

## BRIGHTON BEACH PRIMARY SCHOOL



# ANAPHYLAXIS POLICY



### Help for non-English speakers

If you need help to understand the information in this policy please contact Brighton Beach Primary School. Telephone: 9591 0888

## PURPOSE

To explain to Brighton Beach PS parents, carers, staff and students the processes and procedures in place to support students diagnosed as being at risk of suffering from anaphylaxis. This policy also ensures that the school is compliant with Ministerial Order 706 and the Department's guidelines for anaphylaxis management.

## SCOPE

This policy applies to:

- all staff, including casual relief staff and volunteers
- all students who have been diagnosed with anaphylaxis or who may require emergency treatment for an anaphylactic reaction and their parents and carers.

## POLICY

### School Statement

Brighton Beach PS will fully comply with Ministerial Order 706 and the associated guidelines published by the Department of Education and Training.

### Anaphylaxis

Anaphylaxis is a severe allergic reaction that occurs after exposure to an allergen. The most common allergens for school aged children are nuts, eggs, cow's milk, fish, shellfish, wheat, soy, sesame, latex, certain insect stings and medications.

### *Symptoms*

Signs and symptoms of a mild to moderate allergic reaction can include:

- swelling of the lips, face and eyes
- hives or welts
- tingling in the mouth

Signs and symptoms of anaphylaxis, a severe allergic reaction, can include:

- difficult/noisy breathing

- swelling of tongue
- difficulty talking and/or hoarse voice
- wheeze or persistent cough
- persistent dizziness or collapse
- student appears pale or floppy
- abdominal pain and/or vomiting

Symptoms usually develop within ten minutes and up to two hours after exposure to an allergen but can appear within a few minutes.

### *Treatment*

Adrenaline given as an injection into the muscle of the outer mid-thigh is the first aid treatment for anaphylaxis.

Individuals diagnosed as being at risk of anaphylaxis are prescribed an adrenaline autoinjector for use in an emergency. These adrenaline autoinjectors are designed so that anyone can use them in an emergency.

### **Individual Anaphylaxis Management Plans**

All students at Brighton Beach PS who are diagnosed by a medical practitioner as being at risk of suffering from an anaphylactic reaction must have an Individual Anaphylaxis Management Plan. When notified of an anaphylaxis diagnosis, the principal or nominee of the school is responsible for developing a plan in consultation with the student's parents/carers.

Where necessary, an Individual Anaphylaxis Management Plan will be in place as soon as practicable after a student enrolls at Brighton Beach PS and where possible, before the student's first day.

Parents and carers must:

- obtain an ASCIA Action Plan for Anaphylaxis from the student's medical practitioner and provide a copy to the school as soon as practicable
- immediately inform the school in writing if there is a relevant change in the student's medical condition and obtain an updated ASCIA Action Plan for Anaphylaxis
- provide an up to date photo of the student for the ASCIA Action Plan for Anaphylaxis when that Plan is provided to the school and each time it is reviewed
- provide the school with a current adrenaline autoinjector for the student that has not expired
- participate in annual reviews of the student's Plan.

Each student's Individual Anaphylaxis Management Plan must include:

- information about the student's medical condition that relates to allergies and the potential for anaphylactic reaction, including the type of allergies the student has
- information about the signs or symptoms the student might exhibit in the event of an allergic reaction based on a written diagnosis from a medical practitioner
- strategies to minimise the risk of exposure to known allergens while the student is under the care or supervision of school staff, 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 risk minimisation strategies which have been identified in the Plan
- information about where the student's medication will be stored

- the student's emergency contact details
- an up-to-date ASCIA Action Plan for Anaphylaxis completed by the student's medical practitioner.

### *Review and updates to Individual Anaphylaxis Management Plans*

A student's Individual Anaphylaxis Management Plan will be reviewed and updated on an annual basis in consultation with the student's parents/carers. The plan will also be reviewed and, where necessary, updated in the following circumstances:

- as soon as practicable after the student has an anaphylactic reaction at school
- if the student's medical condition, insofar as it relates to their allergy and the potential for anaphylactic reaction, changes
- when the student is participating in an off-site activity, including camps and excursions, or at special events including fetes and concerts.

Our school may also consider updating a student's Individual Anaphylaxis Management Plan if there is an identified and significant increase in the student's potential risk of exposure to allergens at school.

