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 minimise the risk 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.

COMMUNICATION PLAN
Communication to Parents
- Using reports from e-cases, parents will be sent a reminder letter at the start of the term of which their child’s ASCIA Plan/Epi-pen is due to expire. They will also receive another reminder 1 month before it’s expiry.
- They will receive an emergency details sheet to review and sign and return at the start of each year with any new information they need to include.
- At least once every six months there will be a reminder about anaphylaxis, what it is and how parents can assist in ensuring the school is safe and accessible for all students in the school newsletter.

Communication with staff
Our school will manage anaphylaxis by:
- At least once every 6 months all staff will participate in a school run anaphylaxis refresher and will complete the full course every 3 years.
- The refresher will also include a reminder of the whole school communication plans and roles and responsibilities during Medical emergencies and incidences (which includes anaphylaxis).
Administration staff will ensure that CRT’s are informed and provided a copy of the whole school communication plan on their first day working at the school.

Copies of the whole school communication plans will be included in the Induction Booklet for new staff.

Identifying susceptible students and knowing their allergens

Identification posters of children with anaphylaxis will be distributed to each staff member to be discretely displayed within the classroom and will be available in bum-bags

One Epi-pen for each student will be stored with an up to date action plan in the staff room. Each plan is to have the expiry date of the Epi-pen written on the bottom and the type of pen is to be identified (whether it is an Epi-pen or Anapen)

One Epi-pen is to be stored in the front pocket of the students school bag and a yellow star is to be placed above their school bag so that in can be easily identified in case of an incidence in the classroom. The management plan should be stored in an easily accessible and identifiable place in the classroom whilst maintaining student confidentiality.

A spare school Epi-pen will be stored in an emergency kit, along with ventolin, gloves and a triangular bandage in a clearly marked case next to the staff room door.

**INDIVIDUAL ANAPHYLAXIS MANAGEMENT PLANS**

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 enrols and where possible before their first day of 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.
- 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.

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.

➢ In the event of an anaphylactic reaction at school, staff will follow one of the pre-defined First Aid management strategies (eg. Code Blue or Code Green)

• This policy will be reviewed as part of the school’s three-year review cycle.

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