Anaphylaxis

Anaphylaxis is a severe and sudden allergic reaction. It occurs when a person is exposed to an allergen. Anaphylaxis is potentially life threatening and always requires an emergency response.

Anaphylaxis Guidelines for Schools
Anaphylaxis Emergency Care
Anaphylaxis Training
Minimising the Risk of Exposure to Allergens

Anaphylaxis guidelines for schools

Anaphylaxis Guidelines for Schools - Edition 2, 2006 is currently being updated. Appendix 7 of the guidelines refers to the ASCIA Anaphylaxis Action Plan. To view current versions of the plans go to the <u>Australasian Society of Clinical Immunology and Allergy Inc</u> (ASCIA) website.

<u>Anaphylaxis Guidelines for Schools - Edition 2</u> (PDF 1MB) outlines the steps schools need to follow to manage the needs of students who have been diagnosed as being at risk of a severe allergic reaction. They recommend a case by case approach which is responsive to the needs of the individual student within the context of the particular school.

The guidelines include information and forms for parents (Appendices 1, 2 & 3). These have been <u>translated</u> into 22 languages.

Where a student is known to be at risk of an anaphylactic reaction, an individual health care plan is developed.

Parents will need to provide information from their child's medical practitioner, including an ASCIA Anaphylaxis Action Plan. This information will be used in the development of an individual health care plan.

For further information about ASCIA Anaphylaxis Action Plans schools can contact the student welfare consultant at their <u>regional office</u> or the Student Welfare Directorate.

Emergency care

Anaphylaxis always requires an emergency response. Using an autoinjector to administer adrenaline and calling an ambulance is the emergency response for anaphylaxis.

Students diagnosed at risk of anaphylaxis must have an emergency response plan as a part of their individual health care plan.

For anaphylaxis the emergency response plan is an ASCIA Anaphylaxis Action Plan completed and signed by the child's prescribing doctor.

The emergency response plan - ASCIA Action Plans for Anaphylaxis

<u>ASCIA Action Plans for Anaphylaxis</u> are available from the Australasian Society of Clinical Immunology and Allergy Inc (ASCIA) website.

There are two plans for anaphylaxis:

- ASCIA Action Plan for Anaphylaxis-personal for a specific student who has been
 prescribed an adrenaline autoinjector (three versions of the plan are available, one for
 each of the three different autoinjectors).
- 2. **ASCIA Action Plan for Anaphylaxis-general** that does not include information about a specific student that can be used as a poster (three versions of the plan are available, one for each of the three different autoinjectors).

The above ASCIA Action Plans for Anaphylaxis can be used for individuals with food and insect allergies. The plans include instructions on how to use an adrenaline autoinjector and a copy should therefore always be stored in close proximity to the autoinjector.

A third ASCIA Action Plan is available for mild to moderate allergies (**ASCIA Action Plan for Allergic Reactions-personal**) for use when no adrenaline autoinjector has been prescribed.

It is the role of the parent to provide the school with an ASCIA Action Plans for Anaphylaxis completed and signed by their child's prescribing doctor.

This plan should be posted in suitable locations for easy reference as agreed by the parent and where appropriate, the student. If copies are required then the original signed copy, prepared by the doctor, should be photocopied.

Adrenaline Autoinjectors (EpiPen and Anapen)

Adrenaline autoinjectors contain a single dose of adrenaline and are designed as a first aid device for use by people without formal medical or nursing training. Three devices are approved for sale in Australia, the EpiPen, the new-look EpiPen and the Anapen. A junior device is available in each model for small children (under 20kg).

The new-look EpiPen is a different colour from the original EpiPen (which will be gradually phased out from mid 2011 to mid 2012) but is administered in the same way. The original EpiPen has a grey safety cap and a black needle end. The new-look EpiPen has a blue safety release and orange needle end.

It is important for school staff to be aware that EpiPen devices look and operate differently to the Anapen devices.

Both the NSW Health <u>Anaphylaxis Education Training Program and the e-training</u> include instruction in administering the new-look EpiPen, the original EpiPen and the Anapen.

It is the role of the parent to provide the prescribed adrenaline autoinjector and to replace it when it expires or after it has been used.

A student's individual health care plan for anaphylaxis should outline a process for replacing used and expired adrenaline autoinjectors in a timely way.

