



Anaphylaxis Management Policy

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. The key to prevention of anaphylaxis in schools is knowledge of those students who have been diagnosed at risk, awareness of triggers (allergens), and prevention of exposure to these triggers. Partnerships between schools and parents are important in ensuring that certain foods or items are kept away from the student while at school. Adrenaline given through an adrenaline autoinjectors to the muscle of the outer mid-thigh is the most effective first aid treatment for anaphylaxis.

Aims:

1. To provide, as far as practicable, a safe and supportive environment in which students at risk of anaphylaxis can participate equally in all aspects of the student's schooling
2. To raise awareness about anaphylaxis and the school's anaphylaxis management policy in the school community
3. To engage with parents/carers of students at risk of anaphylaxis in assessing risks, developing risk minimisation strategies and management strategies for the student
4. To ensure that each staff member has adequate knowledge about allergies, anaphylaxis and the school's policy and procedures in responding to an anaphylactic reaction

Implementation:

School Statement

Bunyip Primary School will fully comply with Ministerial Order 706 and the associated guidelines published and amended by the Department from time to time in relation to anaphylaxis. Bunyip Primary School acknowledges the school's responsibility to develop and maintain an Anaphylaxis Management Policy.

Individual Anaphylaxis Management Plans

A template of an Individual Anaphylaxis Management Plan can be found in Appendix 3 of the Anaphylaxis Guidelines for Victorian Schools or the Department's website:

<http://www.education.vic.gov.au/school/teachers/health/Pages/anaphylaxischl.aspx>

1. The First Aid Coordinator will ensure that an Individual Anaphylaxis Management Plan is developed, in consultation with the student's parents, for any student who has been diagnosed by a medical practitioner as being at risk of anaphylaxis.
2. 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.
3. The Individual Anaphylaxis Management Plan will set out the following:
 - information about the student's medical condition that relates to allergy and the potential for anaphylactic reaction, including the type of allergy/allergies the student has (based on a written diagnosis from a medical practitioner);
 - strategies to minimise the risk of exposure to known and notified allergens while the student is under the care or supervision of School staff, for in-school and out-of-school settings 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 strategies;

- information on where the student's medication will be stored;
- the student's emergency contact details; and
- an Australasian Society of Clinical Immunology and Allergy (ASCIA) Action Plan

*Note: **The red and blue 'ASCIA Action Plan for Anaphylaxis'** is the recognised form for emergency procedure plans that is provided by medical practitioners to parents when a child is diagnosed as being at risk of anaphylaxis. An example can be found in Appendix 3 of the Anaphylaxis Guidelines or downloaded from <http://www.education.vic.gov.au/school/teachers/health/Pages/anaphylaxischl.aspx>*

- 4 School staff, in particular classroom teachers, will then implement and monitor the student's Individual Anaphylaxis Management Plan.
- 5 The student's Individual Anaphylaxis Management Plan will be reviewed, in consultation with the student's parents in all of the following circumstances:
 - annually;
 - if the student's medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, changes;
 - as soon as practicable after the student has an anaphylactic reaction at school; and
 - when the student is to participate in an off-site activity, such as camps and excursions, or at special events conducted, organised or attended by the school (eg. class parties, elective subjects, cultural days, fetes, incursions).
- 6 It is the responsibility of the parents to:
 - provide the ASCIA Action Plan;
 - inform the school in writing if their child's medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, changes and if relevant, provide an updated ASCIA Action Plan;
 - provide an up to date photo for the ASCIA Action Plan when that plan is provided to the school and when it is reviewed; and
 - provide the school with an adrenaline autoinjectors that is current and not expired for their child

Prevention Strategies

- 1 Bunyip School staff are regularly reminded that they have a duty of care to take reasonable steps to protect a student in their care from risks of injury that are reasonably foreseeable. The development and implementation of appropriate prevention strategies to minimise the risk of incidents of anaphylaxis is an important step to be undertaken by school staff when trying to satisfy this duty of care.
- 2 Bunyip Primary School implements the following Risk minimisation and prevention strategies for all relevant in-school and out-of-school settings which include (but are not limited to) the following:

Classroom:

- Keep a copy of the student's Individual Anaphylaxis Management Plan in the classroom. Be sure the ASCIA Action Plan is easily accessible even if the adrenaline autoinjectors is kept in another location (e.g. school office)
- Liaise with parents about food-related activities ahead of time
- Never give food from outside sources to a student who is at risk of anaphylaxis
- Products labelled 'may contain traces of nuts' should not be served to students allergic to nuts
Products labelled 'may contain milk or egg' should not be served to students with milk or egg allergy and so forth
- Have regular discussions with students about the importance of washing hands, eating their own food and not sharing food

- The General Office Staff should inform casual relief teachers, specialist teachers and volunteers of the names of any students at risk of anaphylaxis, the location of each student's Individual Anaphylaxis Management Plan and adrenaline autoinjectors, the School's Anaphylaxis Management Policy, and each individual person's responsibility in managing an incident. i.e. seeking a trained staff member

Canteen:

- Canteen staff (whether internal or external) should be able to demonstrate satisfactory training in food allergen management and its implications on food-handling practices, including knowledge of the major food allergens triggering anaphylaxis, cross-contamination issues specific to food allergy, label reading, etc. Refer to: 'Safe Food Handling' in the School Policy and Advisory Guide, available at:
<http://www.education.vic.gov.au/school/principals/spag/governance/pages/foodhandling.aspx>
- Helpful resources for food services: <http://www.allergyfacts.org.au/component/virtuemart/>

Yard:

- Each student's Individual Anaphylaxis Management Plan are easily accessible from the yard and staff will be aware of the exact location of the adrenalin autoinjectors for each child (general office)
- All staff on yard duty must be aware of the School's Emergency Response Procedures and how to notify the general office/first aid team of an anaphylactic reaction in the yard
- Yard duty staff must also be able to identify, by face, those students at risk of anaphylaxis

Special events/camps/excursions:

- For special occasions, school staff should consult parents in advance to either develop an alternative food menu or request the parents to send a meal for the student
- The adrenaline autoinjectors and ASCIA Action Plan for anaphylaxis must be with the student even if this child is deemed too young to carry an adrenaline autoinjectors on their person
- A school staff member or team of school staff trained in the recognition of anaphylaxis and the administration of the adrenaline autoinjectors must accompany any student at risk of anaphylaxis on field trips or excursions
- For each excursion etc, a risk assessment should be undertaken for each individual student attending who is at risk of anaphylaxis. The risks may vary according to the number of anaphylactic students attending, the nature of the excursion/sporting event, size of venue, distance from medical assistance, the structure of excursion and corresponding staff-student ratio
- The school should consult parents of anaphylactic students in advance to discuss issues that may arise.
- Prior to engaging a camp owner/operator's services the school should make enquiries as to whether it can provide food that is safe for anaphylactic students
- The school will conduct a risk assessment and develop a risk management strategy for students at risk of anaphylaxis. This should be developed in consultation with parents of students at risk of anaphylaxis and camp owners/operators prior to the camp dates
- Contact details of emergency services are distributed to all school staff as part of the emergency response procedures developed for the camp
- *Note: Chapter 8 of the Anaphylaxis Guidelines for Victorian Schools contains advice about a range of Prevention Strategies that can be put in place*

School Management and Emergency Response

1. In the event of an anaphylactic reaction, the school will implement the first aid and emergency response procedure that relate to the individual student's anaphylaxis management plan.
2. The following procedures for management and emergency response to anaphylactic reactions are in place at Bunyip Primary School:

School management:

- A comprehensive communications plan (outlined below) will be implemented.
 - a complete and up to date list of students identified as having a medical condition that relates to allergy and the potential for anaphylactic reaction is displayed in the sick bay, yard duty folders, office wall with adrenaline autoinjectors, staff room, office and shown to staff as part of anaphylaxis training at the start of each school year and during bi-annual staff anaphylaxis training

Individual Anaphylaxis Management Plans and ASCIA Action Plans can be located:

- In the general office, along with each child's adrenaline autoinjectors
- in each child's classroom;
- in all school buildings including office, sick bay, staff room, art room and hall;
- on school excursions- with the First Aid officer along with the adrenaline autoinjectors;
- on school camps and special events- with the individual student or staff member leading the group activity

Storage and accessibility of adrenaline autoinjectors;

- Generic Adrenaline autoinjectors are located in the sick bay in the cupboard above the bench
- The Risk Management Checklist for anaphylaxis will be completed annually

School Emergency Management:

- Classrooms - personal mobile phones can be used to raise the alarm that a reaction has occurred
- Yard - staff send a student to the general office to alert staff of an emergency
- Excursions and camps - Each individual camp and excursion requires risk assessment for each individual student attending who is at risk of anaphylaxis. Therefore, emergency procedures will vary accordingly
- a nominated staff member will immediately call the ambulance; and
- a nominated staff member will wait for ambulance at a designated school entrance
- A member of the school staff should remain with the student who is displaying symptoms of anaphylaxis at all times
- A member of the school staff should immediately locate the student's adrenaline autoinjectors and the student's Individual Anaphylaxis Management Plan, which includes the student's ASCIA Action Plan
- The adrenaline autoinjectors should then be administered following the instructions in the student's ASCIA Action Plan
- After an anaphylactic reaction has taken place that has involved a student in the school's care and supervision, it is important that the following review processes take place
- *Note: Chapter 9 of the Anaphylaxis Guidelines for Victorian Schools contains advice about Emergency Response Procedures to be followed in schools during and post anaphylactic incidents*
- *When in doubt always ring parents as part of management process*

Adrenaline Autoinjectors for General Use

- 1 The First Aid Coordinator will purchase adrenaline autoinjector(s) for general use (purchased by the school) and as a back up to those supplied by parents

