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), Nutella, cow’s milk, fish and shellfish, wheat, soy, sesame, latex, certain insect stings and medication.

Narre Warren North Primary School has students with anaphylaxis and actively supports these students in gaining knowledge of their allergy, thereby enabling the student to develop their own risk minimisation strategies.

The key to prevention of anaphylaxis in schools is knowledge of those students who have been diagnosed at risk, awareness of triggers (allergens), and prevention 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® auto injector to the muscle of the outer mid thigh is the most effective first aid treatment for anaphylaxis.

PURPOSE OF THE POLICY

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.

The key reference and support for the school regarding anaphylaxis is the DET Anaphylaxis Guidelines at:

GUIDELINES FOR ACTION

RISK MINIMIZATION

The following policies apply to food and drink.

1. General Food Policy
Narre Warren North Primary School recommend that there should be no trading or sharing of food.
2. **Grade Parties**
Narre Warren North Primary School recommends that parents will be advised in writing, by the classroom teacher, of when a class party is to take place. Parents of students with severe food allergies will be asked to provide their child with their own food. Staff will make no food choices for students who are known to have severe food allergies.

3. **Classroom activities that involve food.**
Narre Warren North Primary School recommends that a notice be sent home by the classroom teacher advising parents of ingredients that will be used in the activity. Foods, to which a student has a known allergy, will not knowingly be used in the classroom activity.

4. **Students Prep to Grade 2**
It is recommended that students in Grades Prep to Grade 2 at Narre Warren North Primary School, who have a student in their grade with a severe allergy to nuts, do not bring peanut butter/Nutella sandwiches or foods that contain nuts to school. This is due to the higher risk of person to person contact in younger children. (Australasian Society of Clinical Immunology and Allergy Inc.) A notice to that grade will be sent home at the beginning of the school year.

5. **Treats brought into classrooms**
Narre Warren North Primary School does not permit food or drink treats to be brought into the school grounds or classrooms for distribution to other students. Non food/drink treats may be an acceptable treat. Please speak with your child’s class teacher regarding suitability. Candy canes at Christmas time are the exception.

**INDIVIDUAL ANAPHYLAXIS MANAGEMENT PLANS**

1. 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.

2. 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.

3. 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.

- Plans are to be displayed in the Sick Bay, Staff room and student’s classroom.

4. 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.

5. 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.
   
   Ensure that the Epipen is in date.

COMMUNICATION PLAN

1. The principal will be responsible for ensuring that a communication plan is developed to provide information to all staff, students and parents about anaphylaxis and the school’s anaphylaxis management policy.

2. The communication plan will include information about what steps will be taken to respond to an anaphylactic reaction by a student in a classroom, in the school yard, on school excursions, on school camps and special event days.

3. Volunteers and casual relief staff of students at risk of anaphylaxis will be informed about students at risk of anaphylaxis and their role in responding to an anaphylactic reaction by a student in their care by the assistant principal.

4. All staff will be briefed regularly by a staff member who has up to date anaphylaxis management training on:
   • the school’s anaphylaxis management policy
   • the causes, symptoms and treatment of anaphylaxis
   • the identities of students diagnosed at risk of anaphylaxis and where their medication is located
   • how to use an auto adrenaline injecting device
   • the school’s first aid and emergency response procedures.

STAFF TRAINING AND EMERGENCY RESPONSE

1. Teachers and other school staff who conduct classes which students at risk of anaphylaxis attend, or give instruction to students at risk of anaphylaxis must have up to date training in an anaphylaxis management training course.
2. At other times while the student is under the care or supervision of the school, including excursions, yard duty, camps and special event days, the principal must ensure that there is a sufficient number of staff present who have up to date training in an anaphylaxis management training course.

3. The principal will identify the school staff to be trained based on a risk assessment.
   Training will be provided to these staff as soon as practicable after the student enrolls.
   Wherever possible, training will take place before the student’s first day at school. Where this is not possible, an interim plan will be developed in consultation with the parents.

4. The school’s first aid procedures and students emergency procedures plan (ASClA Action Plan) will be followed in responding to an anaphylactic reaction.

This policy will be reviewed annually or more often if necessary due to changes in regulations or circumstances.

This policy is to be read in conjunction with the school’s First Aid Policy, Administration of Medicines Policy and Duty of Care Policy as well as DET guidelines at:

Reviewed: 17\textsuperscript{th} June 2016

Ratified by School Council: 12\textsuperscript{th} August 2015