

**Help for non-English speakers**

If you need help understanding this policy, please contact Watsonia North Primary School

## Purpose

To explain to Watsonia North School parents, carers, staff and students the processes and procedures in place to support students diagnosed as being at risk of suffering from anaphylaxis. This policy also ensures that Watsonia North School is compliant with Ministerial Order 706 and the Department's guidelines for anaphylaxis management.

## Scope

This policy applies to:

- all staff, including casual relief staff and volunteers
- all students who have been diagnosed with anaphylaxis, or who may require emergency treatment for an anaphylactic reaction, and their parents and carers.

## Policy

### School Statement

Watsonia North School will fully comply with Ministerial Order 706 and the associated guidelines published by the Department of Education and Training.

### Anaphylaxis

Anaphylaxis is a severe allergic reaction that occurs after exposure to an allergen. The most common allergens for school-aged children are nuts, eggs, cow's milk, fish, shellfish, wheat, soy, sesame, latex, certain insect stings and medication.

### Symptoms

Signs and symptoms of a mild to moderate allergic reaction can include:

- swelling of the lips, face and eyes
- hives or welts
- tingling in the mouth.

Signs and symptoms of anaphylaxis, a severe allergic reaction, can include:

- difficult/noisy breathing
- swelling of tongue
- difficulty talking and/or hoarse voice
- wheeze or persistent cough
- persistent dizziness or collapse
- student appears pale or floppy
- abdominal pain and/or vomiting.

Symptoms usually develop within ten minutes and up to two hours after exposure to an allergen, but can appear within a few minutes.

## Treatment

Adrenaline given as an injection into the muscle of the outer mid-thigh is the first aid treatment for anaphylaxis.

Individuals diagnosed as being at risk of anaphylaxis are prescribed an adrenaline autoinjector for use in an emergency. These adrenaline autoinjectors are designed so that anyone can use them in an emergency.

## Individual Anaphylaxis Management Plans

All students at Watsonia North School who are diagnosed by a medical practitioner as being at risk of suffering from an anaphylactic reaction must have an Individual Anaphylaxis Management Plan. When notified of an anaphylaxis diagnosis, the Principal of Watsonia North School is responsible for developing a plan in consultation with the student's parents/carers.

Where necessary, an Individual Anaphylaxis Management Plan will be in place as soon as practicable after a student enrolls at Watsonia North School and where possible, before the student's first day.

Parents and carers must:

- obtain an ASCIA Action Plan for Anaphylaxis from the student's medical practitioner and provide a copy to the school as soon as practicable
- immediately inform the school in writing if there is a relevant change in the student's medical condition and obtain an updated ASCIA Action Plan for Anaphylaxis
- provide an up-to-date photo of the student for the ASCIA Action Plan for Anaphylaxis when that Plan is provided to the school and each time it is reviewed
- provide the school with a current adrenaline autoinjector for the student that has not expired;
- participate in annual reviews of the student's Plan.

Each student's Individual Anaphylaxis Management Plan must include:

- information about the student's medical condition that relates to allergies and the potential for anaphylactic reaction, including the type of allergies the student has
- information about the signs or symptoms the student might exhibit in the event of an allergic reaction based on a written diagnosis from a medical practitioner
- strategies to minimise the risk of exposure to known allergens while the student is under the care or supervision of school staff, including in the school yard, at camps and excursions, or at special events conducted, organised or attended by the school
- the name of the person(s) responsible for implementing the risk minimisation strategies, which have been identified in the Plan
- information about where the student's medication will be stored
- the student's emergency contact details
- an up-to-date ASCIA Action Plan for Anaphylaxis completed by the student's medical practitioner.

## Review and updates to Individual Anaphylaxis Management Plans

A student's Individual Anaphylaxis Management Plan will be reviewed and updated on an annual basis in consultation with the student's parents/carers. The plan will also be reviewed and, where necessary, updated in the following circumstances:

- as soon as practicable after the student has an anaphylactic reaction at school
- if the student's medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, changes
- when the student is participating in an off-site activity, including camps and excursions, or at special events including fetes and concerts.

Our school may also consider updating a student's Individual Anaphylaxis Management Plan if there is an identified and significant increase in the student's potential risk of exposure to allergens at school.

## Location of plans and adrenaline autoinjectors

A copy of each student's Individual Anaphylaxis Management Plan will be stored with their ASCIA Action Plan for Anaphylaxis at the School Office, together with the student's adrenaline autoinjector. Adrenaline autoinjectors must be labelled with the student's name.

