Anaphylaxis

Rationale
Anaphylaxis is an acute reaction to certain food items and insect stings. It is a severe and potentially life-threatening condition. The condition develops in approximately 1 - 2% of the population. The most common allergens are nuts, eggs, cow’s milk, soy, seafood and bee or other insect stings, and some medications.

Signs and symptoms of anaphylaxis vary from mild/moderate hives/rash, tingling in or around the mouth, abdominal pain, vomiting or diarrhoea, facial swelling to severe (anaphylaxis) cough or wheeze, difficulty breathing or swallowing, loss of consciousness or collapse, or cessation of breathing.

Anaphylaxis is best prevented by knowing and avoiding the allergens.

Aims:
To provide a safe and healthy school environment that takes into consideration the needs of all students, including those who may suffer from anaphylaxis, and to ensure we manage the care of students at risk of anaphylaxis.

Guidelines
Department Of Education and Early Childhood Development - Ministerial Order 706

Implementation

Our school will manage anaphylaxis by:

- Ensuring staff are provided with professional development which identifies symptoms and processes in the event of an anaphylactic reaction, the appropriate response to anaphylaxis and the proper use of an Epipen.
- Ensuring staff are aware of the symptoms of reactions by conducting bi-annual briefings (DEECD PowerPoint) and quarterly practices with Epipen, EpiPen Jr or Anapen as used by the student.
- Identifying susceptible students and knowing their allergens.
- Informing the community about anaphylaxis via the newsletter.
- Informing parents, by letter, of existing severe allergies, reminding families of the need for vigilance when sending food for class parties.
- Discouraging food sharing, and restricting food to that approved by parents.
- Keeping the lawns well mown and ensuring children always wear shoes outdoors.
- Using the Care Monkey Health tracking system which parents can update as required.
- Determining the most suitable location to allow for storage at the appropriate temperature, by negotiation between school management, the parents and the child’s teacher, annually.
- Supporting this emergency plan further at the school level via an Anaphylaxis Emergency Management Plan. Copies will be provided for all staff and are located in the staff room and the first aid room, class and yard duty folders, library and specialist offices.
- Strongly discouraging certain types of foods including nuts and products which contain nuts. Banning food is not a strategy recommended by the Royal Children’s Hospital, however, our school canteen is nut-free and the school will request that parents do not send these items to school in classes known to have anaphylactic students.
- A staff member will check the dates each term and class teachers will notify parents that the Epipen is about to expire. A list of expiry dates will be kept on the wall near the Epipens.
- Maintaining a ‘back-up’ Junior Epipen for emergencies.

Parents will be required to:

- Providing an Epipen and ensuring that it is within the labeled guidelines and use by date.
- Provide an emergency management plan developed by a health professional, which is reviewed annually, and an Epipen if necessary. The plan must outline the student’s known allergies and the types of reactions to be expected.

In the event of an anaphylactic reaction the school will adhere to the individual’s anaphylaxis plan:

- Lay the person flat – do NOT stand or walk
- Administer the EpiPen as prescribed
- Call an Ambulance – Ring 000
- Then contact the parent
- If there is no improvement in 5 minutes, administer the school’s generic epipen.

Evaluation

The Anaphylaxis Policy will be reviewed every three-years by the Education Sub-Committee of School Council.

References
http://www.allergyfacts.org.au/livingwith.html#schools
http://www.allergy.org.au/health-professionals/anaphylaxis-resources