

# ANAPHYLAXIS

## SCHOOL SPECIFIC POLICY

### Rationale:

- Anaphylaxis is an acute allergic reaction to certain substances (allergens) such as food items and insect stings. The condition develops in approximately 1-2% of the population. The most common allergens are nuts, eggs, cow's milk and bee or other insect stings and some medications. It can be life threatening and research indicates it is becoming more prevalent.
- **The school will fully comply with Ministerial Order 706 and the associated Guidelines published and amended by the Department from time to time.**
- The school understands its responsibility to develop and maintain an Anaphylaxis Management Policy that is consistent with Ministerial Order 706.

### Aims:

- To provide a safe and healthy school environment that takes into consideration the needs of all students, including those who may suffer from Anaphylaxis.

### Implementation:

It is the principal's responsibility to ensure that the following school staff will be appropriately trained:

- All school staff to complete *e-training modules* every two years
- At least two school staff trained in correct use of auto injector in order to be the School Anaphylaxis supervisor

School staff must complete one of the following options to meet the anaphylaxis training requirements of MO706:

| Option          | Completed by  | Course  | Provider                                   | Cost   | Valid for |
|-----------------|---|---|--|--|-----------|
| <b>Option 1</b> | <b>All school staff</b>   | <i>ASCIA Anaphylaxis e-training for Victorian Schools</i> followed by a competency check by the School Anaphylaxis Supervisor | ASCIA                                      | Free to all schools                                      | 2 years   |
|                 | <b>AND 2 staff</b> per school or per campus (School Anaphylaxis Supervisor) | <i>Course in Verifying the Correct Use of Adrenaline Autoinjector Devices 22303VIC</i>  | Asthma Foundation                          | Free from the Asthma Foundation (for government schools) | 3 years   |
| <b>Option 2</b> | School staff as determined by the   | <i>Course in First Aid Management of Anaphylaxis 22300</i>  | St John Ambulance or any RTO that has this | Free from St John Ambulance                              | 3 years   |

|                 |   |   |   |  |         |
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|                 | principal                                   | <i>VIC (previously 22099VIC)</i>                | course in their scope of practice                       | (for government schools) until 30/6/16, then paid by each school |         |
| <b>Option 3</b> | School staff as determined by the principal | <i>Course in Anaphylaxis Awareness 10313NAT</i> | Any RTO that has this course in their scope of practice | Paid by each school  | 3 years |

**Please note:** First Aid training does **NOT** meet anaphylaxis training requirements under MO706.

In addition, all staff are to participate in a briefing, to occur twice per calendar year (The first briefing to be held at the beginning of the school year). The briefing will cover:

- 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 autoinjector, including hands on practise with a trainer adrenaline autoinjector device
- the school's general first aid and emergency response procedures
- the location of, and access to, adrenaline autoinjector(s) that have been provided by parents or purchased by the school for general use.

The briefing must be conducted by a member of the school staff nominated as the School Anaphylaxis Supervisor who has successfully completed an Anaphylaxis Management Training Course in the last 2 years.

In the event that the relevant training has not occurred for a member of staff who has a child in their class at risk of Anaphylaxis, the principal will develop an interim Individual Anaphylaxis Management Plan in consultation with the parents of any affected student. 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.

**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
- an ASCIA Action Plan for Anaphylaxis

- An individual Anaphylaxis Plan will be in place as soon as the student enrolls or as soon as practicable after the student enrolls at the school.

School staff will then implement and monitor the student's Individual Anaphylaxis Management Plan.

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
- 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).

**It is the responsibility of the parents to:**

Communicate their child's allergies and risk of Anaphylaxis to the School at the earliest opportunity, preferably on enrolment;

- 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
- participate in yearly reviews of their child's Individual Anaphylaxis Management Plan; and
- provide the school with an adrenaline autoinjector that is current (the date has not expired) for their child.

**It is the responsibility of the principal to:**

- Ensure that when a student with a medical condition that relates to allergy and the potential for Anaphylactic reaction is 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 events conducted, organised or attended by the school, the Principal must ensure that there are a sufficient number of school staff present who have been appropriately trained.
- Ensure that an Individual Anaphylaxis Management Plan is developed in consultation with the student's parents for any student that has been diagnosed by a Medical Practitioner with a medical condition relating to allergy and the potential for an Anaphylactic reaction, where the school has been notified of that diagnosis.
- This includes ensuring the documentation of practical strategies for activities in both in-school and out-of-school settings to minimise the risk of exposure to allergens and nomination of staff who are responsible for implementation of those strategies. The risk minimisation plan should be customised to the particular student for participation in normal school activities (e.g. during cooking and art classes) and at external events (e.g. swimming sports, camps, excursions and interstate/overseas trips). Ensure students' Individual Anaphylaxis Management Plans are communicated to staff.
- Ensure that a Communication Plan is developed to provide information to all school staff, students and parents about Anaphylaxis and the school's Anaphylaxis Management Policy.

- Ensure there are procedures in place for providing volunteers and casual relief staff of students with a medical condition that relates to allergy and the potential for an anaphylactic reaction and their role in responding to an anaphylactic reaction by a student in their care.
- **The Principal will complete an annual Risk Management Checklist as published by the Department of Education and Training Victoria to monitor compliance with their obligations.**
- Arrange for the purchase of additional auto injectors for general use and as a back up to those supplied by parents. These devices will be replaced by the school every 12 to 18 months at either times of use or expiry.

#### **Prevention Strategies:**

- not allowing food sharing, and restricting food to that approved by parents
- keeping the lawns well mown, ensuring children always wear shoes and not allowing drink cans
- identifying susceptible students and knowing their allergens
- requiring parents to provide an ASCIA emergency management plan developed by a health professional and an auto-injector if necessary, both of which will be maintained in the first aid room. First aid staff will contact parents if the use-by date of the injector is close to expiration.
- All ASCIA Anaphylaxis Action Response Posters will be displayed in the first aid room.
- The school will maintain open communication with parents.
- Canteens should provide a range of healthy meals/products that exclude peanut or other nut products in the ingredient list or a 'may contain...' statement.
- 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/>
- 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. If a camp owner/operator cannot provide this confirmation to the school, then the school should consider using an alternative provider.
- Food will not be provided from outside sources to students who have been identified as at risk of anaphylaxis.
- Any food provided to students in the class should not contain the substance to which the student is allergic.
- Casual Relief Teachers (CRT) and specialist teachers will be informed of the names of any students at risk of anaphylaxis and school processes for managing these students.

#### **School Management & Emergency Response:**

In the event of an Anaphylactic reaction, the School's general first aid and emergency response procedures and the student's ASCIA Action Plan will be followed.

ASCIA plans will be located in the first aide room at the front office and in the student's classroom.

The school won't ban certain types of foods (eg: nuts) as it is not practicable to do so, and is not a strategy recommended by the Department of Education or the Royal Children's Hospital. However, the school will request that parents do not send those items to school if at all possible; that the canteen eliminate or reduce the likelihood of such allergens, and the school will reinforce the rules about not sharing food, and not eating foods that parents have not provided or consented to.

**Evaluation:**

This policy will be reviewed as part of the school's review cycle.

This policy was last ratified by School Council on....

**August , 2016**