- 2 The First Aid Coordinator, in consultation with the Principal, will determine the number of additional adrenaline autoinjectors(s) required. In doing so, the First Aid Coordinator will take into account the following relevant considerations:
 - the number of students enrolled at the School who have been diagnosed as being at risk of anaphylaxis;
 - the accessibility of adrenaline autoinjectors that have been provided by parents of students who have been diagnosed as being at risk of anaphylaxis;
 - the availability and sufficient supply of Adrenaline autoinjectors for general use in specified locations at the school, including
 - in the school yard, and at excursions, camps and special events conducted or organised by the school; and
 - the adrenaline autoinjectors for general use have a limited life, usually expiring within 12-18 months, and will need to be replaced at the school's expense, either at the time of use or expiry, whichever is first

Communication Plan

- 1 Bunyip Primary School will distribute information to all school staff, students and parents about anaphylaxis and the School's Anaphylaxis Management Policy at least twice each year, including early in Term 1 as part of class welcome newsletters and whole school newsletter
- 2 Information about anaphylaxis and the School's Anaphylaxis Management Policy can also be found on the school website
- 3 Volunteers and casual relief staff of students with a medical condition that relates to allergy and the potential for anaphylactic reaction are informed of the student's condition when signing in at the office and are instructed on their role in responding to an anaphylactic reaction by a student in their care. This may include written instruction for CRT staff
- 4 All staff are informed of all known students with a medical condition that relates to allergy and the potential for anaphylactic reaction, and photos and information regarding these students is circulated and displayed as part of the schools start of year procedures
- 5 All staff are trained in the use of adrenaline autoinjectors and identification of anaphylactic reactions twice yearly, including a session early in term 1. The Principal will ensure that relevant school staff are briefed at least twice a year on:
 - 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 adrenaline autoinjectors, including hands-on practise with a trainer adrenaline autoinjectors (which does not contain adrenaline);
 - the School's general first aid and emergency procedures; and
 - the location of adrenaline Auto injecting devices that have been purchased by the school for general use
 - Note: Chapter 11 of the Anaphylaxis Guidelines for Victorian Government Schools has advice about strategies to raise staff and student awareness, working with parents and engaging the broader school community

Staff Training

- 1 The following school staff will be appropriately trained:
 - School staff who conduct classes that students with a medical condition that relates to allergy and the potential for anaphylactic reaction; and
 - Any further school staff that are determined by the Principal
- 2 The identified school staff will undertake the following training:
 - an Anaphylaxis Management Training Course in the three years prior; and

- participate in a briefing, to occur twice per calendar year (with the first briefing to be held at the beginning of the school year) on:
 - the School's Anaphylaxis Management Policy;
 - the causes, symptoms and treatment of anaphylaxis;
 - the identities of the students with a medical condition that relates to an allergy and the potential for anaphylactic reaction, and where their medication is located;
 - how to use an adrenaline autoinjectors, including hands on practise with a trainer adrenaline autoinjectors device;
 - the School's general first aid and emergency response procedures; and
 - the location of, and access to, adrenaline autoinjectors that have been provided by parents or purchased by the school for general use
- 3 The briefing must be conducted by a member of school staff who has successfully completed an Anaphylaxis Management Training Course in the last 12 months
 - 4 In the event that the relevant training and briefing has not occurred, the First Aid Coordinator will develop an interim Individual Anaphylaxis Management Plan in consultation with the parents of any affected student with a medical condition that relates to allergy and the potential for anaphylactic reaction. Training will be provided to relevant school staff as soon as practicable after the student enrolls, and preferably before the student's first day at School
 - 5 The Principal will ensure:
 - that while a student is under the care or supervision of the school there will be a sufficient number of school staff present who have successfully completed an Anaphylaxis Management Training Course in the three years prior

Note: Further information and resources can be found at

<http://www.education.vic.gov.au/school/teachers/health/Pages/anaphylaxischl.aspx>

Annual Risk Management Checklist

The First Aid Coordinator will complete an annual Risk Management Checklist as published by the Department of Education and Early Childhood Development to monitor compliance with their obligations.

Note: A template of the Risk Management Checklist can be found at Appendix 4 of the Anaphylaxis Guidelines for Victorian Schools or the Department's website:

<http://www.education.vic.gov.au/school/teachers/health/Pages/anaphylaxischl.aspx>

References:

Anaphylaxis Management in Schools- DEECD:

<http://www.education.vic.gov.au/school/principals/health/Pages/anaphylaxischools.aspx#link66>

For more information regarding the legislative requirements of Ministerial Order 706, and its supporting information and resources, see:

1. Ministerial Order 706
2. Fact Sheet – Changes to Anaphylaxis Management in all Victorian Schools
3. Fact Sheet – Changes to Anaphylaxis Management in all Victorian Schools
4. Questions and Answers on implementation of Ministerial Order 706
5. Questions and Answers on implementation of Ministerial Order 706

Evaluation:

Ratified by School Council:

To be reviewed in: