
ESSEX HEIGHTS PRIMARY SCHOOL **ANAPHYLAXIS POLICY**

1. PHILOSOPHICAL BASIS

We, at Essex Heights Primary School are committed to providing a safe and healthy environment in which children at risk of anaphylaxis can participate equally in all aspects of schooling. This policy aims to minimise the risk of an anaphylactic reaction occurring whilst the child is in the care of Essex Heights Primary School and ensure that staff members respond appropriately to an anaphylactic reaction. We recognise that the key to prevention and management of anaphylaxis in schools is knowledge, awareness and planning.

This policy applies when a child is diagnosed, by a qualified medical practitioner, as being at risk of anaphylaxis is enrolled at Essex Heights Primary School.

2. LEGISLATIVE REQUIREMENTS

This policy ensures that Essex Heights PS adheres to the relevant legislation and guidelines:

Ministerial Order 706 and associated guidelines on anaphylaxis management in schools

3. GUIDELINES

3.1 RESPONSIBILITIES

- 3.1.1 It is the responsibility of the parent/guardian of the child with anaphylaxis to inform the school upon enrolment or diagnosis of the condition.
- 3.1.2 It is the responsibility of Essex Heights Primary School to communicate information regarding children with anaphylaxis to relevant staff as soon as practicable once informed of the diagnosis.
- 3.1.3 As per DET regulations and as per MO706 all Essex Heights staff will undertake the ASCIA online e-training course and have their competency in using an auto-injector tested every 2 years. Or have done the first aid management of Anaphylaxis 22300VIC every 3 years.
- 3.1.4 As per DET regulations, schools with a child or young person at risk of anaphylaxis are required to conduct twice yearly briefings on anaphylaxis management. At these briefings Essex Heights Primary School Staff will practise with the trainer adrenaline auto-injectors that have been provided to the school. During these briefings, we will discuss the first aid and emergency response procedures for an anaphylactic episode. A reminder of the school's anaphylaxis policy and where it can be located will also be given at these briefings.

- 3.1.5 Essex Heights PS will provide five back-up Adrenaline auto-injectors (Epipens), one being junior dose. One senior back-up Adrenaline auto-injector will be sent on outings/excursions/camps when students with a diagnosis of anaphylaxis are in attendance. In the event of simultaneous excursions, distribution of Epipens will be at the Principal's discretion.

3.2 PLANNING / PREVENTION / MANAGEMENT

- 3.2.1 All Essex Heights PS staff is required to be familiar with this policy and Ministerial Order 706 and the Anaphylaxis Guidelines for Victorian Government Schools.
- 3.2.2 It is expected that parents of children with anaphylaxis will provide the school:
- 3.2.2.1 Written instruction in the form of an anaphylaxis action plan, detailing substances the child is allergic to and emergency response procedures to be taken should a reaction occur.
 - 3.2.2.2 An Individual Anaphylaxis Management Plan prepared in consultation with a General Medical Practitioner. This plan must be provided to school staff (First Aid Officer) and be reviewed annually and when a student is to participate in an off-site excursion or special event.
 - 3.2.2.3 An Epipen or other medication (*within use by date*) necessary for the emergency management of anaphylaxis for their child.
 - 3.2.2.4 Parents must inform the school if a student's medical condition changes and provide an updated ASCIA action plan with a current photo.
- 3.2.3 Anaphylaxis management plans will be displayed in prominent staff areas and provided to the child's teachers.
- 3.2.4 Medication required for the emergency management of Anaphylaxis will be stored under the following conditions:
- 3.2.4.1 In a central, unlocked area accessible to all staff;
 - 3.2.4.2 Clearly labelled with the child's name; and
 - 3.2.4.3 With a copy of the child's anaphylaxis plan.
- 3.2.5 Where deemed necessary, in consultation with the parents, arrangements may be made to store a second Adrenaline auto-injector pen in the child's classroom.
- 3.2.6 Appropriate medication, e.g. Epipens, will be taken on all excursions from the school. It is the responsibility of the child's classroom teacher to ensure that this occurs.
- 3.2.7 Risk minimisation strategies will be discussed and implemented in consultation with the parents, school health staff, the student and the classroom teacher to plan specific risk minimisation for the individual child.

- 3.2.8 A Risk Management Checklist (Appendix A) will be compiled annually by designated school staff (First Aid Officer).
- 3.2.9 An Anaphylaxis Communication Plan (Appendix B) will show how information about anaphylaxis is provided to all staff, parents and community.

3.3 EMERGENCIES

- 3.3.1 In any event that a child with known anaphylaxis is suspected to be having a reaction, the anaphylaxis plan will be followed in accordance with Ministerial Order 706 and the Anaphylaxis Guidelines for Victorian Government Schools.
- 3.3.2 In the event that a child not known to be anaphylactic is suspected of having a reaction, an ambulance should be called immediately. Adrenaline auto-injectors purchased by the school can be used in the event of an emergency where no other devices are available and where a student is having a first-time reaction without a medical diagnosis of anaphylaxis.
- 3.3.3 Where an anaphylaxis episode has occurred, and the provided medication has been used, the child must not return to school until a replacement adrenaline auto-injectors is made available by the parents.
- 3.3.4 Individual anaphylaxis management plans including ASCIA plans must be updated when a student's medical condition changes and as soon as possible after a student has an anaphylactic reaction at school.

3.4 EVALUATION

This policy will be reviewed in accordance with the Essex Heights PS schedule.

3.5 APPENDICES

- A Annual Risk management Checklist
- B Anaphylaxis Communication Plan
- C Suggested Strategies to Avoid Allergens

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School Council – May 2019