 **ANAPHYLAXIS POLICY**

**Help for non-English speakers**

If you need help to understand the information in this policy, please contact the School Office on (03) 9546 9210.

**PURPose**

To explain to Harrisfield Primary School parents, carers, staff and students the processes and procedures in place to support students diagnosed as being at risk of suffering from anaphylaxis. This policy also ensures that Harrisfield Primary School 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.

**Policy**

**School Statement**

Harrisfield Primary School will fully comply with Ministerial Order 706 and the associated guidelines published by the Department of Education.

**Anaphylaxis**

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 medications.

*Symptoms*

Signs and symptoms of a mild to moderate allergic reactions 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.

*Treatment*

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 auto injector for use in an emergency. These adrenaline auto injectors are designed so that anyone can use them in an emergency.

### **Individual Anaphylaxis Management Plans**

All students at Harrisfield Primary School who are diagnosed by a medical practitioner as being at risk of suffering from an anaphylactic reaction must have an Individual Anaphylaxis Management Plan. When notified of an anaphylaxis diagnosis, the Principal of Harrisfield Primary School is responsible for developing a plan in consultation with the student’s parents/carers.

Where necessary, an Individual Anaphylaxis Management Plan will be in place as soon as practicable after a student enrols at Harrisfield Primary School and before the student’s first day.

Parents and carers must:

* obtain an ASCIA Action Plan for Anaphylaxis from the student’s medical practitioner and provide a copy to the school prior to attending Harrisfield Primary School
* immediately inform the school in writing if there is a relevant change in the student’s medical condition and obtain an updated ASCIA Action Plan for Anaphylaxis
* provide an up- to- date photo of the student for the ASCIA Action Plan for Anaphylaxis when that Plan is provided to the school and each time it is reviewed
* provide the school with a current adrenaline auto injector for the student that is not expired
* participate in annual reviews of the student’s plan.

Each student’s Individual Anaphylaxis Management Plan must include:

* information about the student’s medical condition that relates to allergies and the potential for anaphylactic reaction, including the type of allergies the student has
* information about the signs or symptoms the student might exhibit in the event of an allergic reaction based on a written diagnosis from a medical practitioner
* strategies to minimise the risk of exposure to known allergens while the student is under the care or supervision of school staff, including in the school yard, at camps and excursions, or at special events conducted, organised or attended by the school
* the name of the person(s) responsible for implementing the risk minimisation strategies which have been identified in the Plan
* information about where the student's medication will be stored
* the student's emergency contact details
* an up-to-date ASCIA Action Plan for Anaphylaxis completed by the student’s medical practitioner.

*Review and updates to Individual Anaphylaxis Plans*

A student’s Individual Anaphylaxis Plan will be reviewed and updated on an annual basis in consultation with the student’s parents/carers. The plan will also be reviewed and, where necessary, updated in the following circumstances:

* as soon as practicable after the student has an anaphylactic reaction at school
* if the student’s medical condition, in so far as it relates to allergy and the potential for anaphylactic reaction, changes
* when the student is participating in an off-site activity, including camps and excursions, or at special events including fetes, production and concerts.

Our school may also consider updating a student’s Individual Anaphylaxis Management Plan if there is an identified and significant increase in the student’s potential risk of exposure to allergens at school.

### **Location of plans and adrenaline auto injectors**

If a student is enrolled at Harrisfield Primary School who is at risk:

A copy of each student’s Individual Anaphylaxis Management Plan will be displayed in the First Aid area, Administration Office, Library, Art Room, Science Room, Hall, Staff room and appropriate Learning House. Whilst some students keep their adrenaline auto injector on their person, medication for those that do not will be stored and labelled with their name in the Learning House they are currently in. Auto injectors for general use are stored in the Administration Office.

### **Risk Minimisation Strategies**

The Principal will complete the Department’s Annual Risk Management Checklist for anaphylaxis management to assist with the evaluation and review of this policy and the support provided to students at risk of anaphylaxis.

