

ANAPHYLAXIS COMMUNICATION PLAN

RATIONALE

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), cow's milk, fish and shellfish, wheat, soy, sesame, latex, certain insect stings and medication. This policy outlines the responsibilities of Campbellfield Heights Primary School in relation to communicating our responses to, and management of anaphylaxis.

Relationship with other policies: This policy is to be read in conjunction with the *Campbellfield Heights Primary Anaphylaxis Policy, 2024.*

PURPOSE

The Anaphylaxis Communication Plan will ensure all members of the Campbellfield Heights Primary School community are aware of the procedures for the prevention and management of anaphylaxis at school, or outside school on school related activities.

IMPLEMENTATION

Expectations of Enrolling Parents

At the time of enrolment or (if later) diagnosis, all staff members will familiarise themselves with the medical needs of the student with anaphylaxis. It is expected that parents will advise the school without delay when a student is diagnosed by a medical practitioner as being at risk of anaphylaxis. An Australian Society of Clinical Immunology and Allergy (ASCIA) anaphylaxis Action Plan will be developed for each student affected by their medical practitioner and placed in the First Aid Room and Canteen.

Publication

This Anaphylaxis Communication Plan will be published on the school's website. Casual Relief Teachers (CRT) will be made aware of the plan and actions to take in case of an anaphylactic reaction.

Communication to all Staff

All staff will be briefed regularly, commencing at the beginning of the year. At this time instructions for action will be detailed. Relevant staff must be briefed twice per calendar year and tested every 2 years by one of the Anaphylaxis Supervisors, who have completed training in Anaphylaxis Management.

Staff have a responsibility to:

Know and understand the School Anaphylaxis Management Policy;

- Know the identity of student who are at risk of anaphylaxis;
- Understand the causes, symptoms and treatment of anaphylaxis;
- Obtain regular training in how to recognise and respond to an anaphylactic reaction, including administering an adrenaline auto injector;
- Keep a copy of each student's ASCIA Action Plan for Anaphylaxis, or know where to find one quickly, and follow it in the event of an allergic reaction;
- Follow the ASCIA action plan in the event of an emergency reaction;
- Know the school's first aid emergency procedures and their role in relation to responding to an anaphylactic reaction;
- Know where students; adrenaline auto injectors are kept;
- Know and follow the prevention and risk minimisation strategies in the student's Anaphylaxis Management Plan;
- Plan ahead for special class activities (e.g. cooking, art and science classes), or special occasions (e.g. excursions, incursions, sport days, camp, cultural days, fetes and parties);
- Work with parents/carers to provide appropriate food for their child if the food the school/class is providing may
 present a risk for him or her;
- Avoid the use of food treats in class or as rewards, as these may contain hidden allergens;
- Be aware of the possibility of hidden allergens in foods and of traces of allergens when using items such as egg or milk cartons in art or cooking classes;
- Be aware of the risk of cross-contamination when preparing, handling and displaying food;
- Make sure that tables and surfaces are wiped down regularly and that students wash their hands after handling food;
- Raise student awareness about severe allergies and the importance of their role in fostering a school
 environment that is safe and supportive for their peers.

Raising Student Awareness

Classroom teachers will discuss the topic of anaphylaxis with students in their class, with a few key messages, including:

- Hand washing after eating;
- Not sharing food with your friends;
- Knowing what your friends are allergic to;
- If a school friend becomes sick, get help immediately;
- Be respectful of a school friend's EpiPen;
- Don't pressure your friends to eat food they are allergic to.

Raising School Community Awareness

Information regarding anaphylaxis will be communicated through the school newsletter at the beginning of each school year. The Anaphylaxis Policy and Communication Plan will be available on the school website.

Individual Anaphylaxis Action Plans (ASICA)

The individual Anaphylaxis Action Plan will be in place as soon as practicable after the student enrolls. This will include:

• 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;
- The student's emergency contact details;
- Information on where the student's medication will be stored.

