Purpose
This policy provides a framework for minimising the risk of an allergen and an anaphylaxis reaction within the care of the school community. The purpose is to ensure the safety and wellbeing of children who are at risk of anaphylaxis is a whole-of-community responsibility.

Aims
• To minimise the risk of an anaphylactic reaction occurring while the child is in the care of the school community.
• To ensure that staff members respond appropriately to an anaphylactic reaction by initiating appropriate treatment, including competently administering an adrenaline auto-injection device.
• To raise the awareness within the school community about anaphylaxis and its management through education and policy implementation.

Implementation
School Based Plan
- All staff are to familiarize themselves with the Anaphylactic Information Emergency Sheet for all Anaphylactic children in the school.
- If a teacher has an Anaphylactic child in their class, the teacher is required to be familiar with and know the child’s Individual Management Plan.
- The First Aid Coordinator will arrange in the week prior to school returning for photos of anaphylactic students to be taken and published. Before the first day of school, all initial procedures will be completed. These procedures include:
  I. Photo displays in all rooms where staff congregate
  II. Epipen bags ready with photos and labels to be kept in the school office
- During the first week of school the whole school community will be informed of certain foods that will cause a student/s to have an anaphylaxis reaction. The following will be sent home to family members:
  I. Anaphylaxis Policy (on school website)
  II. Personalised note informing parents about certain foods that may cause an anaphylaxis reaction
  III. Ongoing reminders in the School Newsletter
- Buddies of anaphylactic prep students are to be well briefed on their responsibility to ensure they do not bring food for that child.
- A statement is to be placed on the front cover of the classroom roll alerting any teacher or Casual Replacement Teacher about any child with an Anaphylaxis or other severe medical conditions. A copy of the child’s individual management plan will also be placed in the roll.
- Any other teachers or tutors, (e.g. guitar teacher), are to be informed about anaphylaxis and the steps they need to take if a reaction should occur while the child is in their care.
- A copy of the child’s Individual Management Plan will be included in the classroom CRT folder
- A copy of all students’ Individual Management Plans will be displayed in the sickbay, staff room, and general office.
- A copy of all students’ Individual Management Plans will be given to all specialists. Specialists are expected to read and be familiar with the plans.
- All schools with a child or young person at risk of an anaphylactic reaction are required to undertake twice yearly briefings on anaphylaxis management under Ministerial Order 706, where staff practise administering an epipen and anapen, using a replica.
- If a child is suspected of having an anaphylactic reaction the following steps must be implemented:
Person who identifies the child with the Anaphylactic Reaction:
Contact the Office, then stay with, and manage the child.
- If the reaction occurs in the building, contact the office by phone.
- If the reaction occurs in the playground, make contact with the Office with the Red Card, or a communication device.

At the Office: Person A
- Takes mobile phone, and collects the emergency first aid kit from the office and proceeds to the child, prepared to administer the child’s epipen.
- Selects the appropriate epipen, all epipens are clearly labelled and a photo of the child is attached to the epipen bag.
- Administer epipen. (If an epipen is administered unnecessarily, it is not life threatening. The child will simply experience racing of the heart for 15 – 20 minutes).
- Immediately after administering epipen, call for MICA ambulance, following the instructions on the emergency card in the emergency first aid kit.
- Any person administering an epipen must have completed an epipen training session provided by the Royal Children’s Hospital or other appropriate provider.
- Contact Office to keep informed of situation.

At the Office: Person B
- Delegates other staff members to assist with the emergency.
  I. Staff member to act as a communication courier between incident scene and office.
  II. At least two staff members for general supervision.
- Contact parents after the ambulance has been called, or delegate the responsibility to another staff member.
- Responsible for meeting the ambulance at Rathdowne Street front entrance.
- Accompany Ambulance Officers to the child

Managing an Anaphylaxis Child In The Classroom
- It is the classroom teacher’s responsibility to familiarize themselves with an Anaphylactic child’s Individual Management Plan, and to alert all specialist teachers.
- A letter should be sent to all families in the class at the start of each school year, or when the child is enrolled or diagnosed, advising them of the presence of an Anaphylactic child in the class and the implications for food consumed at recess and lunchtimes, in class parties and general treats.
- Arrange for the parents of the Anaphylactic child to supply a ‘treats box’ for the child in place of foods at class parties.
- If undertaking cooking activities please double check the appropriateness of ingredients in relation to the Anaphylactic child in your classroom. (The most unlikely foods can be a source of peanuts, for example the pizza shop across the road has a satay pizza on its menu, and if a pizza cutter is used on a satay pizza, it will contaminate other pizzas it cuts).
- In the event that there is a school BBQ, ensure that olive oil is used for cooking, NOT nut based oils.
- Discuss with the children in your class all aspects of management of an Anaphylactic child in relation to their peers, ie not sharing food, the need to sit away from other children if food brought to school puts another child at risk.
- Request parents of non Anaphylactic children do not provide peanut butter sandwiches, nut snacks etc as part of their children’s lunches.
- Model your eating behaviours for the children, ie don’t bring nuts or nut products to school.
- If the class teacher is absent, a request for a CRT with epipen training will be made, if a CRT with relevant training is unavailable, the child will be placed in the class of a teacher with epipen training.
- If a class teacher has any concerns about a child’s wellbeing, a conservative approach is to be taken.
- The Art Teacher needs to be aware of possible reactions children can have from a range of products. Please remind the Art teacher of the following:
  I. Some paints and glues contain ‘egg’ factors
II. Avoid cereal boxes where the contents have included nuts, in box construction activities.
III. Do not use egg cartons for children allergic to eggs.
IV. Some shaving creams contain peanut oils as a base.
V. Do not use peanut oil to make play dough.

Procedures for the Management of Anaphylactic Children on Excursions, Camps and Sporting Activities
- For any known anaphylaxis child, their medication, (anaphylaxis pack), must be taken on all activities, (excursions, local walks, sport, etc.) away from the school site. (Packs are kept in the Office, in the emergency first aid box. The student’s epipen pack will be removed from the first aid box and given to the child, or responsible staff member by the First Aid Officer, Office Manager, or member of the leadership team. The epipen will need to be signed out by whoever collects the epipen.
- Ensure at least one adult attending the activity has completed the required training of how to administer an epipen.
- At least one staff member attending the activity must have a functioning mobile phone. (The school mobile phone will be available).
- In the event of an anaphylactic reaction, the same steps as the School Based Plan will be implemented. The person in charge of the activity will be responsible for allocating designated roles, Person A, Person B, etc.
- Where a child with an Anaphylactic condition is attending a camp, the camp coordinator is responsible for contacting the camp to advise them of the particular allergy/allergies to ensure the child’s food requirements are met.
- Some foods may need to be excluded from the menu.
- Organisers of the camp are to meet with parents of the child to go through organisational details.
  I. Camp menu
  II. Possibility of parent attending the camp
  III. Emergency Management Plan – including contact details and mobile phone access.
  IV. Activities
  V. Staff attending epipen training

Individual Student Insulated Epipen bags
Each child will have an insulated epipen bag which will contain:
- The child’s epipen and / or medication.
- A copy of the child’s Management Plan
- A copy of the letter from their doctor.
- A plastic container to hold the epipen.
- This container will have the child’s name on it and the words “Time of administration of Medication____________”, written on the outside.
- In the event of an Anaphylactic reaction, the time of administering the epipen will be recorded on the container.
- A black permanent texta
- A wash cloth
- A copy of instructions on “How to Administer the Epipen”.

Each bag will be identified with the child’s photograph, name, grade and room number.
The First Aid Officer will maintain a checklist of the children’s epipen expiry dates. Parents will be contacted at least a week before of the need to update the epipen.

Procedures for an Anaphylactic Reaction at an After Hours School Event
A staff member will be nominated as the first aid coordinator at the event.
The role of the staff member is:
- To know the identity of the anaphylactic children attending, (or have photos of all children for recognition purposes).
- To have as close to immediate access to the Medical Emergency Box as is practicable.
- To have immediate access to a mobile phone and / or school land line.

All staff are to be aware of:
- The location of the First Aid coordinator
- To be aware of the location of the Medical Emergency Box.
- To be aware of the children with an anaphylaxis condition, and are to know where the children are until they are in the care of parents.

If an anaphylactic reaction should occur the following procedures for dealing with an anaphylactic reaction are to be implemented.

**Person who identifies the child with the Anaphylactic Reaction:**
Contact the First Aid Coordinator or another adult, preferably a member of staff, to inform the first aid coordinator then stay with and manage the child.

**First Aid Coordinator**
- Takes the emergency first aid kit and proceeds to the child to administer the child’s epipen.
- Selects the appropriate epipen, all epipens are clearly labelled and a photo of the child is attached to the epipen bag.
- Administer epipen. (If an epipen is administered unnecessarily, it is not life threatening. The child will simply experience racing of the heart for 15 – 20 minutes).
- Immediately after administering epipen, call for MICA ambulance, following the instructions on the emergency card in the emergency first aid kit.
- Any person administering an epipen must have completed an epipen training session provided by the Royal Children’s Hospital or other appropriate provider.
- Have other staff member contact the Principal or his delegate to keep informed of situation.

**Nearest Staff Member**
- Delegates other staff members to assist with the emergency.
  III. Staff member to act as a communication courier between incident scene and office.
  IV. At least two staff members for general supervision.
- Contact parents after the ambulance has been called, or delegate the responsibility to another staff member.
- Responsible for meeting the ambulance at Rathdowne Street front entrance.
- Accompany Ambulance Officers to the child

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