

SURFSIDE PRIMARY SCHOOL

ANAPHYLAXIS MANAGEMENT POLICY



1. BACKGROUND

On 14 July 2008, the *Children's Services and Education Legislation Amendment (Anaphylaxis Management) Act 2008* came into effect amending the *Children's Services Act 1996* and the *Education and Training Reform Act 2006* requiring that all licensed children's services and schools have an anaphylaxis management policy in place. The *Education and Training Reform Act 2006*, specifies that a school must have an anaphylaxis management policy if it has enrolled a student in circumstances where the school knows (or ought reasonably to know) that the student has been diagnosed as being at risk of anaphylaxis. The *Ministerial Order 706 - Anaphylaxis Management in Victorian Schools* outlines points that schools need to ensure are included in their Anaphylaxis Management Policy. A revised Ministerial Order 706 came into effect on 3 December 2015.

2. PURPOSE

To explain to Surfside 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 Surfside Primary School is compliant with Ministerial Order 706 and the Department's guidelines for anaphylaxis management.

3. 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.

This policy is written to ensure Surfside Primary School manages students at risk of anaphylaxis and complies with legislative requirement under Ministerial Order 706 and 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.
- Raise awareness about anaphylaxis and the school's anaphylaxis management policy in the school community.
- Engage with parents/carers of students at risk of anaphylaxis in assessing risks, developing risk minimisation strategies and management strategies for the student.
- Ensure that each staff member has adequate knowledge about allergies, anaphylaxis and the school's policy and procedures in responding to an anaphylactic reaction.

4. DEFINITION

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 medication.

Signs and symptoms of a mild to moderate allergic reaction can include:

- swelling of the lips, face and eyes

- hives or welts
- tingling in the mouth.

Symptoms usually develop within ten minutes and up to two hours after exposure to an allergen, but can appear within a few minutes.

Signs of anaphylaxis (severe allergic reaction) include any **one** of the following:

- difficult / noisy breathing
- swelling of tongue
- swelling / tightness in throat
- difficulty talking and / or a hoarse voice
- wheeze or persistent cough
- persistent dizziness or collapse
- pale and floppy (young children)
- abdominal pain and / or vomiting (signs of a severe allergic reaction to insects)

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 auto injector for use in an emergency. These adrenaline auto injectors are designed so that anyone can use them in an emergency.

5. PREVENTION

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 EpiPen® auto injector to the muscle of the outer mid-thigh is the most effective first aid treatment for anaphylaxis.

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

The school will:

- Display and disseminate information regarding students with anaphylaxis to classroom teachers and have the child clearly identified with photos.
- Have a spare current adrenaline auto-injector pen in the first aid supplies
- Ensure that the student's anaphylactic kit is taken to any camps and excursions.
- Minimize all risks to the student by creating a safe environment, e.g. creating a nut free classroom, gaining information about student allergies, maintaining the no food sharing policy, having information about the student available to casual relief staff, briefing staff.
- Maintain communication between the parent, student and classroom teacher.
- Monitor the expiry of epi-pens and management plans
- Train staff in accordance with Ministerial Order 706

- The Principal will ensure the completion of an Annual Anaphylaxis Risk Management Checklist.
- Remind staff and students to wash their hands before and after eating;
- Supply gloves for picking up papers or rubbish in the playground;
- Ensure school canteen staff are trained in appropriate food handling to reduce the risk of cross-contamination
- Has a no food sharing policy in place.
- Students eat inside under the supervision of the teacher
- Plans 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.

5.1 Individual Anaphylaxis Management Plans

All students at Surfside 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 principal of Surfside Primary School 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 Surfside 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 and is signed by a medical practitioner who was treating the child on the date the practitioner signs the emergency procedures plan
- 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 auto injector for the student that has 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.

5.2 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.

