



## HELP FOR NON-ENGLISH SPEAKERS

If you need help to understand the information in this policy, please contact Administration.

## PURPOSE

To explain to Serpell Primary 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 Serpell Primary 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*

Serpell Primary 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 medications.

### *Symptoms*

Signs and symptoms of a mild to moderate allergic reactions 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 Serpell Primary 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 School Nurse, on behalf of the Principal 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 Serpell Primary 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 is 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 Health Centre which is unlocked. They are easily accessible in grade order. They are stored away from direct light and heat and not in a refrigerator or freezer. Each Adrenaline Autoinjector is clearly labelled with the student's name and stored with a copy of the student's ASCIA Action Plan in the student's thermal bag. Student Anaphylaxis plans are also stored on the photo board in the Health Centre, in the red Health Plan folder, the roll folder in classrooms and on the classroom wall.

## *Risk Minimisation Strategies*

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

- 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 level groups will be informed of allergens that must be avoided in advance of class parties, events or birthdays;
- A general use adrenaline autoinjector will be stored at the office for ease of access;
- Planning for off-site activities will include risk minimisation strategies for students at risk of anaphylaxis including supervision requirements, appropriate number of trained staff, emergency response procedures and other risk controls appropriate to the activity and students attending.

## *Adrenaline Autoinjectors for General Use*

Serpell Primary 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 Health Centre 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 Serpell Primary 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 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.

The Principal has determined the number of additional Adult Adrenaline Autoinjectors to be a minimum of four. The Principal has taken into consideration the accessibility of Adrenaline Autoinjectors in the school yard as well as out of school activities and the number of children at risk of anaphylaxis. General use Adrenaline Autoinjector will be available as follows:

- An Adrenaline Autoinjector for General Use is clearly labelled and distinguishable from those for students at risk of anaphylaxis.
- One general Adrenaline Autoinjector to be always kept in the school reception. It is in a thermal bag in the basket labelled 'Health Centre'.
- An Adrenaline Autoinjector for General Use is kept in a thermal pouch in the first aid kits.
- On off-site activities, a first aid kit is to be taken on each bus where there is an anaphylactic student on board. Where possible, if buses are going to the same location, the anaphylactic student can travel on the same bus which has the first aid kit.
- One Adrenaline Autoinjector for general use is to be available at the location of the off-site activity (usually in the first aid kit) if a student is participating who is at risk of anaphylaxis.
- Staff are informed of the location of the General use Adrenaline Autoinjector at staff briefings.
- Trainer Adrenaline Autoinjectors (which do not contain adrenaline or a needle) are stored in a locked cabinet in the Health Centre.

## *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 the school nurse and stored at the health centre. 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 Health Centre</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	<p>Administer an EpiPen or EpiPen Jr (if the student is under 20kg)</p> <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>OR</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> </ul> <p>Retain the used Anapen to be handed to ambulance paramedics along with the time of administration</p>
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 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.

Note: If in doubt, it is better to use an adrenaline autoinjector than not use it, even if in hindsight the reaction is not anaphylaxis. Under-treatment of anaphylaxis is more harmful and potentially life threatening than over treatment of a mild to moderate allergic reaction.

## *Communication Plan*

This policy will be available on Serpell Primary School's website so that parents and other members of the school community can easily access information about Serpell Primary School's anaphylaxis management procedures. The parents and carers of students who are enrolled at Serpell Primary School and are identified as being at risk of anaphylaxis will also be provided with a copy of this policy.

The Principal is responsible for ensuring that all relevant staff, including casual relief staff, canteen staff and volunteers are aware of this policy and Serpell Primary 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](#).

Serpell Primary School has:

- an up-to-date list of students identified as having a medical condition that relates to allergy and the potential for anaphylactic reaction which is kept in the Health Centre in the red Health Plan folders and in the classroom in the form of the Student Medical Report (SMC21101);
- details of Individual Anaphylaxis Management Plans and ASCIA Action Plans that are available:
  - in the Health Centre in the red Health Plan folders, displayed on the wall and in the student's thermal bag on the book shelf;
  - in the classroom in the roll folder and displayed on the wall;
  - in the school yard in the yard duty first aid kits;
  - in all school buildings and sites including gymnasiums and halls;
  - on school excursions in the student's thermal bag;
  - on school camps in the student's thermal bag and in the Camp Handbook;
  - at special events conducted, organised or attended by the school in the student's thermal bag.

## *Specific Guidelines Depending on the Location*

In-School Environment:

- Classrooms - Staff may use classroom phones/personal mobile phones to raise the alarm that a reaction has occurred by contacting the office or the teacher may give the Anaphylaxis Alert Card that is kept on the classroom wall, to 2 responsible children to take to the Health Centre or Office.
- Yard – Yard duty teachers have Yard Duty First Aid Kit which contains photographs of all the anaphylactic children in a small photo album. The photo is given to 2 responsible children who will take it to the Health Centre or Office. Staff may also use their mobile phones to contact the school office.
- A person, nominated by the office staff, will wait for the ambulance at the school entrance and direct them to the closest access point.

## *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, first aiders and any other member of school staff as required by the Principal based on a risk assessment.

# ANAPHYLAXIS POLICY

Serpell Primary School

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.

Serpell Primary School uses the following training course of Anaphylaxis 22578 VIC.

Staff are also required to attend a briefing on anaphylaxis management and this policy at least twice per 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 identifies of students with a medical condition that relates to allergy and the potential for 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 Serpell Primary 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.

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 school yard, at camps and excursions, or at 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](#)

## POLICY REVIEW AND APPROVAL

Policy last reviewed	This policy was last updated on the 13 <sup>th</sup> of March 2025.
Approved by	Principal
Next scheduled review date	This policy is scheduled for review in March 2026.

The School Nurse, on behalf of 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.