Anaphylaxis Management Guidelines

Anaphylaxis is a severe, life threatening allergic reaction. The most common causes in school age children are eggs, peanuts, nuts, cows milk, bee or other insect stings as well as some drugs. Although the reaction can develop within minutes after exposure to the allergen, there is usually adequate time to treat life-threatening reactions with adrenaline auto-injector. A swift response is necessary. As nuts are currently the most prevalent medically identified allergen amongst our student population, we discourage the consumption of nuts as a risk reduction strategy. (This is to replace the statement that SKPS aims to be a nut free school)

In line with the amendments to the Ministerial Order 706 (Dec 2015), St Kilda Primary School Health Policy and the Department of Education and Training (DE&T) guidelines the following procedures are carried out:

- Parents at school enrolment should identify children who have been identified as having a risk of an anaphylactic reaction. Individual ASCIA Anaphylaxis Action Plans will be provided by the family (created in consultation with their doctor).
- It is the responsibility of the School Nurse to meet with parents and class teacher to review the ASCIA Anaphylaxis Action Plans provided by the student’s doctor for their child(ren) each year.
- The School Nurse will complete and update the SKPS Anaphylaxis Management Plan at the beginning of each year or as clinically indicated.
- The School Nurse will review the SKPS Anaphylaxis Risk Checklist and seek approval from the Principal in March each year.
- The school will ensure that there are undesignated current non-prescribed adrenaline auto-injectors available at school and during school excursions for use in an emergency.
- All staff shall be made aware of relevant information for all students at risk of anaphylaxis at the first full staff meeting for the year, as part of new staff induction throughout the year and staff meetings as required (briefing twice per year).
- Casual Replacement Teachers (CRTs), employed to teach classes where children have been identified as being at risk of anaphylactic reaction, will be required to familiarise themselves with the relevant child and the relevant management plan (placed in the roll of all classrooms).
- The Individual ASCIA Anaphylaxis Action Plans will be displayed in the staff room, the front of each class roll, attached to each enrolment record, in camp first aid packs and be in an emergency management folder in the sick bay. Children with anaphylaxis will also be identified in the CRT booklet for their grade.
- It is the responsibility of the parents/carers to ensure that the ASCIA Anaphylaxis Action Plan is current (School Nurse will remind parents to complete this process if required). It is important that these details are complete and correct at all times:
  - detail allergens
  - contain a current photograph of the child
  - contain parent contact phone numbers

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• include an explanation of symptoms and directions for action should a reaction occur

• Classes that include children with specific anaphylaxis (eg egg) will be designated as ‘no egg classes’ Students in these classes are not permitted to order food with egg products from any external food provider.

• Individual children across the whole school are not to share or swap food.

• Whenever school activities (such as cultural celebrations, special events etc.) involve other children bringing food products or home baked food to school to share with others the child’s parents/carers will supply a safe alternative for children with food related anaphylaxis.

• Whole school activities, which involve food, should always be in a handled in a controlled manner and must consider the guidelines and implementation principles of this policy.

• Food activities in the classroom should be undertaken to include all students safely in a controlled cooking environment.

• The Principal will provide education and anaphylaxis awareness activities for the whole school community on a regular basis.

• Two School Anaphylaxis Supervisors will complete the autoinjector competency check training and make themselves available to staff to undertake the competency checks and deliver the mandatory twice yearly briefings (auto-injector competency check training will be refreshed every three years)

• Every two years all staff will complete the online training provided by the ASCIA e-training course and auto-injector competency check training and then have their competency in using an auto-injector checked by a School Anaphylaxis Supervisor.

• The School Anaphylaxis Supervisors will ensure that they deliver the mandatory twice yearly briefings to staff. The School Nurse will also ensure that any new staff complete the required training.

• The adrenaline auto-injector of children identified by ASCIA Anaphylaxis Action Plans will be clearly labelled and accessible in the school sick bay/classrooms of children. Another adrenaline auto-injector may be provided at parents’ discretion and located in the classroom.

• Parents must alert teachers about the allergy before excursions and camps via the usual school permission and medical forms.

• Adrenaline auto-injectors are to be carried by school staff on excursions and camps and are passed from adult to adult.

• Parents/carers are wholly responsible for recording the expiry date of medications placed at school and are responsible for the timely replacement of adrenaline auto-injector. The School Nurse will support the parents/carers in this process.

• In the event of a student having an anaphylactic reaction emergency procedures will be followed: adrenaline auto-injector administered, Ambulance called via 000-Mica Unit stipulated, Parents/Carers contacted.

• The line of communication in an emergency moves from the supervising staff member and includes the classroom teacher, School Nurse/Level 2 first aid office personnel, senior staff member.

• After an emergency, a report is completed by the supervising staff member, detailing procedures and outcome and placed in the school accident register and reported via the Incident Reporting and Information System (IRIS).

Appendix 1: ASCIA Anaphylaxis and Allergy Action Plans
Appendix 2: SKPS Anaphylaxis Management Plan
Appendix 3: SKPS Anaphylaxis Risk Checklist

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