EpiPen	ASICA Action Plan
First Aid Room	First Aid Room
	Canteen

Casual Relief Teacher (CRT)/Volunteers/Sport or Other Activity Leader

Anaphylaxis information will be provided to all CRT and Volunteer staff regarding students and this will be provided in the induction pack at the beginning of the applicable visit/employment. This information will include an Action Plan for Anaphylaxis which will contain the student's photo, name and date of birth, allergens to be avoided, contact details and the action required if the student has a mild or serious reaction.

Responding to Anaphylaxis

Classrooms

In the event of an anaphylactic reaction in the classroom, the teacher is to immediately implement the student's ASCIA Action Plan:

- Call 000;
- Call another staff member to remove other students from the area. This staff member to call the Principal;
- Two staff members to bring the student's EpiPen, ASCIA Action Plan, mobile phone and school's spare EpiPen and proceed immediately to the site of emergency;
- Staff member trained in the administration of an EpiPen to give injection;
- The teacher is to stay with the student who is experiencing the reaction;
- Record the time of administering the EpiPen. Watch to see if signs of anaphylaxis subside or return. If necessary, administer the spare EpiPen after 5 minutes; and,
- Principal will coordinate emergency procedures;
- Parents to be contacted as soon as is practicable;
- Staff member to accompany student in ambulance if practicable.

Yard

Yard duty staff members will not leave a student who is experiencing anaphylaxis unattended. The yard duty staff member will:

- Call 000 immediately (if mobile phone available);
- Notify the main office by sending another staff member or student. Two staff members are to bring the student's EpiPen, ASCIA Action Plan, mobile phone and school's spare EpiPen and proceed immediately to the student who is having an anaphylactic reaction.

At the site of the emergency:

- Where possible, a staff member trained in the administration of an EpiPen will give the injection;
- If 000 has not already been called, this is to be done via mobile phone immediately and advise the operator that a student has suffered an anaphylactic/severe allergic reaction and that an EpiPen has been administered;
- The staff member who administered the EpiPen will record the time when the injection was given;
- The staff members to watch to see if signs of anaphylaxis subside or return. If necessary, administer the spare EpiPen after 5 minutes.
- The Principal will coordinate emergency procedures including contacting the student's emergency contact person.

Special Event Days, Excursions and Camp

Parents to be communicated with in regards to the details of the event/excursion/camp by the classroom teacher, with any potential risks identified and strategies to manage this agreed upon, in a timely manner. Prior to leaving the school on an excursion (including camp), the classroom teacher will liaise with the First Aid Coordinator to ensure that the student with anaphylaxis has an up-to-date ASCIA Action Plan and a current EpiPen. The student's EpiPen, ACSIA Action Plan and a spare EpiPen (supplied by parents if possible, otherwise a school general use pen) will be taken to the off-site event. In the event of an anaphylactic reaction away from school, the teacher is to immediately implement the student's emergency ASCIA Action Plan, call an ambulance, and then notify the school. The Principal should be notified. The Principal will arrange for parents or guardians to be notified and for appropriate reports to be made.

Post Incident Action

It is expected that after an incident has occurred and has been resolved, that staff members involved will engage in the following activities:

- Completion of an Incident/Accident Report form including full details of the event and what occurred;
- Collection of the student's personal effects (if the student is transported by ambulance and does not have them) for return to school;
- Debrief with students directly involved as witnesses to the event;
- Debrief of staff involved;
- Communication with Principal and members of Leadership Team, as appropriate, regarding the particulars of the incident, actions taken and outcomes;
- Discuss with parents (later) what occurred and ask them to seek medical advice on how it may be prevented in future (the Principal);
- Review the student's Individual Management Plan (the Principal or Nominee);
- Implement updated risk prevention strategies (where applicable).

Administration of an EpiPen

- Lay person flat, do not stand or walk. If breathing is difficult allow to sit;
- Check and administer EpiPen as per training;
- Phone ambulance (call 000)
- Contact family or emergency contact;
- A further adrenalin dose may be given if there is no response after 5 minutes (use a non-prescription adrenalin auto injector if required);
- Note the time of administration and advise paramedics when they arrive. Hand the paramedics the used EpiPen/s.