



## TOWNSVILLE GRAMMAR SCHOOL

### ANAPHYLAXIS MANAGEMENT POLICY

PURPOSE	<ul style="list-style-type: none"><li>• To provide, as far as practicable, a safe, supportive environment, where students at risk of anaphylaxis can participate in all aspects of their schooling.</li><li>• To raise awareness about anaphylaxis, and the School's Anaphylaxis Management Policy within the School community.</li><li>• To engage with parents/carers of students at risk of anaphylaxis in assessing risks, developing risk minimisation and management strategies for the student.</li><li>• To ensure that all staff members have adequate knowledge about allergies, anaphylaxis and the School's policy and procedures in responding to an anaphylactic reaction.</li></ul>		
SCOPE	Students and employees, including full-time, part-time, permanent, fixed term and casual employees, as well as contractors, volunteers and people undertaking work experience or vocational placements at Townsville Grammar School.		
REFERENCES	ASCIA Action Plan		
REVIEWED	Annually	NEXT REVIEW DATE	January 2027
POLICY OWNER	Deputy Principal		

### Policy

#### Background

This policy was produced in response to Education Queensland's Anaphylaxis Guidelines for Queensland schools and amendments as stated in the Health (Drugs and Poisons) Act 1996, allowing administration of the EpiPen by trained staff, without parental consent. It is expected that all schools across Queensland have an Anaphylaxis Management Policy if they have a student enrolled who has been diagnosed at risk of 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, wheat, soy, sesame, latex, certain insect stings and medication. Signs and symptoms of anaphylaxis include hives/rash, tingling in or around the mouth, abdominal pain, vomiting, diarrhea, facial swelling, cough or wheeze, difficulty breathing or swallowing, loss of consciousness or collapse, or cessation of breathing.

The key in preventing an anaphylactic event at School is knowledge of students who have been diagnosed at risk and the awareness of triggers (allergens). Partnership between school and parents is important in ensuring that identified foods or items which pose a health risk are where possible, kept away from these students while at school.

Adrenaline given through an EpiPen auto injector into the muscle of the outer mid-thigh is the most effective first aid treatment for anaphylaxis.

#### Individual Anaphylaxis Management Plans

The School Nurse will liaise with the parent/carer in an aim to ensure that every individual with allergies/anaphylaxis will have an emergency procedure plan (ASCIA Action Plan), completed by the parent/carer in consultation with their medical practitioner.

The individual anaphylaxis management plan will be in place as soon as practicable after the student enrolls, and where possible, before their first day of School.

An individual anaphylaxis management plan will set out the following:

- Information about the diagnosis, including the type of allergy/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 care/supervision of School staff, 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 procedure plan (ASClA Action Plan), completed by the parent, will:
  - Set out the emergency procedures to be taken in the event of an allergic reaction.
  - Be signed by a medical practitioner who is currently treating the student.
  - Include an up to date photograph of the student.
- The individual management plan will be reviewed in consultation with the student's parents/carers:
  - Annually
  - If the student's condition changes.
  - Immediately after the student has an anaphylactic reaction at School.
- It is the responsibility of the parent to:
  - Provide the emergency procedures plan (ASClA Action Plan) to the Health Centre.
  - Inform the School's Health Centre if their child's medical condition changes and if so, provide an updated emergency procedures plan (ASClA Action Plan).
  - Provide the School with required medication – EpiPen &/or antihistamines.

### **Staff Training and Emergency Response**

All staff will be briefed each year by the School Nurse who has up to date anaphylaxis management training. This briefing will include:

- The School's Anaphylaxis Management Policy.
- The causes, symptoms and treatment of anaphylaxis.
- The identities of students diagnosed at risk of anaphylaxis and the location of their medication.
- How to use an auto adrenaline injecting device.
- The School's first aid and emergency response procedures.

Teachers and staff who conduct classes that contain students at risk of anaphylaxis must have annual ASClA training in an anaphylaxis management. Volunteers and casual relief staff of students at risk of anaphylaxis will be briefed on their role in responding to a student anaphylactic reaction whilst that student is in their care.

Teachers and staff who conduct excursions, yard duty, camps and special event days must have up to date training in an anaphylaxis management course. The School Nurse will identify the School staff to be trained based on a risk assessment. The School first aid procedures and students emergency procedures plan (ASClA Action Plan) will be followed in responding to an anaphylactic reaction.

### **Anaphylactic Risk Identification**

Prior to/upon commencing at Townsville Grammar School, parents of anaphylactic students are asked to have an ASClA Action Plan completed by the student's medical practitioner and returned to the Health Centre.

The individual anaphylaxis management plan sets out the following:

- Information about the diagnosis, including the type of allergy/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 care/supervision of School staff, including camps and excursions.
- The student's emergency contact details.
- Emergency procedures to be taken in the event of an allergic reaction.
- Includes an up to date photograph of the student.
- Reviewed in consultation with the student's parents/carers annually or if the student's condition changes or after the student has an anaphylactic reaction.
- On TASS, when logging onto an anaphylactic student, a message will appear on the screen alerts users of a medical risk/concern.

Parents/carers should ensure that the EpiPen supplied for their child is replaced prior to the expiry date.

### **Responding to an Anaphylactic Event**

As part of the duty of care to students, staff are required to administer first aid when necessary and within the limits of their skill/training. It is noted that the teacher's duty of care is greater than that of an ordinary citizen in that a teacher is obliged to assist an injured student, while an ordinary citizen may choose to do nothing.

### **Responding to an Anaphylactic Event on School Premises**

Staff responding to an anaphylactic event are:

1. To stay with the student.
2. Contact the School Nurse at the Health Centre by dialing 4944 or via mobile on #2002 on the internal phone system.

The nurse will:

1. Notify Reception that a medical emergency response is required.
2. Attend the anaphylactic student with their EpiPen; individual ASCIA Action Plan outlining their Emergency Management Plan; and a First Aid kit.

The Student's parents/carers will be contacted as soon as possible.

### **Responding to an Anaphylactic Event During School Excursion/Camp**

Prior to the excursion/camp, staff are informed of local emergency services and how to access them. Individual medical information and EpiPen accompanies all anaphylactic students on excursions/special activity days/camps in the first aid kit. If the excursion is in an isolated area two EpiPen's should be supplied to staff by the individual's guardian. All staff to be aware of the EpiPen location at all times.

Students with anaphylactic responses to insects should wear closed shoes and long-sleeved garments when outdoors and should be encouraged to stay away from water or flowering plants and to wear insect repellent.

Staff responding to an anaphylactic event during an excursion/special activity day are to stay with the student and:

1. Contact Ambulance 000
2. Follow ASCIA management plan enclosed with the student's EpiPen
3. Contact student's parents/carers as soon as possible

### **General Food Policy Measures**

There should be no trading/sharing of food, food utensils or food containers. It is ideal that students with severe food allergies should only eat lunches and snacks that have been prepared at home. Drink bottles and lunch boxes provided by parents, should be clearly labelled with the name of the child for whom they are intended.

The use of food in crafts, cooking classes and science experiments may need to be restricted depending on the allergies of particular students. Food preparation personnel should be instructed about measures necessary to prevent cross contamination during the handling, preparation and serving of food.

ASClA risk minimisation strategies recommend the removal of anaphylactic foods from the School tuck shop. This does not apply to those foods labelled “may contain traces of nuts”. Implementation of blanket food bans or attempts to prohibit the entry of food substances into schools is not recommended.