



## Help for non-English speakers

If you need help to understand the information in this policy please contact Kingsville Primary School.

## PURPOSE

To explain to Kingsville 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 Kingsville 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.
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## POLICY

### School Statement

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

### 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 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 Kingsville 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/Leaderships or Nominee of Kingsville 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 enrolls at Kingsville 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 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 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:

- 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

A copy of each student's Individual Anaphylaxis Management Plan will be stored with their ASCIA Action Plan for Anaphylaxis in the Sickbay, together with the student's adrenaline autoinjector. Adrenaline autoinjectors must be labelled with the student's name.

#### Risk Minimisation Strategies

##### Sickbay

- A folder containing all student action plans for allergies and anaphylaxis is located in the sickbay.
- A poster displaying the names and photos of all children with allergies and anaphylactic is located on the wall in the sickbay.
- all auto injectors are stored in sickbay clearly marked container with photograph of the student
- a backup auto injector is stored in sickbay
- sickbay and first aid kits only stock non-latex gloves

##### Yard

- Emergency cards identifying children with anaphylaxis are kept in yard duty bags which accompany teachers on yard duty.
- Staff have been instructed that in the event of an anaphylactic emergency, staff on duty must stay with the child. They are to send two children to the office with an emergency anaphylaxis card. First aid staff will then go to the location with the students and backup Adrenaline auto injectors.
- bins with lids are provided for the disposal and safe containment of rubbish
- staff are trained to provide an emergency response to anaphylaxis
- student adrenaline auto injectors are easily accessible from the first aid room (sickbay)

### **Off-site School Settings (ie. Camps/Excursions)**

- The student's Adrenaline auto injectors along with a copy of the ASCIA Action Plan must be taken on all field trips/excursions.
- the staff member in charge of Excursion/Camp should develop an emergency procedure that sets out clear roles and responsibilities in the event of an anaphylactic reaction
- The staff member in charge of Excursions/Camps must consult parent/guardian in advance to discuss issues that may arise, to develop an alternative food menu or request the parent/guardian send a meal if required.
- The staff member in charge of Excursions/Camps must be aware of what local emergency services are in the area and how to access them.
- Parents of a child at risk of an anaphylactic reaction will be strongly encouraged to supply a second in-date adrenaline auto-injection device(s) for children attending overnight camps or excursions to remote areas.

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### **Adrenaline auto injectors for general use**

Kingsville 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 at Sickbay and labelled "general use".

The Principal/Leadership or Nominee is responsible for arranging the purchase of adrenaline autoinjectors for general use, and will consider:

- the number of students enrolled at Example 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
- 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 First Aide Officer/OHS Nominee and stored at First Aide Room /Sickbay. 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.	<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 or the school's general use autoinjector, and the student's Individual Anaphylaxis Management Plan, stored at First Aide Room/Sickbay.</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.	<p>Administer an EpiPen or EpiPen Jr</p> <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> <p><b>OR</b></p> <p>Administer an Anapen® 500, Anapen® 300, or Anapen® Jr.</p> <ul style="list-style-type: none"> <li>• Pull off the black needle shield</li> <li>• Pull off grey safety cap (from the red button)</li> <li>• Place needle end firmly against the student's outer mid-thigh at 90 degrees (with or without clothing)</li> <li>• Press red button so it clicks and hold for 3 seconds</li> <li>• Remove Anapen®</li> <li>• Note the time the Anapen is administered</li> <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 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.

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 autoinjector 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.

### **Anaphylactic episode during recess and lunch times**

1. Identify the student and verify they have an individual anaphylactic management plan.
2. Contact the office immediately and if feasible take the child to the sick bay and locate the management plan.
3. if the child cannot be moved from the playground, send for the adrenaline auto injector (emergency cards are located in the yard duty bags) and administer treatment there whilst contacting **000** by a mobile phone for emergency medical assistance
  - clearly explain that this child is suffering a suspected anaphylactic reaction

### **Anaphylactic episode during instruction time (in classrooms or specialists)**

1. Identify the student and verify they have an individual anaphylactic management plan. See classroom roll or display in each room.
2. Get assistance from classroom teacher next door as help is sought from the office. Move child to the office if possible, and then undertake emergency response management.
3. The office will ring **000** for emergency medical assistance and notify relevant staff to provide support as soon as practicable.
4. Communication to parents  
this information will be provided to parents at the start of each school year via the newsletter. A separate note may be sent home to parents at specific year levels if deemed necessary.

### **Communication Plan**

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

The Principal/Leadership is responsible for ensuring that all relevant staff, including casual relief staff, and volunteers are aware of this policy and Kingsville 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.

The Principal is also responsible for ensuring relevant staff are trained and briefed in anaphylaxis management, consistent with the Department's [Anaphylaxis Guidelines](#).

## **Staff Training**

The Principal/Leadership will ensure that the following school staff are appropriately trained in anaphylaxis management:

- School staff who conduct classes attended by students who are at risk of anaphylaxis

The school will provide training for:

- All school staff who conduct classes with students with a medical condition that relates to allergy and the potential for anaphylactic reaction; and
- Any further school staff that the principal identifies, based on an assessment of the risk of an anaphylactic reaction occurring while a student is under the care or supervision of the school.

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.

When a student with a medical condition that relates to allergy and the potential for anaphylactic reaction is 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 events conducted, organised or attended by the school, the principal will ensure that there is a sufficient number of school staff present who have been trained.

The principal/Leadership will ensure that school staff who have been identified as requiring training:

- have successfully completed an anaphylaxis management training course (Course in First Aid Management of Anaphylaxis 22099VIC or Course in Anaphylaxis Awareness 10313NAT) in the three years prior; or
- complete an online anaphylaxis management training course in the two years prior;
- Have 2 staff– that have completed a course in Verifying the Correct Use of Adrenaline Auto injector Devices 22303VIC (School Anaphylaxis Supervisor).
- have all staff participate in a briefing, to occur twice per calendar year with the first one to be held at the beginning of the school year, by a member of school staff who has successfully completed an anaphylaxis management training course in the 12 months prior, on:
  - The school's anaphylaxis management policy;
  - the causes, symptoms and treatment of anaphylaxis;
  - the identities of students with a medical condition that relates to allergy and the potential for anaphylactic reaction, and where their medication is located;
  - How to use an adrenaline auto injector, including hands on practise with a trainer adrenaline auto injector.
  - the school's general first aid and emergency response procedures; and
  - The location of, and access to, adrenaline auto injectors that have been provided by parents or purchased by the school for general use.

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 including School Anaphylaxis Supervisor. 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.

When a new student enrolls at Kingsville Primary School who is at risk of anaphylaxis, the Principal/Leadership or Nominee 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 all staff training courses and briefings will be maintained and recorded on the training register. All staff certificates are maintained online and in hardcopy.

The Principal/Leadership 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](#)
- [Allergy & Anaphylaxis Australia](#)
- ASCIA Guidelines: [Schooling and childcare](#)
- Royal Children’s Hospital: [Allergy and immunology](#)

#### POLICY REVIEW AND APPROVAL

Policy last reviewed	June 2023
Approved by	Principal
Next scheduled review date	June 2024

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.