

# School Policy

## Anaphylaxis

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### Purpose

This policy explains to Avenues Education parents, carers, staff and students the processes and procedures in place to support students at risk of an anaphylaxis response. This policy also ensures that Avenues Education is compliant with Ministerial Order 706 and the Department's guidelines for anaphylaxis management.

### Scope

This policy applies to:

- all staff, including casual relief staff and volunteers
- all students who have been diagnosed with anaphylaxis, or who may require emergency treatment for an anaphylactic reaction, and their parents and carers.

### Definition

Anaphylaxis is a severe allergic reaction that occurs after exposure to an allergen. The most common allergens for school-aged children are nuts, eggs, cow's milk, fish, shellfish, wheat, soy, sesame, latex, certain insect stings and medication.

#### *Symptoms*

Signs and symptoms of a mild to moderate allergic reaction can include:

- swelling of the lips, face and eyes
- hives or welts
- tingling in the mouth.

Signs and symptoms of anaphylaxis, a severe allergic reaction, can include:

- difficult/noisy breathing
- swelling of tongue
- difficulty talking and/or hoarse voice
- wheeze or persistent cough
- persistent dizziness or collapse
- student appears pale or floppy
- abdominal pain and/or vomiting.

Symptoms usually develop within ten minutes and up to two hours after exposure to an allergen, but can appear within a few minutes.

### Policy

#### **Prevention**

The key to prevention of anaphylaxis in schools is having knowledge of those students who have been diagnosed at risk, awareness of triggers (allergens), and the prevention of exposure to these triggers. The partnership between Avenues Education and its students and parents / carers is important in ensuring that certain foods or items are kept away from the student whilst they are engaging in Avenues Education programs.

### **Staff Training**

Training will be provided as consistent with the Department's *Anaphylaxis Guidelines*. Key staff members will complete an accredited Anaphylaxis training program annually.

All staff are required to attend a briefing on anaphylaxis management twice per year, facilitated by a staff member who has successfully completed an anaphylaxis management course within the last 2 years. Each briefing will address:

- this policy;
- the causes, symptoms and treatment of anaphylaxis;
- the identities of students with a medical condition that relates to allergies 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;
- the school's general first aid and emergency response procedures;
- the location of, and access to, adrenaline autoinjectors that have been provided by parents or purchased by the school for general use.

### **Individual Anaphylaxis Management Plans**

On referral, parents/carers will provide an up-to-date ASCIA Action Plan for Anaphylaxis completed by the student's medical practitioner. Appropriate staff will be briefed of the plan. The student will not engage in any of the Avenues Education programs until this plan has been received.

### **Implementation at School Specific Sites**

#### **Community team teachers**

- Upon referral - parents/carers include allergy information as part of the parent consent form
- A copy of individual student's ASCIA (Australian Society of Clinical immunology and Allergy Inc.) Action Plan / Care Plan is visible and easily accessible to all staff working with the student.

#### **At groupworx (as per Eastern Health Guidelines)**

- At the first Support Network group – parents/carers include allergy information as part of the official groupworx consent form
- A copy of individual student's ASCIA Action Plan / Care Plan is to be displayed
- The management plan will contain details of the student's needs in the event of an anaphylactic episode
- It is the parents' /carers' responsibility to provide an up to date EpiPen/Anapen
- Special arrangements will be made for students who can experience Anaphylactic episodes for cooking sessions
- When a student is off campus for an excursion/outing clinical staff will be required to ensure the student takes their EpiPen/Anapen. Clinical staff will ensure the ASCIA Action / Care Plan is taken

#### **At the AIPU (as per Eastern Health Guidelines)**

- Upon admission – parents/carers include allergy information as part of the admission form
- Special arrangements will be made for students who can experience Anaphylactic episodes for cooking sessions
- If the student arrives without an EpiPen/Anapen one will be provided by the pharmacy

## **Emergency Response**

Adrenaline given as an injection into the muscle of the outer mid-thigh is the first aid treatment for anaphylaxis.

Individuals diagnosed as being at risk of anaphylaxis are prescribed an adrenaline autoinjector for use in an emergency. These adrenaline autoinjectors are designed so that anyone can use them in an emergency. In the event of an anaphylactic reaction, the emergency response outlined in the student's Individual Anaphylaxis Management Plan must be followed together with procedures in this policy, the school's general first aid procedures and emergency response procedures.

If a student experiences an anaphylactic reaction at school or during a school activity, school staff must:

<b>Step</b>	<b>Action</b>
1.	<ul style="list-style-type: none"> <li>• Lay the person flat</li> <li>• Do not allow them to stand or walk</li> <li>• If breathing is difficult, allow them to sit</li> <li>• Be calm and reassuring</li> <li>• Do not leave them alone</li> <li>• Seek assistance from another staff member or reliable student to locate the student's adrenaline autoinjector and the student's Individual Anaphylaxis Management Plan.</li> <li>• If the student's plan is not immediately available, or they appear to be experiencing a first time reaction, follow steps 2 to 5</li> </ul>
2.	Administer an EpiPen or EpiPen Jr (if the student is under 20kg) <ul style="list-style-type: none"> <li>• Remove from plastic container</li> <li>• Form a fist around the EpiPen and pull off the blue safety release (cap)</li> <li>• Place orange end against the student's outer mid-thigh (with or without clothing)</li> <li>• Push down hard until a click is heard or felt and hold in place for 3 seconds</li> <li>• Remove EpiPen</li> <li>• Note the time the EpiPen is administered</li> <li>• Retain the used EpiPen to be handed to ambulance paramedics along with the time of administration</li> </ul>
3.	Call an ambulance (000)
4.	If there is no improvement or severe symptoms progress (as described in the ASCIA Action Plan for Anaphylaxis), further adrenaline doses may be administered every five minutes, if other adrenaline autoinjectors are available.
5.	Advise a member of the School Leadership team and contact the student's emergency contacts.

## **Communication Plan**

This policy will be available on Avenues Education's website so that parents and other members of the school community can easily access information about the school's anaphylaxis management procedures. The parents and carers of students who are referred to Avenues Education and are identified as being at risk of anaphylaxis via the consent form, will also be provided with a copy of this policy.

All relevant staff, including casual relief staff and volunteers will be made aware of this policy and procedures for anaphylaxis management. Casual relief staff and volunteers who are responsible for the care and/or supervision of students who are identified as being at risk of anaphylaxis will also receive a verbal briefing on this policy.

## Further information and resources

- School Policy and Advisory Guide:
  - [Anaphylaxis](#)
  - [Anaphylaxis management in schools](#)
- Allergy & Anaphylaxis Australia: [Risk minimisation strategies](#)
- ASCIA Guidelines: [Schooling and childcare](#)
- Royal Children's Hospital: [Allergy and immunology](#)

## Review Cycle

This policy will be reviewed yearly as a part of the school's review cycle.

This policy was last updated in May 2020 and is scheduled for review in May 2021.