### **Location of plans and Adrenaline autoinjectors**

The individual adrenaline autoinjectors supplied by families are to be kept in a designated red insulated pouch with a clear and recent student photo displayed outwards. This pouch is located in that student's Class Backpack which is housed in each classroom. This Class Backpack moves with the class around the school to specialist lessons. **It is the teacher's responsibility to ensure the backpack is handed on to the next teacher in charge.**

A copy of each student's Individual Anaphylaxis Management Plan will be stored with their ASCIA Action Plan for Anaphylaxis, together with the student's adrenaline autoinjector in the Class Backpack. Adrenaline autoinjectors will be labelled with the student's name. A copy of the student's ASCIA action plan will be displayed in their classroom. A copy of the management plan and ASCIA Action Plan will also be located in First Aid.

The School Principal will direct the first aid officer to audit and record the expiration date of Adrenaline autoinjectors supplied by the student and notify the families approximately 1 month prior to expiration to request a new Adrenaline autoinjector with the cost provided by the student's families.

### **Risk Minimisation Strategies**

Brighton Beach Primary School has chosen not to ban nut and eggs products, but to raise awareness of the risks associated with anaphylaxis and to implement practical age-appropriate strategies to minimise exposure to known allergens.

All staff undertake the mandatory anaphylaxis on-line e-training and assessment by trained facilitators and are trained in the administration of an adrenaline autoinjector to be able to respond quickly to an anaphylactic reaction if required.

Information regarding anaphylaxis and requests to minimise sending specified food items to school will be communicated through:

- The school newsletter
- Grade level communication (i.e. Compass)
- At the beginning of each year, information is sent home across each year level about the student/s at risk of anaphylaxis.

To reduce the risk of a student suffering from an anaphylactic reaction at Brighton Beach PS, we have put in place the following strategies:

### CLASSROOMS/RECESS/LUNCHTIME:

- A copy of the student's Individual Anaphylaxis Management Plan will be kept in the classroom and first aid room. The ASCIA Action Plan for Anaphylaxis will be easily accessible and kept with the adrenaline autoinjector in the classroom
- Teachers at Brighton Beach Primary School will reinforce that we don't share food and that we should wash our hands after eating.
- All children in classrooms sit at their own table or outside and do not move around whilst eating. Tables to be wiped down if student eat recess/lunch inside.
- Staff to liaise with parents about food-related activities well ahead of time.
- Where it is known that students have brought nut or egg products to school and there is an anaphylactic student in the classroom, the teacher will take all precautions to minimise risk. Parents can help us maintain a safe environment by ensuring nut and egg products are placed in a sealed container or sealed plastic bag and notify the classroom teacher if they have sent these products to school.
- Food is generally not used as a treat or reward; an alternative will be made available for any student with an allergy (from their personal treat box).
- For special events involving food, 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.
- All staff on yard duty are 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.
- Staff on yard duty are able to identify those students at risk of anaphylaxis by accessing photographs attached to the yard duty bag.
- A general use adrenaline autoinjector is stored in each yard duty bag for ease of access
- Garbage bins at school are to remain covered with lids to reduce the risk of attracting insects
- Gloves must be worn when picking up papers or rubbish in the playground or alternate duties provided.
- The school will take immediate action to address (and prevent) bullying or threatening behaviour which pose a risk to a student with anaphylaxis.

### BIRTHDAYS/CELEBRATIONS:

Teacher to inform year groups of allergens to be avoided in advance of class parties, events or birthdays. Food such as cakes or other foods may be sent to school to celebrate birthdays however a full list of ingredients needs to be provided. On special occasions when food is freely available, teachers will ensure that a safe environment is maintained for all students. Prior to commencing units of work that involve cooking, teachers will discuss the individual needs of students at risk with parents.

Parents who have concerns or require clarification are urged to speak to the classroom teacher. Alternatively, you can contact the office for further information.

School staff generally avoid using food in activities or games, including as rewards.

### CANTEEN:

The School Canteen will not provide peanut and tree-nut products (e.g. hazelnuts, cashews, almonds, pistachio, brazil and pecan nuts) including nut spreads and oils. Strict food handling practices will be implemented to minimise cross contamination in the preparation of egg related products (i.e. sandwiches and rolls). These procedures are to be clearly displayed in the canteen and is to be monitored by the canteen managers. Canteen managers will be responsible for the preparation of egg-based meals, including the use of mayonnaise.

The Victorian Government Schools Reference Guide, 'Food safety in schools and food handling regulations'. [www.eduweb.vic.gov.au/referenceguide](http://www.eduweb.vic.gov.au/referenceguide) will be followed with regard to food handling practices to avoid contamination in the preparation, handing and displaying of food. All canteen tables and surfaces will be wiped down regularly. The canteen will display the anaphylactic group ID poster.

