



ANAPHYLAXIS POLICY

Anaphylaxis is a severe, rapidly progressive allergic reaction that is potentially life threatening. Although allergic reactions are common in children, severe life threatening reactions are uncommon and deaths are rare. However deaths have occurred and anaphylaxis must therefore be regarded as a medical emergency. 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 medications.

Rationale:

We believe that the safety and wellbeing of students who are at risk of anaphylaxis is a whole school responsibility and we are committed to providing as far as practicable, a safe and healthy environment for all students.

Goals:

- To raise awareness about allergies and anaphylaxis among the school community
- To actively involve the parents in developing risk minimisation strategies and management strategies for their child and for other children in the school community
- To ensure that each staff member has adequate knowledge of allergies, anaphylaxis and emergency procedures
- To facilitate documentation and communication in order to ensure the safety and wellbeing of children at risk of anaphylaxis

Implementation:

PREVENTION & EMERGENCY MANAGEMENT PLAN.

PREVENTION

Parents need to be fully informed of the School's Anaphylaxis Policy and procedures and need to ensure that all care has been taken to exclude nut products from food sent to school.

Staff members should assume that the food item, which is the known allergen e.g. peanut, could come into the classroom. It can be contained in other foods like biscuits, cakes and health bars. It can be contained in a variety of products used in the classroom. Therefore teachers need to carefully check the products used in the classroom for class activities. When in doubt teachers are to consult with parents as each child's case is individual.

The following steps will help create a safe environment:

SCHOOL LUNCHES

A letter will be sent to each family requesting that food containing nuts and nut products is not brought to school. Term reminders in the Candela will remind families of this serious matter.

NO SHARING OF FOOD POLICY

All students are reminded to eat only their own food in the classroom and on the yard.

A 'no sharing of food' policy at St Mary's ensures that everyone is doing the same thing and helping to prevent a reaction in the allergic child. **Students at risk are to only eat food supplied and prepared by their parents.** A reminder of this policy will be published each term in the Candela.

SPECIAL OCCASIONS – CLASSROOM PARTIES

Treats brought to school for birthdays and special occasions could include fruit, vegetables, plain potato chips, plain lemonade icy poles and non-edible treats such as stickers. Some children need to have their own treat box from home and/or the teacher can provide a non-edible reward as an alternative. Treats brought to school for birthdays or special occasions should include the above products. A reminder of this policy will be published each term in the Candela.

EATING TIMES

Students are to have clearly labelled lunch boxes stored in school bags to avoid a mix up of lunches. Junior class teachers can help by checking that the anaphylactic child has the correct lunch in front of them. Eating times will be well supervised by staff and lunches should be eaten in a designated area. Teachers are requested to check lunches in the classroom where there is an anaphylactic child. If the allergen e.g. peanut butter is brought to school, the child with that food will be asked to choose a friend and move to another classroom where there are no anaphylactic children.

COOKING

Classroom and specialist teachers are to always inform parents and seek permission for an anaphylactic child to participate in any cooking activity at school.

EXCURSIONS

The classroom teacher has the responsibility of taking the Epipen and/ or appropriate medication to the excursion and the lunch of the anaphylactic student is to be separate from the rest of the group. Additional supervision may be required for the anaphylactic student.

CAMPS

Appropriate documentation needs to be completed by the parent of a child who is anaphylactic and this action plan is to be taken on camp. Camp personnel are to be informed of students with allergies. Appropriate medication is to be packed separately for each child. Arrangements may need to be made for special food to be prepared or taken to camp.

EPIPEN MONITORING:

The student Epipens are labelled and stored in the cupboard in the first aid room in individual plastic bags with a 'sign out and in sheet'. When an adult takes a student's Epipen (on an excursion etc) they must sign the sheet and leave it and the bag. When they return the Epipen they will need to sign it back in and put it in the plastic bag. This is a safeguard checking system to ensure the epipens are operational. All staff will receive training in using an epipen.

