their child's medical condition changes insofar as it relates to allergy and the potential for anaphylactic reaction, 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
- Provide the school with an Adrenaline Autoinjector that is current and not expired for their child

## **Communication Plan**

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.

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 auto-adrenaline injecting device
- the school's first aid and emergency response procedures

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

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

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/kitchen eliminate or reduce the likelihood of such allergens, and the school will reinforce the rules about not sharing and not eating foods provided from home.

## **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 in the three years prior
- participate in a briefing to occur twice per calendar year (with the first briefing to be held at the beginning of the school year) on:
  - Olinda PS'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 practice 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.

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 successfully completed an anaphylaxis management training course in the three years prior.

The principal will identify the school staff to be trained based on a risk assessment. A risk assessment tool has been included in this policy statement to assist principals and can also be downloaded from [DET 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 student's emergency procedures plan (ASCIA Action Plan) will be followed in responding to an anaphylactic reaction.

The principal will complete an annual Risk Management Checklist as published by the Department to monitor compliance with their obligations.

Appendices:

- ❖ Anaphylaxis Risk Management Checklist
- ❖ Anaphylaxis Management Plan

References:

- ❖ [DET Anaphylaxis Policy](#)

❖ DET Health Support Planning Policy

<b>Date Implemented</b>	
<b>Author</b>	
<b>Approved By</b>	School Council
<b>Approval Authority (Signature &amp; Date)</b>	
<b>Date Reviewed</b>	
<b>Responsible for Review</b>	Assistant Principal
<b>Review Date</b>	
<b>References</b>	<ul style="list-style-type: none"> <li>• <a href="#">DET Anaphylaxis Policy</a></li> <li>• <a href="#">DET Health Support Planning Policy</a></li> </ul>



# Anaphylaxis Risk Management Checklist

**School Name:** OLINDA PRIMARY SCHOOL

**Address:** 45 Charlemont Lane, Olinda.

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



# Anaphylaxis Risk Management Checklist

School Name: **OLINDA PRIMARY SCHOOL**

## 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 extracurricular 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?.....

**Comments**

7. Has the School 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

**Comments**

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

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   
 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  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

### **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?  
 YES  NO   
 Comments
2. Do all staff know which students suffer from 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



# Anaphylaxis Management Plan

School Name: **OLINDA PRIMARY SCHOOL**

## 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

SCHOOL: Olinda Primary School		
Phone Number 9751 1181		
Student's name:		
Date of birth:	Year level:	
Severely allergic to:		
Other health conditions:		
Medication at school:		
Parent/carer contact:	Parent/carer information (1)	Parent/carer information (2)
	Name:	Name:
	Relationship:	Relationship:
	Home phone:	Home phone:
	Work phone:	Work phone:
	Mobile:	Mobile:
	Address:	Address:

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	
Signature of parent:	Date:
Signature of principal (or nominee):	Date:

