

## MAFFRA PRIMARY SCHOOL 861 ANAPHYLAXIS POLICY

### **Purpose**

Students enrolled at our school who suffer from significant health problems deserve and require a supportive and flexible school environment that understands and responds to their individual needs. The purpose of this policy is to put procedures in place that minimise the risk of an anaphylactic reaction by students in our care.

### **Policy**

Anaphylactic reactions can be life threatening. We have students enrolled who are anaphylactic. Due to the age of students at Primary School, it is not reasonable, even with education in regard to the issue, to assume the students will take appropriate precautions to minimise the risks of anaphylactic reactions by their peers. Therefore, parents and guardians are asked not to include nuts and nut products, especially peanut butter and Nutella, in their child's lunch or recess food items.

It is impossible to effectively ban the many products that have 'traces of nuts', therefore other procedures are in place to minimise the risk to anaphylactic students. It is also impossible to guarantee compliance with this policy by all parents/guardians and there will be times when other people prepare lunches for students, therefore other precautions are taken by the school to minimise the risk to anaphylactic students.

### **Definitions:**

What is anaphylaxis?

Anaphylaxis is a severe and sudden allergic reaction. It occurs when a person is exposed to an allergen (such as a food or an insect bite). Reactions usually begin within minutes of exposure and can progress rapidly over a period of up to two hours or more. Anaphylaxis is potentially life threatening and always requires an emergency response. Fortunately anaphylactic reactions are uncommon and usually preventable.

### **1.0 Procedures**

**1.1** The parents/carers of anaphylactic students are required to meet with the Assistant Principal or Coordinator and key staff to develop an individual plan that details the student's needs in the event of an anaphylactic reaction. In this meeting arrangements are to be made in regard to the provision of Epi Pens by the parents.

**1.2** All staff associated with anaphylactic students will be made aware of the student's condition and requirements. Students will be identified with a photograph and information about the particular student in the sick bay and in yard duty folders. Staff will be provided with professional development as required, including instructions in relation to using the Epi Pen.

Professional development in this area will be updated regularly and, as a minimum, be revisited at the beginning of each school year.

**1.3** Relief teachers will be provided with a copy of this policy.

**1.4** All students are educated in relation to practices that minimise the risk to anaphylactic students. This education occurs in classes and assemblies. Posters will be displayed in classrooms and used as a part of the education process.

**1.5** Students are not allowed to share food that they bring to school. Special arrangements are made for anaphylactic students for class parties etc.

**1.6** Students are seated and supervised at recess and lunch while they are eating. Anaphylactic students seating arrangements are monitored by staff member(s) on duty to minimise the risk of the student coming into contact with food containing nuts.

**1.7** All students are required to wash their hands after eating. If peanut butter is brought to school it can contaminate objects such as door handles, outdoor equipment etc. Washing hands after eating minimises this risk.

**1.8** During whole school activities where consumption of food is involved, students are supervised by staff members to minimise the risk of coming into contact with nuts or nut products. Purchases by students at commercial canteens eg swimming carnival are closely monitored. At activities where the school operates a canteen, items sold are compatible with our Anaphylaxis Policy.

**1.9** If a child is hospitalised the school will maintain appropriate contact with students during times in hospital, so as to provide social, emotional and academic support.

**1.10** The school newsletter and other relevant handbooks will be used to highlight and reinforce the Anaphylactic Policy.

## **2.0 General**

**2.1** Copies of this policy are available on request to the School Office or at our web page.

## **Action Plan in the Event of an Anaphylactic Episode**

**3.1** Child experiences Anaphylactic episode in classroom.

**3.1.1** Teacher (A) accesses the Epi Pen and administers it to the child.

Teacher (A) then seeks assistance.

The teacher with the patient then stays with him or her at all times and keeps him/her as calm as possible and reassures the patient that assistance is coming.

**3.1.2** The Coordinator/Teacher (B) contacts the Front Office and informs the Front Office that a child is having an anaphylactic reaction and tells Front Office to telephone ambulance service for immediate assistance. The Coordinator/Teacher (B) should clearly specify location of patient.

**3.1.3** The Coordinator/Teacher (B) proceeds immediately to the patient's classroom to assist Teacher (A)

**3.1.4** The Front Office staff immediately telephone for an ambulance giving clear directions

**3.1.5** The Front Office staff then informs Principal (or delegate if Principal is unavailable) that an ambulance has been called and details.

**3.1.6** Teacher (A) remains with the child at all times.

**3.1.7** The Coordinator/Teacher (B) manages the other students in the class while teacher (A) stays with patient.

**3.1.8** Principal (or delegate) contacts parents and then Principal (or delegate) proceeds to provide staff and students with support.

**3.1.9** When ambulance arrives at the campus Teacher (B) directs ambulance to appropriate classroom (or delegates this role to a teacher/teacher assistant who waits at the gate)

**3.1.10** If parents have not arrived by the time the ambulance needs to depart a teacher travels with child to hospital.

**3.1.11** Staff and Principal debrief after incident.

**3.1.12** Teacher debriefs with students in class.

## **3.2 Child experiences Anaphylactic episode in the playground**

**3.2.1** The teacher (A) on playground supervision duty sends for assistance via an emergency card ( All teachers will carry Emergency Cards while on playground duty). Emergency Card is given to a student to take to the nearest teacher. The teacher with the patient must stay with him or her at all times and keep him/her as calm as possible and reassure the patient that assistance is coming.

**3.2.2** Teacher (B) receiving Emergency Card collects Epi Pen and alerts other staff, while immediately proceeding to the playground where the child is located to assist in administering the Epi Pen.

**3.2.3** After administering the Epi Pen, teacher (B) supervises other children in the playground.

**3.2.4** The alerted staff member (C) contacts Front Office and informs Front Office that a child is having an anaphylactic reaction and asks Front Office to telephone ambulance service for immediate assistance.

**3.2.5** Front Office staff immediately telephone for an ambulance giving directions to the school.

**3.2.6** The staff member (C) contacts Principal (or delegate if unavailable)

**3.2.7** The Principal (or delegate) contacts parents and then the Principal proceeds to the playground to support staff and students.

**3.2.8** One staff member (C) stays near to telephone to take messages.

**3.2.9** One staff member (D) waits for the ambulance and on arrival of ambulance directs ambulance to patient.

**3.2.10** Any remaining staff proceed to the playground to assist with student management in the playground, ensuring clear access to patient.

**3.2.11** If parents have not arrived by the time the ambulance needs to depart a teacher travels with child to hospital.

**3.2.12** Staff and Principal debrief after incident.

**3.2.13** Students are debriefed by teacher(s) and/or executive staff.