PREVENTION STRATEGIES TO BE IMPLEMENTED IN ALL CLASSROOMS

1. Observe anaphylactic child briefly when you greet them in the morning.
2. If an anaphylactic child says they are unwell take it seriously. Ask for staff support.
3. Implement a no sharing of food policy in the classroom.
4. Discourage any known allergen from being brought into the classroom.
5. Encourage children to inform teachers if someone has brought the food item into the classroom.
6. If a child near the anaphylactic child has eaten food containing the allergen staff need to ensure that the child has his/her hands washed carefully. The desk and surrounding area is wiped down with wipes to avoid contact of the food with the anaphylactic child.

IDENTIFYING CHILDREN IN THE SCHOOL

- It is the responsibility of the parent to inform the school regarding an anaphylactic child. The parent is to complete an appropriate action plan for the child and supply necessary medication.
- Photos and action plans are to be displayed in the first aid room. Parental permission is to be given for display.
- Classroom teacher will have photos of anaphylactic children and their action plan placed in their special orange Emergency folder. Parents need to be informed of this procedure.
- EpiPens need to be stored individually in the first-aid room. All staff to be made aware of location of epiPens. It is not appropriate to leave epiPens in the classroom or in children's bags. Staff will sign out the epiPens when taking them on an excursion.
- Expiry dates of epiPens need to be checked by both parents and staff.
- Each epiPen is to be labelled with the child's name and photo for easy access. Child may not be able to give name in an emergency.
- A student must be medicated with their personal EpiPen. No other EpiPen can be used.
- **Specialist teachers** will receive information to keep for their files.
- **Emergency teachers** are to be made aware of school procedures and location of information. An emergency teacher must always seek the assistance of other staff and not administer epiPen unless trained.

EMERGENCY MANAGEMENT PLAN

In case of an allergic reaction teachers are to take the following steps.

- 1) Contact the school office or teacher in the adjoining classroom.
CALL AMBULANCE – (SEVERE ALLERGIC REACTION) and inform parents.**

If the reaction is mild close supervision of the child is necessary because this can quickly develop into a serious reaction

- 2) Office staff will arrange for the appropriate medication e.g. epipen to be taken to the classroom or alternate location and notify parents.
- 3) Stay with the child at all times.
- 4) Alert the teachers near you to assist with other students.
- 5) Follow instructions on the child's action plan for anaphylaxis.
- 6) When staff member arrives with emergency bag and a decision has been made to administer the epipen ensure that the child's clothing near thigh has been removed.
- 7) If an ambulance has been called a staff member will be at the school gate to guide ambulance to correct location.

YARD DUTY

- 1) If a child appears to be having a reaction even if it is mild, never leave the child alone to walk to first aid.
- 2) Staff are to use the red card system to notify staff of an emergency and make clear name of child and the type of emergency.

3) CALL AN AMBULANCE – (SEVERE ALLERGIC REACTION) and notify parents

If the reaction is mild, observe the child because this can quickly develop into a serious reaction.

- 4) Other staff will remove children from area to allow for some space and quiet.
- 5) Staff members arrive with emergency kit including epipen and mobile phone.
- 6) Follow instructions on action plan for anaphylaxis. This will be available with the emergency bag.
- 7) When staff member arrives with emergency kit and a decision has been made to administer the epipen ensure that the child's clothing near thigh has been removed. (provide blanket for privacy)
- 8) If an ambulance has been called a staff member will meet ambulance at school entrance to help them easily locate child.
- 9) Notify parents immediately.

PLEASE NOTE: Two epipens may be present in the child's emergency bag. Only use one epipen. The second one is there only as a back up if something happens to the first. **A second dose of adrenaline is a medical decision. The child must be medicated with their personal epipen. No other epipen can be used.**

Forms relevant to this policy

1. Letter to parents regarding nut products.
2. Anaphylaxis action plans for individual students.

Ratified by SAB August 2011