## MOOROOPNA PARK PRIMARY SCHOOL NO. 5088

Policy Statement: MANAGEMENT - ANAPHYLAXIS

### Responsibility: Principal, Staff and Relevant Community Members

This Policy was last ratified by School Council in 2016.

**Ministerial Order 706 – Anaphylaxis Management in Schools**

### School Statement

Mooroopna Park Primary School will fully comply with Ministerial Order 706 and the associated Guidelines published and amended by the Department from time to time.

It is the School’s responsibility to develop and maintain an Anaphylaxis Management Policy.

### Individual Anaphylaxis Management Plans

The Principal will ensure that an Individual Anaphylaxis 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 enrols, and where possible before their first day of school.

The Individual Anaphylaxis Management Plan will set out the following:

* information about the student’s medical condition that relates to allergy and the potential for anaphylactic reaction, including the type of allergy/allergies the student has (based on a written diagnosis from a Medical Practitioner);
* strategies to minimise the risk of exposure to known and notified allergens while the student is under the care or supervision of School Staff, for in-school and out-of-school settings 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 strategies;
* information on where the student's medication will be stored;
* the student's emergency contact details; and
* an ASCIA Action Plan.

School Staff will then implement and monitor the student’s Individual Anaphylaxis Management Plan.

The student’s Individual Anaphylaxis Management Plan will be reviewed, in consultation with the student’s Parents in all of the following circumstances:

* annually;
* if the student's medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, changes;
* as soon as practicable after the student has an anaphylactic reaction at School; and
* when the student is to participate in an off-site activity, such as camps and excursions, or at special events conducted, organised or attended by the School (eg. class parties, elective subjects, cultural days, fetes, incursions).

**It is the responsibility of the Parents to:**

* provide the ASCIA Action Plan;
* inform the School in writing if their child’s medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, changes and if relevant, provide an updated ASCIA Action Plan;
* provide an up to date photo for the ASCIA Action Plan when that Plan is provided to the School and when it is reviewed; and
* provide the School with an Adrenaline Autoinjector that is current and not expired for their child.

### Prevention Strategies

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| Keep a copy of the student's Individual Anaphylaxis Management Plan in the classroom. Be sure the ASCIA Action Plan is easily accessible even if the Adrenaline Autoinjector is kept in another location. |
| Liaise with Parents about food-related activities ahead of time. |
| Use non-food treats where possible, but if food treats are used in class it is recommended that Parents of students with food allergy provide a treat box with alternative treats. Treat boxes should be clearly labelled and only handled by the student. |
| Never give food from outside sources to a student who is at risk of anaphylaxis. |
| Treats for the other students in the class should not contain the substance to which the student is allergic. It is recommended to use non-food treats where possible. |
| Products labelled 'may contain traces of nuts' should not be served to students allergic to nuts. Products labelled ‘may contain milk or egg’ should not be served to students with milk or egg allergy and so forth. |
| Be aware of the possibility of hidden allergens in food and other substances used in cooking, food technology, science and art classes (e.g. egg or milk cartons, empty peanut butter jars). |
| Ensure all cooking utensils, preparation dishes, plates, and knives and forks etc are washed and cleaned thoroughly after preparation of food and cooking. |
| Have regular discussions with students about the importance of washing hands, eating their own food and not sharing food. |
| A designated staff member should inform casual relief teachers, specialist teachers and volunteers of the names of any students at risk of anaphylaxis, the location of each student’s Individual Anaphylaxis Management Plan and Adrenaline Autoinjector, the School’s Anaphylaxis Management Policy, and each individual person’s responsibility in managing an incident. ie seeking a trained staff member. |

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| Sufficient School Staff on yard duty must be trained in the administration of the Adrenaline Autoinjector (i.e. EpiPen®/ Anapen®) to be able to respond quickly to an anaphylactic reaction if needed. |
| The Adrenaline Autoinjector and each student’s Individual Anaphylaxis Management Plan are easily accessible from the yard, and staff should be aware of their exact location. (Remember that an anaphylactic reaction can occur in as little as a few minutes). |
| A Communication Plan is in place so the student’s medical information and medication can be retrieved quickly if a reaction occurs in the yard. All staff on yard duty must be aware of the School’s Emergency Response Procedures and how to notify the general office/first aid team of an anaphylactic reaction in the yard. |
| Yard duty staff must also be able to identify, by face, those students at risk of anaphylaxis. |
| Students with anaphylactic responses to insects should be encouraged to stay away from water or flowering plants. School Staff should liaise with Parents to encourage students to wear closed shoes and long-sleeved garments when outdoors. |
| Keep lawns and clover mowed and outdoor bins covered. |
| Students should keep drinks and food covered while outdoors. |