Anaphylaxis training

Schools must arrange specialist anaphylaxis training for staff where students in the school have been diagnosed as being at risk of anaphylaxis. The specialist training includes practical instruction in how to use an adrenaline autoinjector (EpiPen and Anapen).

Anaphylaxis, when it occurs, always requires an emergency response. The student's health care plan will detail the emergency response.

Principals are reminded that as many school staff as possible should attend the training including school administrative staff and casual staff who are working in the school on that day. Schools should consider extending an invitation to their scheduled training session to other school community members as appropriate. This can include for example, casual staff who are not already working on that day, the school canteen manager, staff from the Out of School Hours Centre associated with the school.

It is recommended that specialist training be conducted every two years. However, schools can make decisions about the frequency of training on the basis of turnover of staff and enrolment of new students. The frequency of training can also be informed by the review and update of students' individual health care plans

Assistance with training from NSW Health

The NSW Health Anaphylaxis Training Program can provide the specialist anaphylaxis training for school staff and is the recommended training provider for the following reasons:

- the program has been developed by NSW Health and ASCIA. ASCIA is the peak professional association on allergies and anaphylaxis for Australia
- the training is delivered by nurse educators accredited through the program
- the training includes information about strategies that can be implemented in schools for avoiding a student's exposure to known allergens
- information in the training aligns with department policy

 the training includes practical instruction in the EpiPen, new-look EpiPen and the Anapen.

To request training schools complete the <u>application for anaphylaxis training form</u> (PDF 90kB) and fax or email it to the administration officer, NSW Health Anaphylaxis Training Program. The administration officer will communicate with the educators as to the availability of training and can be contacted between the hours of 9am and 3pm Monday to Thursday on telephone (02) 9845 3501 or via email anaphylaxis@chw.edu.au.

E-training is available as interim training until specialist training can be arranged.

E-training

Anaphylaxis training can be accessed online. ASCIA, in conjunction with NSW Health and in consultation with the department, has developed anaphylaxis e-training for school and childcare staff.

The e-training does not replace specialist anaphylaxis training conducted where students are diagnosed at risk of anaphylaxis. Anaphylaxis e-training can be used:

- as interim training until specialist training is conducted
- as a refresher course between specialist training sessions
- for any staff, including new and casual staff, who were unable to attend a scheduled specialist anaphylaxis training session.

The self-paced course is completed in modules and can be accessed at http://www.allergy.org.au/etraining/.

Upon successful completion of the course, participants are issued a certificate of completion. This should be provided to the school principal who has responsibility for maintaining an upto-date register of staff with completed anaphylaxis training.

Minimising the risk of exposure to allergens

For students diagnosed at risk of anaphylaxis, the individual health care plan must include strategies to minimise the risk of exposure to known allergens. Further information is provided in Appendices 8 and 9, pages 19-21 of <u>Anaphylaxis Guidelines for Schools Edition 2</u> (PDF 1MB).

Students and their parents will not always be aware that they have a severe allergy.

To minimise the risk of exposure to a high risk allergen, schools should avoid the use of peanuts, peanut butter or other peanut products in curricular or extra-curricular activities. They should also review curriculum materials to make sure that they do not advocate the use of peanuts, peanut butter or other peanut products.

These precautions apply to all schools whether or not any student is known to be at risk from anaphylaxis.

A ban on peanuts and peanut products within the school is not required but may be agreed to by a school and its community.

If a school does decide to ban peanuts or peanut products it should nevertheless not claim to be "peanut free". Such a claim could not reliably be made and, if made, may lead to a false sense of security about exposure to peanuts and peanut products.

If an anaphylactic reaction is suspected in a student not previously known to be at risk, schools must ensure emergency procedures are activated and appropriate medical assistance is called.

Food allergens

Further information on the prevention of food anaphylactic reactions can be accessed from <u>Guidelines for prevention of food anaphylactic reactions in schools, pre-schools and childcare</u>. See Section 4 of the guidelines for information specific to school age children. In this guide, there is no recommendation to place blanket bans on certain food groups.

<u>Food allergies and Anaphylaxis - Information for schools</u> (PDF 58kB) answers some frequently asked questions about food allergies and anaphylaxis.

Where requests are made to ban foods written documentation of this request should be sought from the student's medical practitioner. Further advice can be sought from the Student Welfare Directorate.