#### EXCURSIONS/SPORTS/CONCERTS AND CAMPS:

Teachers will consider the needs of anaphylactic students when planning and preparing for school events that take place away from the school setting. Students with specific anaphylactic requirements will be included in relevant documentation. This will include parent permission forms and risk management assessments.

- A risk assessment will be undertaken for each excursion, sporting event or camp to identify potential hazards to students at risk of anaphylaxis.
- At whole school or large group events (i.e. Productions/Carnivals) the students' Class Backpacks will travel on the bus with the students and then be housed in a central location i.e. first aid at the venue. A designated staff member will be in charge of students at risk
- The use of substances containing known allergens should be avoided altogether where possible.
- The student's adrenaline autoinjector, Individual Anaphylaxis Management Plan, including the ASCIA Action Plan for Anaphylaxis and a mobile phone will 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.
- All staff attending camp will be familiar with the students' Individual Anaphylaxis Management Plans AND planned emergency response procedures for anaphylaxis prior to camp and be clear about their roles and responsibilities in the event of an anaphylactic reaction.
- Staff will take an adrenaline autoinjector for general use on a school camp as a back-up device in the event of an emergency.

The School will inform the camp/excursion venue of any students with anaphylaxis to ensure that appropriate arrangements are made for students participating at the venue. On camps parents will be fully informed of the relevant considerations such as:

- The remoteness of the camp (distance to nearest hospital)
- Mobile telephone coverage. (In some locations, coverage is not reliable).
- Prior to a camp 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 circumstances of the camp.
- A designated staff member will be in charge of the student/s with anaphylaxis (independent of first aid) and will take responsibility of the adrenaline autoinjectors, personal and/or general use, and will accompany students at risk of anaphylaxis to all excursions, sports events and camps.
- The adrenaline autoinjector, both personal and/or general use, will be kept within close proximity of the student at all times.
- Before and after school programs and Holiday Programs implement their own anaphylactic monitoring and management plans for the students in their care. They also have individual Adrenaline autoinjectors for students at risk.

- During whole school onsite activities (e.g.: cultural days, friendship lunch) staff are made aware of students at risk to ensure appropriate supervision occurs and preventative measures are implemented to protect the child/ren

### **Adrenaline autoinjectors for general use**

Brighton Beach Primary School will purchase adrenaline autoinjectors for general use as a back up to those provided by parents and carers for specific students, and also for students who may suffer from a first time reaction at school. These are labelled 'general use' and located:

- In the First Aid room- Yellow Emergency response tool box
- Every yard duty bum bag, (West, Exon and Windermere)
- Camp First Aid bag, when not in use it is located in the First aid room in a 'General use' Adrenaline autoinjector red pouch

The First Aid officer will audit and record the expiration date of Adrenaline autoinjectors supplied by the school and replace these before the expiration date at the cost of BBPS.

The First Aid officer is responsible for arranging the purchase of adrenaline auto-injectors for general use, and will consider:

- the number of students enrolled at Brighton Beach PS at risk of anaphylaxis
- the accessibility of adrenaline autoinjectors supplied by parents
- the availability of a sufficient supply of adrenaline autoinjectors for general use in different locations at the school, as well as at camps, excursions and events
- the limited life span of adrenaline autoinjectors, and the need for general use adrenaline autoinjectors to be replaced when used or prior to expiry
- The weight of the students at risk of anaphylaxis to determine the correct dosage of adrenaline autoinjectors to purchase.

### **Emergency Response**

In the event of an anaphylactic reaction, the emergency response procedures in this policy must be followed, together with the school's general first aid procedures, emergency response procedures and the student's Individual Anaphylaxis Management Plan.

A complete and up to date list of students identified as being at risk of anaphylaxis is maintained by First Aid staff and stored at the first aid room. For camps, excursions and special events, a designated staff member will be responsible for maintaining a list of students at risk of anaphylaxis attending the special event, together with their Individual Anaphylaxis Management Plans and adrenaline autoinjectors, where appropriate.

