

#### **PURPOSE**

To explain to Birmingham 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 Birmingham 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.

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

#### **POLICY**

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.

### **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 autoinjector for use in an emergency. These adrenaline autoinjectors are designed so that anyone can use them in an emergency.



#### INDIVIDUAL ANAPHYLAXIS MANAGEMENT PLANS

All students at Birmingham 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 Birmingham 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 Birmingham Primary School and where possible, 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 as soon as practicable
- 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 the school with a current adrenaline autoinjector for the student that has not expired;
- participate in annual reviews of the student's Plan.

#### Each student's Individual Anaphylaxis Management Plan must include:

- 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
- 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 Management Plans:

A student's Individual Anaphylaxis Management 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, insofar 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 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 AUTOINJECTORS

#### Anaphylaxis medication and equipment:

- Students with Anaphylaxis must have their medication available in the school sick bay.
- The parent must provide additional medication for Out of Hours School Care if their child attends.
- It is the responsibility of the parent to provide the medication and ensure that it is not out of date.
- Medication held in the sick bay should be checked every 6 months by the First Aid Officer
- It is the responsibility of the parents to provide a medical alert bracelet.
- For Children attending camp, parents/carers need to supply a second autoinjector (one taken from the sickbay plus one other) so the child on camp has a second autoinjector available.

#### **Medications stored at School:**

- The school will provide a box for each child for the storage of their medication. Each box will contain the medication provided by the Parent/Carer with details of their condition, dosage and emergency numbers and Anaphylaxis Management Plan.
- The Medication will be stored in a secure cupboard in the sick bay.
- Medication stored at school should be renewed when expiry date is reached. The First Aid Officer to be responsible for alerting parents to pending expiry date.

### Anaphylaxis Emergency Plan:

- Parents to complete an ASCIA (Australian Society of Clinical Immunology and Allergy) Action Plan that has been signed by the student's medical practitioner and has an up to date photograph of the student.
- The Anaphylaxis Plan will be stored in the First Aid Room and in the classroom. A copy is also to be included in the Excursion Folder. The Plan will be reviewed annually or if the student's circumstances change, in consultation with parents.
- The Plan should include practical strategies for in-school and out of school settings to minimise the risk of exposure to allergens and nominating staff who are responsible for their implementation.
- Staff to follow the procedures outlined in the Management Plan in an emergency situation.
- Parents will be notified should their child experience an anaphylactic reaction.
- An ambulance will be called in the following scenarios:
  - o A student experiencing an anaphylactic reaction as detailed on their Management Plan
  - First Aid Officer/Teacher Responsibility judgement call depending on the degree of allergic reaction regardless of severity
  - Parent request
- All episodes of anaphylaxis will be documented by the school.
- When on yard duty teachers are to wear a fluro vest, a first aid back pack and carry a mobile phone to use in emergency situations.

\*Contents of the first aid bag include: bandaids/bandages, wipes, Ventolin, spacer, emergency cards and photo ID's for children at risk of severe allergic reactions.



#### **RISK MINIMISATION STRATEGIES**

Birmingham Primary School will adopt risk minimisation strategies to reduce the possibility of a student suffering from an anaphylactic reaction at school including:

- during classroom activities (including class rotations, specialist and elective classes)
- between classes and other breaks
- in school canteen
- during recess and lunchtimes
- before and after school
- camps and excursions, or at special events conducted, organised or attended by the school (e.g. class parties, elective subjects and work experience, cultural days, fetes, concerts, events at other schools, competitions or incursions).

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

- staff and students are regularly reminded to wash their hands after eating
- students are discouraged from sharing food
- garbage bins at school are to remain covered with lids to reduce the risk of attracting insects
- gloves must be worn when picking up papers or rubbish in the playground
- school canteen staff are trained in appropriate food handling to reduce the risk of cross-contamination
- year groups will be informed of allergens that must be avoided in advance of class parties, events or birthdays. Nuts or nut products are not to be used.
- a general use EpiPen will be stored in the sick bay

#### ADRENALINE AUTOINJECTORS FOR GENERAL USE

Birmingham Primary School will maintain a supply of adrenaline autoinjector(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 autoinjectors for general use will be stored in the Sick Bay and labelled "general use".

The First Aid Officer is responsible for arranging the purchase of adrenaline autoinjectors for general use, and will consider:

- the number of students enrolled at Birmingham Primary School at risk of anaphylaxis
- the accessibility of adrenaline autoinjectors supplied by parents
- the availability of a sufficient supply of autoinjectors for general use in different locations at the school, as well as at camps, excursions and events
- the limited life span of adrenaline autoinjectors, and the need for general use adrenaline autoinjectors to be replaced when used or prior to expiry.

#### **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 with current photo of students identified as being at risk of anaphylaxis is maintained by First Aid Officer and stored in the Sick Bay, the office, the staff room, yard duty back packs, copy given to all staff and is made available on the shared staff drive. 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 autoinjectors, where appropriate.



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

Step	Action	
1.	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	
	<ul> <li>Seek assistance from another staff member or reliable student to locate the student's adrenaline autoinjector or the school's general use autoinjector, and the student's Individual Anaphylaxis Management Plan, stored in the sick bay.</li> <li>If the student's plan is not immediately available, or they appear to be experiencing a first</li> </ul>	
	time reaction, follow steps 2 to 5	
2.	Administer an EpiPen or EpiPen Jr (if the student is under 20kg)	
	Remove from plastic container	
	<ul> <li>Form a fist around the EpiPen and pull off the blue safety release (cap)</li> </ul>	
	<ul> <li>Place orange end against the student's outer mid-thigh (with or without clothing)</li> </ul>	
	<ul> <li>Push down hard until a click is heard or felt and hold in place for 3 seconds</li> </ul>	
	Remove EpiPen	
	Note the time the EpiPen is administered	
	<ul> <li>Retain the used EpiPen to be handed to ambulance paramedics along with the time of</li> </ul>	
	administration	
	OR	
	Administer an Anapen® 500, Anapen® 300, or Anapen® Jr.	
	Pull off the black needle shield	
	<ul> <li>Pull off grey safety cap (from the red button)</li> </ul>	
	<ul> <li>Place needle end firmly against the student's outer mid-thigh at 90 degrees (with or without clothing)</li> </ul>	
	<ul> <li>Press red button so it clicks and hold for 10 seconds</li> </ul>	
	Remove Anapen®	
	Note the time the Anapen is administered	
	<ul> <li>Retain the used Anapen 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	
7.	Anaphylaxis), further adrenaline doses may be administered every five minutes, if other adrenaline autoinjectors are available.	
5.	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.

[Note: If in doubt, it is better to use an adrenaline autoinjector than not use it, even if in hindsight the reaction is not anaphylaxis. Under-treatment of anaphylaxis is more harmful and potentially life threatening than over-treatment of a mild to moderate allergic reaction. Refer to <a href="Frequently asked questions">Frequently asked questions</a> — <a href="Anaphylaxis">Anaphylaxis</a>].

#### **COMMUNICATION PLAN**

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

The First Aid Officer is responsible for ensuring that all relevant staff, including casual relief staff, canteen staff and volunteers are aware of this policy and Birmingham Primary School's 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, their role in responding to an anaphylactic reaction and where required, the identity of students at risk.



# **ANAPHYLAXIS POLICY**

#### **STAFF TRAINING**

- Staff at Birmingham 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.
- Staff are also required to attend a briefing on anaphylaxis management and this policy at least twice per
  year, facilitated by a staff member who has successfully completed an anaphylaxis management course
  within the last 2 years including First Aid Officer.

#### Each briefing will address:

- this policy
- the causes, symptoms and treatment of anaphylaxis
- the identity 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

When a new student enrols at Birmingham Primary School who is at risk of anaphylaxis, the First Aid Officer 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 U Drive.

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**

- School Policy and Advisory Guide:
  - Anaphylaxis
  - o Anaphylaxis management in schools
- Allergy & Anaphylaxis Australia: Risk minimisation strategies
- ASCIA Guidelines: <u>Schooling and childcare</u>

- Royal Children's Hospital: Allergy and immunology
- This policy is linked to The First Aid Policy, Asthma Policy, Health Needs Policy and the Excursion and Camps Policy.

## **REVIEW CYCLE AND EVALUATION**

Policy last reviewed	6 <sup>th</sup> OCTOBER 2021
Approved by	Principal
Next scheduled review date Annually	October 2022

This Policy will be available to the school community on the Birmingham Primary School Website

The First Aid Officer 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.