

ANAPHYLAXIS COMMUNICATION PLAN

BACKGROUND

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 the school.

Adrenaline given through an EpiPen® or Anapen, autoinjector to the muscle of the outer mid thigh is the most effective first aid treatment for anaphylaxis. This policy should be read in conjunction with the school's Anaphylaxis Policy.

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.

The key reference and support for the school regarding anaphalaxis is the [DEECD Anaphalaxis Guidelines](#)

INDIVIDUAL ANAPHYLAXIS MANGEMENT PLANS

Note: A template of an individual anaphylaxis management plan can be found on Page 26 [DEECD Anaphalaxis Guidelines](#)

- 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 at the school.
- The individual anaphylaxis management plan will set out the following:
 - ✓ Information about the diagnosis, including the type of allergy or allergies the student has (based on a diagnosis from a medical practitioner).
 - ✓ 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.

Note: Appendix 2 of the Anaphylaxis Guidelines contains advice about a range of prevention strategies that can be put in place.

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

Note: The red and blue ‘ASCIA Action Plan’ is the most common form of emergency procedures plan that is provided by medical practitioners to parents when a child is diagnosed as being at risk of anaphylaxis.

- Download from [DEECD Health Support Planning Policy](#)

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 (ASCIA Action Plan).
- inform the school if their child’s medical condition changes, and if relevant provide an updated emergency procedures plan (ASCIA Action Plan).
- provide an up to date photo for the emergency procedures plan (ASCIA Action Plan) when the plan is provided to the school and when it is reviewed.

COMMUNICATION PLAN

LOCATION of EpiPens:

LOCATION	EpiPen or Anapen	Student	ALLERGY
Staffroom above microwave	EpiPen		

Relieving/ Volunteer / Sport or other Activities Staff

Anaphylaxis information will be provided to all Relieving/Volunteer staff regarding students and this will be provided by the First Aid Coordinator. This information will be an Action Plan for Anaphylaxis which will contain the student’s photo name and date of birth, allergens to be avoided, contact details and the action required if the student has a mild or serious reaction. This information will also be contained in the ‘Classroom Information Booklet’ located in each classroom for CRT teachers.

Responding to an Anaphylactic Reaction

Classrooms

In the event of an anaphylactic reaction in the classroom, the teacher is to immediately implement the student’s emergency procedures plan. A reliable student, or ESO, must be sent to the office for

staff to bring the EpiPen® or Anapen® and to alert the principal. The teacher is to stay with the student who is experiencing the reaction and ring 000. All teachers and ESO staff having contact with a student with anaphylaxis will have completed an accredited Anaphylaxis Course and regular refresher training. Information pertaining to the individual student will be contained in the 'Classroom Information Booklet' kept in each classroom for CRT information.

Yard

Teachers should not leave a student who is experiencing an anaphylactic reaction unattended. The teacher must send the 'red card' found in the Yard Duty Folder, to the staffroom so another teacher can bring the EpiPen® or Anapen® to the teacher on duty. Another staff member must ring 000 and the child's parents in that order.

Special Event Days, Excursions and Camps

- Prior to leaving the school for any event, excursion or camp the teacher in charge will consult with the First Aid Officer, to identify any student with anaphylaxis. The First Aid Officer will provide a medical summary identifying the student's anaphylaxis symptoms and the known allergens which may affect him/her and information regarding any other medical issues.
- The First aid Officer will also identify any foreseeable risks associated with the event location and advise on ways these can be minimised. Each child suffering anaphylaxis must also be warned or advised about any potential environmental risks, and or behaviours, associated with the event location.
- Children at risk through ant bite or insect stings must bring a stool on which to sit during the event and administer repellents throughout the day if advisable. Clothing and footwear must be protective in nature.
- In the event of an anaphylactic reaction away from school the teacher is to immediately implement the student's emergency procedure plan, call an ambulance, and then notify the school principal who will arrange for parents or guardians to be notified.
- All children with anaphylaxis must carry their own EpiPen or Anapen in a back pack with them during the excursion or camp. The teacher must carry the child's second pen with them at all times during the event. This teacher must also have a mobile phone in order to ring 000, the child's parent and the school principal, in the event of a reaction. Another responsible adult can be assigned the duty of calling these numbers whilst the teacher attends to the student.
- Times of the reaction, and EpiPen administering, must be noted for ambulance personnel.

Post-incident

It is expected that after an incident has occurred and has been resolved, that staff members involved will engage in the following activities:

- Completion of a CASES 21 Incident / Accident Report form including full details of the event and what occurred;
- Collection of the student's personal effects (if he is transported by ambulance and does not have them) for return to school
- Debrief with students directly involved as witnesses to the event
- Debrief of staff involved
- Communication with the principal as appropriate regarding the particulars of the incident, actions taken and outcomes
- Principal to discuss with parents (later) what occurred and ask them to seek medical advice on how it may be prevented in future
- First Aid Coordinator to review the student's individual management plan;

- Implement updated risk prevention strategies (where applicable).

Administration of an Epipen® or Anapen®:

- Lay person flat, do not stand or walk. If breathing is difficult allow to sit.
- Give Epipen® or Anapen® (or Epipen® or Anapen® Jnr if under 20kgs).
- Phone ambulance (call 000).
- Contact family or emergency contact.
- A further adrenalin dose may be given if there is no response after 5 minutes
- Note the time of administration and advise paramedics when they arrive. Hand the paramedics the used adrenalin auto injector(s).

SIGNS OF A SEVERE ANAPHYLAXIC REACTION:

- *Difficult noisy breathing*
- *Swelling of tongue*
- *Swelling / tightness in throat*
- *Difficulty talking/ and or hoarse voice*
- *Wheeze or persistent cough*
- *Persistent dizziness or collapse*
- *Pale and floppy (young children)*

All staff will be briefed once each semester by a staff member who has up to date anaphylaxis management training on:

- the school's anaphylaxis management policy
- the causes, symptoms and treatment of anaphylaxis
- the identities of students diagnosed at risk of anaphylaxis and where their medication is located
- how to use an autoadrenaline injecting device
- the school's first aid and emergency response procedures

Note: An information DVD will be used for this purpose at staff briefings.

References :

- [DEECD Anaphylaxis Policy](#)
- [DEECD Health Support Planning Policy](#)

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