The risk minimisation strategies that Harrisfield Primary School will put in place to reduce the possibility of a student suffering from an anaphylactic reaction at school include strategies for all school activities, including:

* during classroom activities (including class rotations, specialist classes)
* between classes and other breaks
* during recess and lunchtimes
* camps and excursions, or at special events conducted, organised or attended by the school (e.g. cultural days, concerts, production, events at other schools, competitions or incursions).

To reduce the risk of a student suffering from an anaphylactic reaction at Harrisfield Primary School, we have put in place the following strategies:

* staff and students are regularly reminded to wash their hands before and/or after eating (hand sanitizer is provided)
* students are discouraged from sharing food
* students will be educated in regards to bringing high allergenic foods to school
* parents will be discouraged from supplying cakes etc. for celebrations
* outside garbage bins at school are to remain covered with lids to reduce the risk of attracting insects
* students will wash hands after picking up papers or rubbish in the playground
* staff will be informed of allergens that must be avoided in advance of events
* planning for off-site activities will include risk minimisation strategies for students at risk of anaphylaxis including supervision requirements, appropriate number of trained staff, emergency response procedures and other risk controls appropriate to the activity and students attending
* general use adrenaline autoinjector will be stored at the Administration Office
* a general use adrenaline autoinjector will be taken on all excursions, camps, sporting activities.

**Adrenaline auto injectors for general use**

Harrisfield Primary School will maintain a supply of adrenaline auto injector(s) for general use, as a back-up to those provided by parents and carers for specific students, and also for students who may suffer from a first time reaction at school.

Adrenaline auto injectors for general use will be stored at the Administration Office and labelled “general use”.

The Principal is responsible for arranging the purchase of adrenaline auto-injectors for general use, and will consider:

* the number of students enrolled at Harrisfield Primary School at risk of anaphylaxis
* the accessibility of adrenaline auto-injectors supplied by parents
* the availability of a sufficient supply of auto-adrenaline injectors for general use in different locations at the school, as well as at camps, excursions and events
* the limited life span of adrenaline auto-injectors, and the need for general use adrenaline auto-injectors to be replaced when used or prior to expiry
* the weight of the students at risk of anaphylaxis to determine the correct dosage of adrenaline autoinjector/s to purchase.

### **Emergency Response**

In the event of an anaphylactic reaction, the emergency response procedures in this policy must be followed, together with the school’s general first aid procedures, emergency response procedures and the student’s Individual Anaphylaxis Management Plan.

A complete and up to date list of students identified as being at risk of anaphylaxis is maintained by the Office Manager and stored in theAdministration Office*.* For camps, excursions and special events, a designated staff member will be responsible for maintaining a list of students at risk of anaphylaxis attending the special event, together with their Individual Anaphylaxis Management Plans and adrenaline auto injectors, where appropriate.

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

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| **Step** | **Action** |
|  | * Lay the person flat * Do not allow them to stand or walk * If breathing is difficult, allow them to sit * Be calm and reassuring * Do not leave them alone * Seek assistance from another staff member or reliable student to locate the student’s adrenaline auto injector or the school’s general use auto injector, and the student’s Individual Anaphylaxis Management Plan, * If the student’s plan is not immediately available, or they appear to be experiencing a first time reaction, follow steps 2 to 5 |
|  | Administer an EpiPen or EpiPen Jr (if the student is under 20kg)   * Remove from plastic container * Form a fist around the EpiPen and pull off the blue safety release (cap) * Place orange end against the student’s outer mid-thigh (with or without clothing) * Push down hard until a click is heard or felt and hold in place for 3 seconds * Remove EpiPen * Note the time the EpiPen is administered * Retain the used EpiPen to be handed to ambulance paramedics along with the time of administration   **OR**  Administer an Anapen® 500, Anapen® 300, or Anapen® Jr.   * Pull off the black needle shield * Pull off grey safety cap (from the red button) * Place needle end firmly against the student's outer mid-thigh at 90 degrees (with or without clothing) * Press red button so it clicks and hold for 3 seconds * Remove Anapen® * Note the time the Anapen is administered * Retain the used Anapen to be handed to ambulance paramedics along with the time of administration |
|  | Call an ambulance (000) |
|  | 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 auto injectors are available. |
|  | Contact the student’s emergency contacts. |

If a student appears to be having a severe allergic reaction, but has not been previously diagnosed with an allergy or being at risk of anaphylaxis, school staff should follow steps 2 – 5 as above.

