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 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, 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.

INDIVIDUAL ANAPHYLAXIS MANAGEMENT PLANS
The principal/well-being coordinator 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 of school.
The individual anaphylaxis management plan will set out the following:

References: curriculum@work cd
• Information about the diagnosis, including the type of allergy or allergies the student has (based on a diagnosis from a medical practitioner).
• Strategies to minimize 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.
• 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 parents, that:
  1. Sets out the emergency procedures to be taken in the event of an allergic reaction;
  2. Is signed by a medical practitioner who was treating the child on the date the practitioner signs the emergency procedures plan; and
  3. Includes an up to date photograph of the student.

The student’s individual management plan will be reviewed, in consultation with the student’s parents/carers:
• 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.
• Provide snacks or treats for class treat box (where applicable)
• Provide an alternative option of cake/muffin on class birthdays for their child (where applicable)

It is the responsibility of the school (Principal/Well being Coordinator) to:
• Ensure all staff have up to date anaphylaxis management training
• Educate parent and student community of the risks of anaphylaxis
• Complete an anaphylaxis risk management checklist annually

References: curriculum@work cd
• Liaison with parents of students at risk of anaphylaxis in an effort to give the best possible care to their child

COMMUNICATION PLAN
The Principal/Wellbeing Coordinator will be responsible or 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 schoolyard, on school excursions, on school camps and special event days.

Volunteers and casual relief staff who come in contact with students at risk of anaphylaxis will be informed and educated to respond to an anaphylactic reaction by a student in their care by the Principal/Wellbeing Coordinator.

All staff will be briefed once each semester by the wellbeing coordinator 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

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 has up to date training in an anaphylaxis management training course.

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.

References: curriculum@work cd
The school’s first aid procedures and students emergency procedures plan (ASCIA Action Plan) will be followed in responding to an anaphylactic reaction.

St Joseph’s Primary School Crib Point
Anaphylaxis Communication Plan

STAFF
All staff will be briefed once each semester by the Wellbeing Coordinator/Principal or First Aid officer 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

Casual Relief Teachers and Volunteers will be briefed by the Principal/Wellbeing coordinator.

STUDENTS
Students across the school will be educated by classroom teachers of the impact their food choices may have on other children. The class that has students at risk of anaphylaxis will also be educated on symptoms of anaphylaxis and what to do if the student has a reaction.

Students in all classrooms will be prompted to wash their hands before and after meal times.

PARENTS
General information on anaphylaxis will accompany this letter as well as be placed in the school newsletter for whole school community education.

RESPONDING TO AN ANAPHYLACTIC REACTION BY A STUDENT
Each child at risk of anaphylaxis will have a named bag in the office containing all medications as specified in their student emergency procedure plan (ASCIA Action Plan). This will be stored in accordance with

References: curriculum@work cd
manufactures guidelines and checked once a month. One month before expiry, the Principal/First Aid officer will send a letter to the parents of the student with anaphylaxis to request that they provide another Epi-pen for school use.

**At School**

Each classroom, library, art room and office will display a copy of student’s emergency procedures plan (ASCIA Action Plan). Next to each plan will also be a red emergency card with the name of the student. In the event of an allergic reaction by a student, the emergency card will be sent to the office, the student’s medication will be collected and trained staff will follow the instructions as specified in the student emergency procedure plan (Classroom Action Plan).

Yard duty bags carried by teachers at recess and lunch will contain a red emergency card. In the event of an allergic reaction by a student, the emergency card will be sent to the office, the student’s medication will be collected and trained staff will follow the instructions as specified in the student emergency procedure plan (Yard Duty Action Plan).

The school will have a generic EpiPen stored in the office as extra back up for students.

**Canteen and special occasions**

The Principal/Well being coordinator will assist the canteen staff in producing an up to date list of suitability of all products sold. If necessary some products may need to be discontinued. In the event that manufactures change production of certain products, this information will be communicated as soon as possible to the school community.

On special school days that include food consumption, teachers will endeavor to contact parents before hand to ensure children at risk of anaphylaxis are catered for. Where possible, the school with attempt to provide an alternative, however, parents of students at risk of anaphylaxis may be asked to assist.

**Out of School Settings**

**Excursions**

- The student’s EpiPen®, ASCIA Action Plan and a mobile phone must be taken on all excursions.
- A staff member who have been trained in the recognition of anaphylaxis and the administration of the EpiPen® must accompany the student on excursions.
- All staff present during the excursion need to be aware if there is a student at risk of anaphylaxis.

References: curriculum@work cd
• Medication must be stored in accordance with manufactures guidelines

Camps and remote settings
• Schools must have in place a risk management strategy for students at risk of anaphylaxis for school camps, developed in consultation with the student’s parents/carers.
• The EpiPen® should remain close to the student and staff must be aware of its location at all times.
• Medication must be stored in accordance with manufactures guidelines