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| Sufficient School Staff supervising the special event must be trained in the administration of an Adrenaline Autoinjector to be able to respond quickly to an anaphylactic reaction if required. |
| School Staff should avoid using food in activities or games, including as rewards. |
| For special occasions, School Staff should consult Parents in advance to either develop an alternative food menu or request the Parents to send a meal for the student. |
| Parents of other students should be informed in advance about foods that may cause allergic reactions in students at risk of anaphylaxis and request that they avoid providing students with treats whilst they are at School or at a special School event. |
| Party balloons should not be used if any student is allergic to latex. |

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| **Travel to and from School by bus** |
| School Staff will consult with Parents of students at risk of anaphylaxis and the bus service provider to ensure that appropriate risk minimisation and prevention strategies and processes are in place to address an anaphylactic reaction should it occur on the way to and from School on the bus. This includes the availability and administration of an Adrenaline Autoinjector. The Adrenaline Autoinjector and ASCIA Action Plan for Anaphylaxis must be with the student even if this child is deemed too young to carry an Adrenaline Autoinjector on their person at School. |

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| Sufficient School Staff supervising the special event must be trained in the administration of an Adrenaline Autoinjector and be able to respond quickly to an anaphylactic reaction if required. |
| A School Staff member or team of School Staff trained in the recognition of anaphylaxis and the administration of the Adrenaline Autoinjector must accompany any student at risk of anaphylaxis on field trips or excursions. |
| School Staff should avoid using food in activities or games, including as rewards. |
| The Adrenaline Autoinjector and a copy of the Individual Anaphylaxis Management Plan for each student at risk of anaphylaxis should be easily accessible and School Staff must be aware of their exact location. |
| For each field trip, excursion etc, a risk assessment should be undertaken for each individual student attending who is at risk of anaphylaxis. The risks may vary according to the number of anaphylactic students attending, the nature of the excursion/sporting event, size of venue, distance from medical assistance, the structure of excursion and corresponding staff-student ratio.  All School Staff members present during the field trip or excursion need to be aware of the identity of any students attending who are at risk of anaphylaxis and be able to identify them by face. |
| The School will consult Parents of anaphylactic students in advance to discuss issues that may arise; to develop an alternative food menu; or request the Parents provide a meal (if required). |
| Parents may wish to accompany their child on field trips and/or excursions. This will be discussed with Parents as another strategy for supporting the student who is at risk of anaphylaxis. |
| Prior to the excursion taking place School Staff should consult with the student's Parents and Medical Practitioner (if necessary) to review the student’s Individual Anaphylaxis Management Plan to ensure that it is up to date and relevant to the particular excursion activity. |