A copy of each student's Individual Anaphylaxis Management Plan will be stored in the classroom's management file – RED SATCHEL

A copy of each student's Individual Anaphylaxis Management Plan is displayed in the First Aid room.

A spare adrenaline autoinjector is kept in the School Office.

## Risk Minimisation Strategies

*To reduce the risk of a student suffering from an anaphylactic reaction at Watsonia North School, we have put in place the following strategies:*

- students identified as being anaphylactic to have completed the Strategies to avoid Allergies Plan (Appendix C)
- staff and students are regularly reminded to wash their hands after eating
- students are discouraged from sharing food
- garbage bins at school are to remain covered with lids to reduce the risk of attracting insects
- gloves must be worn when picking up papers or rubbish in the playground
- school canteen staff are trained in appropriate food handling to reduce the risk of cross-contamination
- year groups will be informed of allergens that must be avoided in advance of class parties, events or birthdays
- any meals supplied on excursions (e.g. camps) are screened for safety
- a general use adrenaline autoinjector will be stored at the school for ease of access.
- planning for off-site activities will include risk minimisation strategies for students at risk of anaphylaxis including supervision requirements, the appropriate number of trained staff, emergency response procedures and other risk controls appropriate to the activity and 1
- children with anaphylaxis to use placemats when eating

- regular cleaning and wiping down of tables.

## Adrenaline autoinjectors for general use

Watsonia North School will maintain a supply of adrenaline autoinjector(s) for general use, as a back-up to those provided by parents and carers for specific students, and also for students who may suffer from a first-time reaction at school.

Adrenaline autoinjectors for general use will be stored at the School Office and labelled "general use".

The Principal is responsible for arranging the purchase of adrenaline autoinjectors for general use, and will consider:

- the number of students enrolled at Watsonia North School at risk of anaphylaxis
- the accessibility of adrenaline autoinjectors supplied by parents
- the availability of a sufficient supply of autoinjectors for general use in different locations at the school, as well as at camps, excursions and events
- the limited life span of adrenaline autoinjectors, and the need for general use of adrenaline autoinjectors to be replaced when used or prior to expiry
- the weight of the students at risk of anaphylaxis to determine the correct dosage of adrenaline autoinjector/s to purchase.

## Emergency Response

In the event of an anaphylactic reaction, the emergency response procedures in this policy must be followed, together with the school's general first aid procedures, emergency response procedures and the student's Individual Anaphylaxis Management Plan.

A complete and up-to-date list of students identified as being at risk of anaphylaxis is maintained by Cheryl Campher the school nurse and stored at the School Office. For camps, excursions and special events, a designated staff member will be responsible for maintaining a list of students at risk of anaphylaxis attending the special event, together with their Individual Anaphylaxis Management Plans and adrenaline autoinjectors, where appropriate.

If a student experiences an anaphylactic reaction at school or during a school activity, school staff must:

Step	Action
1.	<ul style="list-style-type: none"> <li>• Lay the person flat</li> <li>• Do not allow them to stand or walk</li> <li>• If breathing is difficult, allow them to sit</li> <li>• Be calm and reassuring</li> <li>• Do not leave them alone</li> <li>• Seek assistance from another staff member or reliable student to locate the student's adrenaline autoinjector or the school's general use autoinjector, and the student's Individual Anaphylaxis Management Plan, stored at the School Office</li> <li>• If the student's plan is not immediately available, or they appear to be experiencing a first time reaction, follow steps 2 to 5</li> </ul>
2.	Administer an EpiPen or EpiPen Jr

	<ul style="list-style-type: none"> <li>• Remove from plastic container</li> <li>• Form a fist around the EpiPen and pull off the blue safety release (cap)</li> <li>• Place orange end against the student's outer mid-thigh (with or without clothing)</li> <li>• Push down hard until a click is heard or felt and hold in place for 3 seconds</li> <li>• Remove EpiPen</li> <li>• Note the time the EpiPen is administered</li> <li>• Retain the used EpiPen to be handed to ambulance paramedics along with the time of administration</li> </ul> <p><b>OR</b></p> <p>Administer an Anapen® 500, Anapen® 300, or Anapen® Jr.</p> <ul style="list-style-type: none"> <li>• Pull off the black needle shield</li> <li>• Pull off grey safety cap (from the red button)</li> <li>• Place needle end firmly against the student's outer mid-thigh at 90 degrees (with or without clothing)</li> <li>• Press red button so it clicks and hold for 10 seconds</li> <li>• Remove Anapen®</li> <li>• Note the time the Anapen is administered</li> <li>• Retain the used Anapen to be handed to ambulance paramedics along with the time of administration</li> </ul>
3.	Call an ambulance (000)
4.	If there is no improvement or severe symptoms progress (as described in the ASCIA Action Plan for Anaphylaxis), further adrenaline doses may be administered every five minutes, if other adrenaline autoinjectors are available.
5.	Contact the student's emergency contacts.

If a student appears to be having a severe allergic reaction but has not been previously diagnosed with an allergy or as being at risk of anaphylaxis, school staff should follow steps 2 – 5 as above.

Schools can use either the EpiPen® **and Anapen® on any student** suspected to be experiencing an anaphylactic reaction, regardless of the device prescribed in their ASCIA Action Plan.

Where possible, schools should consider using the correct dose of adrenaline autoinjector depending on the weight of the student. However, in an emergency, if there is no other option available, any device should be administered to the student.

## Communication Plan

This policy will be available on Watsonia North School's website so that parents and other members of the school community can easily access information about Watsonia North School's anaphylaxis management procedures.

The parents and carers of students who are enrolled at Watsonia North School and are identified as being at risk of anaphylaxis will also be provided with a copy of this policy.

Parents/carers of students enrolling at Watsonia North Primary School will be provided with an information pamphlet upon enrolment. (Refer to Appendix A)

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 schoolyard, or out-of-school settings such as school excursions and sports days.

The Principal is responsible for ensuring that all relevant staff, including casual relief staff, canteen staff and volunteers are aware of this policy and Watsonia North School's procedures for anaphylaxis management. Casual relief staff and volunteers who are responsible for the care and/or supervision of students who are identified as being at risk of anaphylaxis will also receive a verbal briefing on this policy, their role in responding to an anaphylactic reaction and where required, the identity of students at risk.

The Principal is also responsible for ensuring relevant staff are trained and briefed in anaphylaxis management, consistent with the Department's [Anaphylaxis Guidelines](#).

## Staff Training

The Principal will ensure that the following school staff are appropriately trained in anaphylaxis management:

- School staff who conduct classes attended by students who are at risk of anaphylaxis
- School staff who conduct specialist classes, administration staff, education support staff, first aiders and any other member of school staff as required by the Principal based on a risk assessment.

Staff who are required to undertake training must have completed:

- an approved face-to-face anaphylaxis management training course in the last three years, or
- an approved online anaphylaxis management training course in the last two years.

Watsonia North School uses the following training course - ASCIA eTraining course, Course in Verifying the Correct Use of Adrenaline Injector Devices 22579VIC.

Staff are also required to attend a briefing on anaphylaxis management and this policy at least twice per year (with the first briefing to be held at the beginning of the school year), facilitated by the School Nurse who has successfully completed an anaphylaxis management course within the last 2 years.

Each briefing will address:

- this policy
- the causes, symptoms and treatment of anaphylaxis

- the identities of students with a medical condition that relates to allergies and the potential for an anaphylactic reaction, and where their medication is located
- how to use an adrenaline autoinjector, including hands-on practice with a trainer adrenaline autoinjector
- the school's general first aid and emergency response procedures
- the location of, and access to, adrenaline autoinjectors that have been provided by parents or purchased by the school for general use.

When a new student enrolls at Watsonia North School who is at risk of anaphylaxis, the Principal will develop an interim plan in consultation with the student's parents and ensure that appropriate staff are trained and briefed as soon as possible.

A record of staff training courses and briefings will be maintained through the school's online Emergency Management Plan.

The Principal will ensure that while students at risk of anaphylaxis are under the care or supervision of the school outside of normal class activities, including in the schoolyard, at camps and excursions, or on special event days, there is a sufficient number of school staff present who have been trained in anaphylaxis management.

## Further Information and Resources

- The Department's Policy and Advisory Library (PAL):
  - [Anaphylaxis](#)
- [Allergy & Anaphylaxis Australia](#)
- ASCIA Guidelines: [Schooling and childcare](#)
- Royal Children's Hospital: [Allergy and immunology](#)
- WNPS First Aid Policy

Appendices which support this policy:

- Appendix A: School Communication Plan
- Appendix B: Response to an Anaphylactic Reaction
- Appendix C: Strategies to Avoid Allergens
- Appendix D: Anaphylaxis Information Pamphlet

## Policy Review and Approval

Evaluation of the *Anaphylaxis Policy* will occur as stipulated in the *Watsonia North PS Policy Review Cycle* document.