If a student experiences an anaphylactic reaction at school or during a school activity, school staff must:

Step	Action
1.	<ul style="list-style-type: none"> <li>• Lay the person flat</li> <li>• Do not allow them to stand or walk</li> <li>• If breathing is difficult, allow them to sit</li> <li>• Be calm and reassuring</li> <li>• Do not leave them alone</li> <li>• Seek assistance from another staff member or reliable student to locate the student's adrenaline autoinjector or the school's general use autoinjector, and the student's Individual Anaphylaxis Management Plan, stored in the student's individual red pouch located in class backpack in the classroom</li> </ul>

	<ul style="list-style-type: none"> <li>• If the student’s plan is not immediately available, or they appear to be experiencing a first time reaction, follow steps 2 to 5</li> </ul>
2.	<p>Administer an EpiPen or EpiPen Jr</p> <ul style="list-style-type: none"> <li>• Remove from plastic container</li> <li>• Form a fist around the EpiPen and pull off the blue safety release (cap)</li> <li>• Place orange end against the student’s outer mid-thigh (with or without clothing)</li> <li>• Push down hard until a click is heard or felt and hold in place for 3 seconds</li> <li>• Remove EpiPen</li> <li>• Note the time the EpiPen is administered</li> <li>• Retain the used EpiPen to be handed to ambulance paramedics along with the time of administration</li> </ul> <p><b>OR</b></p> <p>Administer an Anapen® 500, Anapen® 300, or Anapen® Jr.</p> <ul style="list-style-type: none"> <li>• Pull off the black needle shield</li> <li>• Pull off grey safety cap (from the red button)</li> <li>• Place needle end firmly against the student's outer mid-thigh at 90 degrees (with or without clothing)</li> <li>• Press red button so it clicks and hold for 3 seconds</li> <li>• Remove Anapen®</li> <li>• Note the time the Anapen is administered</li> <li>• Retain the used Anapen to be handed to ambulance paramedics along with the time of administration</li> </ul>
3.	Call an ambulance (000)
4.	If there is no improvement or severe symptoms progress (as described in the ASCIA Action Plan for Anaphylaxis), further adrenaline doses may be administered every five minutes, if other Adrenaline autoinjectors are available
5.	Contact the student’s emergency contacts

If a student appears to be having a severe allergic reaction but has not been previously diagnosed with an allergy or being at risk of anaphylaxis, school staff should follow steps 2 – 5 as above.

Schools can use either the EpiPen® and Anapen® on any student suspected to be experiencing an anaphylactic reaction, regardless of the device prescribed in their ASCIA Action Plan.

Where possible, schools should consider using the correct dose of adrenaline autoinjector depending on the weight of the student. However, in an emergency if there is no other option available, any device should be administered to the student.

[Note: If in doubt, it is better to use an adrenaline autoinjector than not use it, even if in hindsight the reaction is not anaphylaxis. Under-treatment of anaphylaxis is more harmful and potentially life threatening than over treatment of a mild to moderate allergic reaction. Refer to ‘Frequently asked questions’ on the [Resources tab](#) of the Department’s Anaphylaxis Policy.]

## **Communication Plan**

This policy will be available on Brighton Beach PS's website so that parents and other members of the school community can easily access information about Brighton Beach PS's anaphylaxis management procedures. The parents and carers of students who are enrolled at Brighton Beach PS and are identified as being at risk of anaphylaxis will also be provided with a copy of this policy.

The principal is responsible for ensuring that all relevant staff, including casual relief staff and volunteers are aware of this policy and Brighton Beach PS's procedures for anaphylaxis management. Casual relief staff and volunteers who are responsible for the care and/or supervision of students who are identified as being at risk of anaphylaxis will also receive a verbal briefing on this policy, their role in responding to an anaphylactic reaction and where required, the identity of students at risk.

The Principal is also responsible for ensuring relevant staff are trained and briefed in anaphylaxis management, consistent with the Department's [Anaphylaxis Guidelines](#).

### **Staff training**

Staff at Brighton Beach PS will receive appropriate training in anaphylaxis management, consistent with the Department's *Anaphylaxis Guidelines*.

Staff who are responsible for conducting classes attended by students who are at risk of anaphylaxis, admin staff., first aiders and any further staff, that the principal identifies, must have completed:

- an approved face-to-face anaphylaxis management training course in the last three years, or
- an approved online anaphylaxis management training course in the last two years.

Brighton Beach PS uses the following training course, ASCIA Anaphylaxis e-training for Victorian Schools, which is followed by a practical assessment from an appropriately trained anaphylaxis supervisor (22579VIC).

Staff are also required to attend a briefing on anaphylaxis management and this policy at least twice per year (with the first briefing to be held at the beginning of the school year), facilitated by a staff member who has successfully completed an anaphylaxis management course within the last 2 years.

Each briefing will address:

- this policy
- the causes, symptoms and treatment of anaphylaxis
- the identities of students with a medical condition that relates to allergies and the potential for anaphylactic reaction, and where their medication is located
- how to use an adrenaline autoinjector, including hands on practice with a trainer adrenaline autoinjector
- the school's general first aid and emergency response procedures
- the location of, and access to, adrenaline autoinjectors that have been provided by parents or purchased by the school for general use.



When a new student enrolls at Brighton Beach PS who is at risk of anaphylaxis, the principal or nominated representative will develop an interim plan in consultation with the student's parents and ensure that appropriate staff are trained and briefed as soon as possible.

A record of staff training courses and briefings will be maintained in the first aid room and through the school's online Emergency Management Plan.

The principal will ensure that while students at risk of anaphylaxis are under the care or supervision of the school outside of normal class activities, including in the school yard, at camps and excursions, or at special event days, there is a sufficient number of school staff present who have been trained in anaphylaxis management.

## **FURTHER INFORMATION AND RESOURCES**

- The Department's Policy and Advisory Library (PAL):
  - [Anaphylaxis](#)
- [Allergy & Anaphylaxis Australia](#)
- ASCIA Guidelines: [Schooling and childcare](#)
- Royal Children's Hospital: [Allergy and immunology](#)
- Health Care Needs policy

## **REVIEW CYCLE AND EVALUATION**

- The principal or nominated representative will complete the Department's Annual Risk Management Checklist for anaphylaxis management to assist with the evaluation and review of this policy and the support provided to students at risk of anaphylaxis.

<b>Date Reviewed</b>	February 2024
<b>Responsible for Review</b>	First Aid Coordinator
<b>Review Date</b>	February 2025

## **APPENDIX 1**

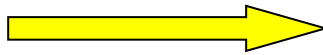
### **RESPONSIBILITIES IN THE EVENT OF AN ANAPHYLACTIC EPISODE:**

*These procedures are to be read in conjunction with the school's Anaphylaxis Policy*

#### **In the classroom:**

##### **CLASS TEACHER**

- Attends to and stays with the student
- Child is placed flat on the floor and not moved, reassures the student
- Calls for help from their teaching buddy
- Identifies student and verifies they have the correct individual anaphylactic management plan
- Removes adrenaline autoinjector from Class Backpack and administers as per the ASCIA plan
- **TEACHING BUDDY**  
Notifies the office
- Calls 000
- Monitors student and follows directions of  
Emergency services



##### **OFFICE**

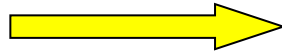
- Notifies the first aid officer on duty who takes the back-up kit to the classroom/hall and takes over management
- Office staff to take over back-up kit if first aid officer is not available
- Open gates for ambulance
- Contact school who will:-
  - Notify parents
  - Provides incident debrief

#### **In the school playground:**

##### **YARD DUTY TEACHER**

- Attends to and stays with the student
- Child is placed flat on the floor and not moved, reassures the student

- Identifies student's tag on yard duty bag and sends it to the office via a student



○ OR

- Communicates with the office via mobile phone
- Identifies student and verifies they have the correct individual anaphylactic management plan
- Administers general use adrenaline autoinjector from the 'bum bag' if student's own medication is not readily accessible
- Calls 000 (mobile phone)
- Monitors student and follows directions of emergency services

## OFFICE

- Notifies the first aid officer on duty – who takes back-up kit out to yard and takes over management of the situation
- Office staff to take out back-up kit if first aid officer is not available
- Organises for the class back pack to be taken from the classroom to the yard
- Opens gates for ambulance
- Contact school who will:-
  - Notifies parents
  - Provides incident debrief

### At excursions/sports/camps:

- The school will inform the camp of any students with anaphylaxis to ensure that appropriate arrangements are made for students participating at camp. Parents will be fully informed of the relevant considerations such as:
  - The remoteness of the camp (distance to nearest hospital)
  - Mobile telephone coverage. (In some locations, coverage is not reliable).
- A designated staff member will oversee student/s with anaphylaxis (independent of first aid) and will take responsibility of the adrenaline autoinjectors and will accompany students at risk of anaphylaxis to all excursions, sports events and camps.
- The adrenaline autoinjector will be kept within close proximity of the student.
- If anaphylaxis is suspected, teacher attends to and stays with the student
- Child is placed flat on the ground and not moved, reassures the student
- Sends for help from Venue staff:-
- Enacts their own emergency response plan
- OR
- Calls for assistance from other teaching staff

- Identifies student and verifies they have the correct individual anaphylactic management plan
- Gives adrenaline autoinjector (as per ASCIA plan)
- Calls 000 (on mobile phone)
- Monitors student and prepares general use autoinjector. Follows directions of emergency services
- Contacts school who will: -
  - Notify parents
  - Provides incident debrief.