



ANAPHYLAXIS

POLICY

WOADY YALOK PRIMARY SCHOOL:

Rationale:

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, a 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.

Implementation:

INDIVIDUAL ANAPHYLAXIS MANGEMENT PLANS:

Note: A template of an individual anaphylaxis management plan can be found at the Department's website: <http://www.sofweb.vic.edu.au/wellbeing/support/anaphyl.htm>

- The principal 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:
 1. Information about the diagnosis, including the type of allergy or allergies the student has (based on a diagnosis from a medical practitioner).
 2. Strategies to minimise 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.

Anaphylaxis Guidelines of prevention strategies that can be put in place at each campus include:-.

- The name of the person/s responsible for implementing the strategies.
- Information on where the student's medication will be stored.

References: Exec Memo 2002/052 – Benchmark for School Cash Reserves
Circular 272/2000 – Investment of School Funds;

Vic Govt Schools Reference Guide www.eduweb.vic.gov.au/referenceguide/pdf/7-9.pdf

- The student's emergency contact details.
- An emergency procedures plan (ASCIA Action Plan), provided by the parent, that:
 - sets out the emergency procedures to be taken in the event of an allergic reaction;
 - is signed by a medical practitioner who was treating the child on the date the practitioner signs the emergency procedures plan; and
 - 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:

- annually, and as applicable,
- 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.
- inform the school if their child's medical condition changes, and if relevant provide an updated emergency procedures plan.
- provide an up to date photo for the emergency procedures plan when the plan is provided to the school and when it is reviewed.

Evaluation:

- This policy, plus investment levels, investment terms and types of investments are required to be formally minuted and reviewed by school council regularly.

This policy was last ratified by School Council in....

October 2016