This policy was updated in October 2022 and is scheduled for review annually.

Policy last reviewed	17 October 2022
Approved by	Principal
Next scheduled review date	17 October 2023



The Principal will complete the Department's Annual Risk Management Checklist for anaphylaxis management to assist with the evaluation and review of this policy and the support provided to students at risk of anaphylaxis.

### **Communication of School Policies**

All Watsonia North Primary School Policies are communicated to the general public and school community via the school website.

[Policies - Watsonia North Primary School \(wats-north.vic.edu.au\)](https://wats-north.vic.edu.au)

School Operational and Curriculum Policies are available in classrooms, office spaces and communal areas for convenient access.



## APPENDIX A

### COMMUNICATION PLAN

#### INFORMATION ABOUT ANAPHYLAXIS FOR THE SCHOOL COMMUNITY

It is important to work with the whole school community to understand better how to provide a safe and supportive environment for all students, including students with severe allergies.

#### STAFF:

All staff, including class teachers, office staff, regular casual relief teachers, canteen staff, administrative and other office staff, will be trained twice a year by a trainer/staff member who has up-to-date anaphylaxis management training on:

- the school's anaphylaxis management policy
- the causes, symptoms and treatment of anaphylaxis (see Anaphylaxis Guidelines Document)
- the identities of students who are at risk of anaphylaxis (located in classroom rolls and displayed in the Staffroom, First Aid Room, and school office)
- the preventative strategies in place (Student Management Plans in classroom rolls, First Aid Room Folder and School Office Folder)
- how to administer EpiPens®, including hands-on practice with a trainer EpiPen®
- where EpiPens® are kept (school office wall)
- the school's first aid and emergency response procedures ('Response to Anaphylactic Reaction' contained in this document)
- their role in responding to a severe allergic reaction ('Response to Anaphylactic Reaction' included in this document)

This will be communicated at staff meetings and training sessions each semester to discuss, practise and review the school's management strategies for students at risk of anaphylaxis. Students' ASCIA Action Plans will be displayed in the Office, Staffroom, First Aid Room and the Canteen. Classroom rolls will have a copy of the student's Anaphylaxis Management Plan (including the Action Plan) kept at the front of the roll.

Casual Relief Teachers will be provided with a 'CRT Anaphylaxis Information' document containing the school's policy, emergency response procedures and information about anaphylaxis. They will also be invited to attend training sessions each semester.

#### STUDENTS:

Class teachers will discuss the topic of Anaphylaxis with all students in their class and give the following simple key messages:

- always take food allergies seriously
- don't share your food with friends, including canteen food
- wash your hands after eating
- know what your friends are allergic to
- if a schoolmate becomes sick, get help from an adult immediately
- be careful during eating times. If you are eating food that a classmate is allergic to don't pressure your friends to eat food that they are allergic to.

Peer understanding is an important element of support for students at risk of anaphylaxis.

**PARENTS:**

Staff should be aware that parents/carers of a child at risk of anaphylaxis may experience high levels of anxiety about sending their child to school. It is important to encourage an open and cooperative relationship with parents/carers so they can feel confident that appropriate management strategies are in place.

Implementing the school's Anaphylaxis Policy, including practical prevention strategies, increased education, awareness and support from the school community, should diminish the anxiety parents/carers and students may feel.

**BROADER COMMUNITY:**

Watsonia North Primary School will attempt to raise awareness about anaphylaxis in the school community by sending home information brochures and fact sheets in the newsletter to ensure that all parents/carers have an increased understanding of the condition.

## APPENDIX B

### RESPONSE TO AN ANAPHYLACTIC REACTION

#### IN THE CLASSROOM:

If a student has an anaphylactic reaction in the classroom or specialist area:

The teacher must:

- ring the Office (**Sue 201, Tanya 200, Sarah 203, Jamie 204**) immediately to alert them to bring the student's EpiPen and provide the following information:
  - **Name of the student having the anaphylactic reaction**
  - **Room number**
- stay with the child to monitor their condition
- administer the EpiPen following the guidelines on the student's Action Plan when it arrives
- remain with the student at all times after the EpiPen is administered
- ensure that someone is **writing down details** including time of the incident, condition of the patient, time EpiPen was given, response and further details

The Office staff member(s) must:

- immediately get the appropriate student's EpiPen from the Office wall
- take the Student Anaphylaxis Action Plan book (located on the office bench)
- alert another staff member to ring an ambulance on the Office mobile phone
- run to the classroom with the **EpiPen** and **Student Anaphylaxis Action Plan Book with spare EpiPens**
- stay with the student until the Ambulance Officers arrive

The other staff member alerted must:

- ring an ambulance on the Office mobile phone and stay on the phone to the ambulance
- send another staff member to wait on Sharpes Road for the Ambulance
- go directly to the classroom of the student having the reaction, so they can keep the ambulance staff updated on the student's condition and receive advice on managing the student's condition appropriately

Available staff members or teachers from nearby classrooms should immediately remove the other students from the class and alert the First Aid Officer (**Cheryl 206**) to assist in the classroom. First Aid Officer should assist at the scene with first aid mobile phone.

The parents/carers of the student are to be contacted by administration staff.

#### Note:

- ***If the person who should be administering the EpiPen is untrained, i.e. a CRT, another member of staff should take over if immediately available.***
- ***If an emergency has occurred, an email will be sent to staff with details.***
- ***Staff and students involved in an emergency situation will be offered support and debriefing to ensure personal wellbeing.***

## RESPONSE TO AN ANAPHYLACTIC REACTION

### IN THE SCHOOLYARD:

If a student has an anaphylactic reaction in the school yard, the Yard Duty teacher must:

- immediately ring the Restorative Room teacher (Staff Room mobile phone Number 2)
- give the **name of the student** having the reaction and **where they are in the yard**
- stay on the phone with the Restorative Room duty teacher until they arrive
- administer the EpiPen following the guidelines on the student's Action Plan
- remain with the student at all times
- ensure that someone is **writing down details** including time of the incident, condition of the patient, time EpiPen was given, response and further details

The Restorative Room duty teacher who receives the call must:

- immediately walk with haste to the office whilst staying on the mobile phone
- alert another staff member to ring an ambulance on the Office mobile phone, telling them the student's name and location in the schoolyard
- get the appropriate student's EpiPen off the Office wall
- take the Student Anaphylaxis Action Plan Book (located on the office bench)
- run to the appropriate school yard location with the student's EpiPen, Student Anaphylaxis Action Plan Book and general use EpiPens (adult/junior)

The other staff member who has been alerted of the situation must:

- ring the ambulance on the Office mobile phone and stay on the phone so that they can keep the ambulance staff updated on the student's condition and receive advice on managing the student appropriately
- send another staff member to wait on Sharpes Road for the Ambulance
- go directly to the location of the student having the reaction
- stay with the student until the Ambulance Officers arrive

Other staff in the Staffroom should immediately notify the First Aid Officer to assist at the scene with first aid mobile phone. Available staff should go to the scene to manage the other students in the yard.

The parents/carers of the student are to be contacted by administration staff.

### NOTE:

- **If the person who should be administering the EpiPen is untrained, i.e. a CRT, another member of staff should take over if immediately available.**
- **If an emergency has occurred, an email will be sent to staff with details.**
- **Staff and students involved in an emergency situation will be offered support and debriefing to ensure personal wellbeing.**

## MOBILE PHONE PROTOCOL – YARD SUPERVISION

There are 6 phones in the system which are located at the charging station in the office above the PA system:

- Staffroom,
- Office
- Sickbay
- Northside Yard Duty
- Southside Yard Duty and
- Northside Playground Yard Duty.

### **NORTHSIDE PHONE, SOUTHSIDE PHONE and NORTHSIDE PLAYGROUND PHONE**

(Before and After School, Recess and Lunchtime):

1. First-half Yard Duty Teacher picks up their phone from the charging station.
2. This teacher hands the phone to the Second half Yard Duty Teacher at the changeover.
3. Second half Yard Duty Teacher returns it to the charging station at the end of the session

**STAFFROOM PHONE** will remain in the Staffroom/Restorative Room during recess/lunchtimes and be monitored by the **Restorative Room Duty Teacher** in the Staffroom or the Restorative Room (as per the published timetable).

1. The first Restorative Room Duty teacher picks up the phone from the Office and passes it on to the subsequent Restorative Duty teachers.
2. The last duty teacher returns it to the charging station at the end of each recess/lunchtime.

**The Duty teacher must keep the phone with them at all times. This is the first number that will be called in an emergency.**

The **OFFICE PHONE** will remain in the office charging station and be monitored by Tanya, Sue and/or Des when they are present. The system does not rely on office monitoring as the Restorative Room Duty Teacher will always be the primary monitor.

The **First Aid Officer** will monitor the **SICK BAY PHONE** as further backup support if needed.

### **USE THE PHONE ONLY WHEN YOU HAVE AN EMERGENCY**

That is when you need **URGENT** and **IMMEDIATE ASSISTANCE** or need to convey urgent information back into the building. In this way, communications received will also attract immediate attention. The Phones can also be used for **URGENT** calls between Yard Duty teachers if necessary, for example, locating a student.

**TO USE THE PHONE, PRESS digits 1,2,8,5, and then call the respective area.**

**STUDENTS ARE NOT TO USE/HANDLE THE PHONES FOR OBVIOUS HEALTH AND SAFETY REASONS.  
STUDENTS ARE NOT TO RETURN PHONES TO THE OFFICE.**

## RESPONSE TO AN ANAPHYLACTIC REACTION

### ON SCHOOL EXCURSIONS/SPORTS DAYS (OUT OF SCHOOL SETTINGS):

Teachers must ensure that when they take students who are at risk of anaphylaxis, on excursions or to other events outside of the school, the teacher carries the following items with them at all times:

- the student's EpiPen
- the student's Antihistamine medication (located in the First Aid room) if this is part of their Action Plan
- the student's Action Plan
- a charged mobile phone (available from the school office for excursions).

**The student who is at risk of anaphylaxis must remain with the teacher carrying these items at all times. The teacher must be trained in anaphylaxis management and the administration of an EpiPen and be very familiar with the student's Action Plan before taking them from the school setting.**

If a student has an anaphylactic reaction in an out-of-school setting, the supervising teacher must:

- administer the student's EpiPen following the student's Action Plan
- immediately call an ambulance and stay on the phone so that they can keep the ambulance staff updated on the student's condition and receive advice on managing the student appropriately
- send another adult to wait on the street for the ambulance
- if possible, have another person ring the parents using the numbers on the Action Plan
- stay with the student at all times
- when appropriate, ring the school
- ensure that someone is **writing down details** including time of the incident, patient condition, time EpiPen was given, response and further details.

### NOTE:

- ***If the person who should be administering the EpiPen is untrained, i.e. a CRT, another member of staff should take over if immediately available.***
- ***If an emergency has occurred, an email will be sent to staff with details.***
- ***Staff and students involved in an emergency situation will be offered support and debriefing to ensure personal wellbeing.***

## APPENDIX C

### STRATEGIES TO AVOID ALLERGENS (EXAMPLE FOR A NUT ALLERGY)

**Child's Name:**

DATE OF BIRTH:		Year Level:	Room
SEVERE ALLERGIES:	<b>PEANUTS</b>		
OTHER KNOWN ALLERGIES:	Sensitivity to raw egg		
MEDICATION:	<ul style="list-style-type: none"> <li>• EpiPen kept in the office</li> <li>• Zyrtec in First Aid room for a mild reaction</li> </ul>		

RISK	STRATEGY	WHO?
Lunchtime/snack	<ul style="list-style-type: none"> <li>• Wash hands before and after</li> <li>• Use placemats</li> <li>• Sit with a friend far from children eating peanut butter/Nutella</li> <li>• No food sharing</li> </ul>	Students & teacher
Birthday Celebrations	The student has his own treat box	Kept by teacher-supplied by the parent
Excursions	<ul style="list-style-type: none"> <li>• Carry EpiPen</li> <li>• Be aware of allergens in unfamiliar environments</li> <li>• Any meals supplied on excursions are screened for safety</li> <li>• Take a mobile phone</li> </ul>	Teacher
Art Room	<ul style="list-style-type: none"> <li>• Wash hands before and after</li> <li>• If construction, have 'nut-free boxes.'</li> </ul>	Art teacher
Cooking Activities	<ul style="list-style-type: none"> <li>• Check all ingredients</li> <li>• Give the student a 'job' which doesn't involve contact with food (recording recipes/taking photos, etc.)</li> </ul>	Teacher
Table Cleanliness	Regular cleaning of tables	Cleaner and teacher



Grade Split/Teacher Absences	Copy of Anaphylaxis Management Plan and Strategies to Avoid Allergens to go with a student when the grade is split (to be kept inside Roll)	Person splitting grade to send with student
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## APPENDIX D

### Anaphylaxis Information Pamphlet

AN INFORMATION GUIDE FOR PARENTS AND CAREGIVERS

# anaphylaxis

awareness in schools

Watsonia North Primary School is committed to the promotion of community awareness about anaphylaxis. This **Information Guide for Parents and Caregivers** will provide families with important knowledge about anaphylaxis and its symptoms, together with the school's current Anaphylaxis Management Policy.

## what all families can do

Awareness, knowledge and planning are the key for anaphylaxis management.

Ensure that the school is informed immediately if your child is diagnosed with anaphylaxis, or an anaphylaxis diagnosis changes.

Discuss the topic of anaphylaxis with your children, with a few simple key messages:

- Always take food allergies seriously
  - severe allergies are no joke!
- Don't share your food with friends.
- Wash your hands after eating.
  - Be respectful of schoolmates and their condition.

For further information regarding our school policy for anaphylaxis contact Watsonia North Primary School on [P] 03 9435 1285 or visit <http://www.wats-north.vic.edu.au/>

information guide created by kori lewis © 2008  
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## ? ? ? ? what is anaphylaxis?

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 (eg, cashews), cow's milk, fish and shellfish, wheat, soy, sesame, latex, certain insect stings and medications.

(Department of Education & Early Childhood Development, 2008)




## APPENDIX D

### Anaphylaxis Information Pamphlet

#### anaphylaxis at our school

Watsonia North Primary School and its staff have taken the following actions to ensure safety for students with anaphylaxis:

##### food sharing

A "no sharing" policy is encouraged at Watsonia North Primary School where students learn the importance of not swapping food with friends, especially with those who have severe allergies.

##### hygienic classroom practices

Both students and teachers are encouraged to wash their hands after eating. Placemats are used by all students in the classroom to avoid anaphylaxis through contamination of tables.

##### banning foods

In accordance with recommendations from the Department of Education and Early Childhood Development, Watsonia North Primary School is not a "nut free" zone. Instead, other precautions are taken to protect children from an anaphylactic reaction.

##### EpiPen® training

All teachers and other school staff who are responsible for the care of students at risk of anaphylaxis are trained in how to recognise an anaphylactic reaction, and respond accordingly. This includes regular training in the administering of an EpiPen®.

##### anaphylaxis management plan

Current legislation requires that schools develop an anaphylaxis management plan in collaboration with parents, for any student diagnosed with anaphylaxis. Watsonia North Primary School adheres to this regulation.

#### facts about anaphylaxis signs and symptoms



The symptoms of a mild to moderate allergic reaction can include:

- swelling of the lips, face and eyes
- hives or welts
- abdominal pain and/or vomiting.

Symptoms of anaphylaxis (a severe allergic reaction) can include:

- difficulty breathing or noisy breathing
- swelling of the tongue
- swelling/tightness in the throat
- difficulty talking and/or a hoarse voice
- wheezing or persistent coughing
- loss of consciousness and/or collapse
- young children may appear pale and floppy.

Symptoms usually develop within 10 minutes to one hour of exposure to an allergen but can appear within a few minutes.

(Department of Education & Early Childhood Development, 2008)

#### further resources available

Anaphylaxis Guidelines for Victorian Government Schools  
<http://www.education.vic.gov.au/health/wellbeing/health/anaphylaxis.htm>

Anaphylaxis Australia Inc.

[www.allergyfacts.org.au](http://www.allergyfacts.org.au)

The Department of Allergy and Immunology, Royal Children's Hospital  
[www.rch.org.au](http://www.rch.org.au)

The Australasian Society of Clinical Immunology and Allergy (ASCIA)

[www.allergy.org.au](http://www.allergy.org.au)

ASCIA Guidelines for the Prevention of Food Anaphylactic Reactions in Schools, Preschools and Childcare Centres:  
[www.allergy.org.au](http://www.allergy.org.au) <<http://www.allergy.org.au>>

Safe Schools Are Effective Schools: A Resource for Developing Safe and Supportive School Environments:  
[www.safeschools.vic.edu.au/wellbeing/safeschools/bullying/index.htm](http://www.safeschools.vic.edu.au/wellbeing/safeschools/bullying/index.htm)