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| Prior to engaging a camp owner/operator’s services the School will make enquiries as to whether it can provide food that is safe for anaphylactic students. If a camp owner/operator cannot provide this confirmation to the School, then the School will consider using an alternative service provider. |
| The camp cook should be able to demonstrate satisfactory training in food allergen management and its implications on food-handling practices, including knowledge of the major food allergens triggering anaphylaxis, cross-contamination issues specific to food allergy, label reading, etc. |
| Schools must not sign any written disclaimer or statement from a camp owner/operator that indicates that the owner/operator is unable to provide food which is safe for students at risk of anaphylaxis. Schools have a duty of care to protect students in their care from reasonably foreseeable injury and this duty cannot be delegated to any third party. |
| The school will conduct a risk assessment and develop a risk management strategy for students at risk of anaphylaxis. This will be developed in consultation with Parents of students at risk of anaphylaxis and camp owners/operators prior to the camp dates. |
| School Staff will consult with Parents of students at risk of anaphylaxis and the camp owner/operator to ensure that appropriate risk minimisation and prevention strategies and processes are in place to address an anaphylactic reaction should it occur. If these procedures are deemed to be inadequate, further discussions, planning and implementation will need to be undertaken. |
| If the School has concerns about whether the food provided on a camp will be safe for students at risk of anaphylaxis, it will also consider alternative means for providing food for those students. |
| Use of substances containing allergens should be avoided where possible. |
| Camps should avoid stocking peanut or tree nut products, including nut spreads. Products that ‘may contain’ traces of nuts may be served, but not to students who are known to be allergic to nuts. |
| The student's Adrenaline Autoinjector, Individual Anaphylaxis Management Plan, including the ASCIA Action Plan for Anaphylaxis and a mobile phone must be taken on camp. If mobile phone access is not available, an alternative method of communication in an emergency must be considered, e.g. a satellite phone. |
| Prior to the camp taking place School Staff will consult with the student's Parents to review the students Individual Anaphylaxis Management Plan to ensure that it is up to date and relevant to the circumstances of the particular camp. |
| School Staff participating in the camp should be clear about their roles and responsibilities in the event of an anaphylactic reaction. Check the emergency response procedures that the camp provider has in place. Ensure that these are sufficient in the event of an anaphylactic reaction and ensure all School Staff participating in the camp are clear about their roles and responsibilities. |
| Contact local emergency services and hospitals well prior to the camp. Advise full medical conditions of students at risk, location of camp and location of any off camp activities. Ensure contact details of emergency services are distributed to all School Staff as part of the emergency response procedures developed for the camp. |
| Schools should consider taking an Adrenaline Autoinjector for General Use on a school camp, even if there is no student at risk of anaphylaxis, as a back up device in the event of an emergency. |
| The Adrenaline Autoinjector should remain close to the student and School Staff must be aware of its location at all times. |
| The Adrenaline Autoinjector should be carried in the school first aid kit; however, Schools can consider allowing students, particularly adolescents, to carry their Adrenaline Autoinjector on camp. Remember that all School Staff members still have a duty of care towards the student even if they do carry their own Adrenaline Autoinjector. |
| Students with anaphylactic responses to insects will be advised to always wear closed shoes and long-sleeved garments when outdoors and will be encouraged to stay away from water or flowering plants. |
| Cooking and art and craft games will not involve the use of known allergens. |
| Consider the potential exposure to allergens when consuming food on buses and in cabins. |

### School Management and Emergency Response

Individual Anaphylaxis Management Plans and ASCIA Action Plans attached.

A copy of students ASCIA Action Plans is kept in the staffroom with Epipens. A copy is also located in the sickbay.

A generic school Epipen Jr is stored in the staffroom pigeon holes.

Jayden Wright’s Epipen Jr is stored in the staffroom pigeon holes.

### Adrenaline Autoinjectors for General Use

The Principal will purchase Adrenaline Autoinjector(s) for General Use (purchased by the School) and as a back up to those supplied by Parents.

The Principal will determine the number of additional Adrenaline Autoinjector(s) required. In doing so, the Principal will take into account the following relevant considerations:

* the number of students enrolled at the School who have been diagnosed as being at risk of anaphylaxis;
* the accessibility of Adrenaline Autoinjectors that have been provided by Parents of students who have been diagnosed as being at risk of anaphylaxis;
* the availability and sufficient supply of Adrenaline Autoinjectors for General Use in specified locations at the School, including
* in the school yard, and at excursions, camps and special events conducted or organised by the School; and
* the Adrenaline Autoinjectors for General Use have a limited life, usually expiring within 12-18 months, and will need to be replaced at the School’s expense, either at the time of use or expiry, whichever is first.

### Communication Plan

* Staff are advised via email immediately upon enrolment of a student recorded as having a medical condition that relates to allergy and the potential for anaphylactic reaction. This information will also be passed on at weekly staff meetings as well as any changes to details of students enrolled with anaphylaxis.
* Annual training is organised by the school for all relevant staff.
* Parents will be advised upon enrolling their child of their responsibility to provide an anaphylaxis management plan from their doctor and an Epipen for their child. Parents will be contacted when their child has an anaphylactic episode at school.

### Staff Training

* It is the school’s policy to have as many staff as possible trained in the use of autoinjectors. An update will be arranged early in the school year. A follow up briefing will be held during a staff meeting in term three.
  + Staff will be advised of students with anaphylaxis, allergens, storage of Epipens, the schools anaphylaxis policy

### Annual Risk Management Checklist

The Principal will complete an annual Risk Management Checklist as published by the Department of Education and Early Childhood Development to monitor compliance with their obligations.