Schools can use either the EpiPen® and Anapen® on any student suspected to be experiencing an anaphylactic reaction, regardless of the device prescribed in their ASCIA Action Plan.

Where possible, schools should consider using the correct dose of adrenaline auto injector depending on the weight of the student. However, in an emergency if there is no other option available, any device should be administered to the student.

### **Communication Plan**

This policy will be available on the Harrisfield Primary School website so that parents and other members of the school community can easily access information about Harrisfield Primary School anaphylaxis management procedures. The parents and carers of students who are enrolled at Harrisfield Primary School and are identified as being at risk of anaphylaxis will also be provided with a copy of this policy.

The Principal is responsible for ensuring that all relevant staff, including casual relief staff and volunteers are aware of this policy and Harrisfield Primary School 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 as well as a photo and instructions on their daily sheet.

The Principal is also responsible for ensuring relevant staff are trained and briefed in anaphylaxis management, consistent with the Department’s [Anaphylaxi`s Guidelines](https://www2.education.vic.gov.au/pal/anaphylaxis/guidance).

### **Staff training**

The Principal will ensure that staff are appropriately trained in anaphylaxis management.

Staff at Harrisfield Primary School will receive appropriate training in anaphylaxis management, consistent with the Department’s *Anaphylaxis Guidelines*.

Staff who are responsible for conducting classes that students who are at risk of anaphylaxis attend, and any further staff that the Principal identifies, must have completed:

* an approved face-to-face anaphylaxis management training course in the last three years, or
* an approved online anaphylaxis management training course in the last two years.

Harrisfield Primary School uses the following training course ASCIA eTraining course with 22303VIC (Supervisor).

Staff are also required to attend a briefing on anaphylaxis management and this policy at least twice per year, (with the first briefing to be held at the beginning of the school 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
* instructions on 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 auto injectors that have been provided by parents or purchased by the school for general use.

When a new student enrols at Harrisfield Primary School who is at risk of anaphylaxis, the Principal will develop an interim plan in consultation with the student’s parents and ensure that appropriate staff are trained and briefed as soon as possible.

A record of staff training courses and briefings will be maintained on the OHS Training Planner and uploaded to the system. (NOTE: A record of all staff anaphylaxis management training courses and the dates of the twice yearly briefing sessions should be maintained as evidence of compliance with the training requirements of Ministerial Order 706 – Anaphylaxis Management in Victorian Schools. The record should include the names of staff who have undertaken the training course and the date the training is due for renewal, as well as the names of the staff who attended the twice yearly briefing to staff (if this is all staff you can just write ‘all staff’). You can record these details in your online EMP or any other document.)

The Principal will ensure that while students at risk of anaphylaxis are under the care or supervision of the school outside of normal class activities, including in the school yard, at camps and excursions, or at special event days, there is a sufficient number of school staff present who have been trained in anaphylaxis management.

**Further information and resources**

The Department’s Policy and Advisory Library (PAL):

* [Anaphylaxis](https://www2.education.vic.gov.au/pal/anaphylaxis/policy)
* [Allergy & Anaphylaxis Australia](https://allergyfacts.org.au/)
* ASCIA Guidelines: [Schooling and childcare](https://allergyfacts.org.au/allergy-management/schooling-childcare)
* Royal Children’s Hospital: [Allergy and immunology](https://www.rch.org.au/allergy/about_us/Allergy_and_Immunology/)

**COMMUNICATION**

This policy will be communicated to our school community in the following ways:

* Available publicly on our school’s website where applicable
* Saved on COMPASS under School Documentation
* Included in staff induction processes, staff training and child safety training processes
* Discussed at staff briefings/meetings as required
* Discussed at parent information nights/sessions where applicable
* Included as annual reference as a COMPASS notification if required
* Made available in hard copy from school administration upon request.

**Review cycle and evaluation**

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| Policy last reviewed | 27/02/2025 |
| Approved by | Principal |
| Next scheduled review date | 03/2026 |