It is the responsibility of the parent to:

- Provide the emergency procedures plan (ASCIA Action Plan).
- Inform the school if their child's medical condition changes, and if relevant provide an updated emergency procedures plan (ASCIA Action Plan).
- Provide an up to date photo for the emergency procedures plan (ASCIA Action Plan) when the plan is provided to the school and when it is reviewed.
- Provide a current adrenaline auto-injector pen for their child.

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.

5.3 Location of plans and adrenaline auto injectors

A copy of each student's Individual Anaphylaxis Management Plan will be stored with their ASCIA Action Plan for Anaphylaxis at the school office together with the student's adrenaline auto injector. Adrenaline auto injectors must be labelled with the student's name.

5.4 Adrenaline auto injectors for general use

Surfside Primary School will maintain a supply of adrenaline auto injector(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 auto injectors for general use will be stored at [insert location/s] and labelled "general use".

The principal is responsible for arranging the purchase of adrenaline auto injectors for general use, and will consider:

- the number of students enrolled at Surfside Primary School at risk of anaphylaxis
- the accessibility of adrenaline auto injectors supplied by parents
- the availability of a sufficient supply of auto injectors for general use in different locations at the school, as well as at camps, excursions and events

the limited life span of adrenaline auto injectors, and the need for general use adrenaline auto injectors to be replaced when used or prior to expiry.

6. RESPONSE

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 Vicky Schomacker and stored at the school office. 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 auto injectors, where appropriate.

In the event of an anaphylactic reaction, the school's first aid and emergency management response procedures and the student's Individual Anaphylaxis Management Plan must be followed.

An anaphylactic reaction can be traumatic for the student and others witnessing the reaction. In the event of an anaphylactic reaction, students and staff may benefit from post-incident counselling, provided, for Surfside Primary, by the school nurse, guidance officer, student welfare coordinator or school psychologist. It is important to be aware that some students with anaphylaxis may not wish to be singled out or seen to be treated differently.

6.1 Classroom.

Teacher to immediately call the office, (using their mobile phone), to request the students EpiPen and assistance. Also send a student to the office with a Green "EPIPEN Needed" card. An office staff member will then go to the classroom with the student's personal EpiPen and the spare EpiPen, to render assistance.

A MICA Ambulance will be called for by a remaining office staff member, (on their mobile phone), who will then immediately go to the student's class while still on the phone. The Principal & Assistant Principal will be responsible for directing the Paramedics to the classroom and removing the other students from the affected classroom whilst First Aid is being administered.

6.2 Yard.

Each yard duty teacher has been Anaphylaxis Administration trained. All yard duty teachers carry a first aid bum bag, containing an emergency card and their personal mobile phone with the office phone number stored in it. If a reaction occurs, contact is made with the office via mobile phone as well as sending the emergency card to the office with a student.

The attending yard duty teacher will then call 000 and request a MICA Ambulance. They remain with the child.

The child is not to be moved.

The 1st Aid officer at the office will respond to the EpiPen request by taking the relevant student's personal EpiPen and the spare EpiPen to the affected student and proceed to administer and monitor while the yard duty teacher is on the phone to the MICA Ambulance.

6.3 Camps/Excursions.

Prior to a class excursion or camp, the class teachers and relevant staff attending the event must complete an Excursion/Camp action plan. A copy is to be provided to the parent and the excursion/camp coordinator. The child's school and home EpiPen, medications and management plans are to be taken on all camps/excursions

Class teachers are to carry pens and have these children in their group. If a reaction occurs:

- Follow management plan
- EpiPen administered if needed
- Contact ambulance
- Teacher stays with child to monitor
- Contact school or venue administration

6.4 Steps to administer EpiPen

Step	Action
1.	<ul style="list-style-type: none"> ▪ Lay the person flat ▪ Do not allow them to stand or walk ▪ If breathing is difficult, allow them to sit ▪ Be calm and reassuring ▪ Do not leave them alone ▪ Follow the procedure for the relevant location as per instructions above to locate the student's adrenaline auto injector or the school's general use auto injector, and the student's Individual Anaphylaxis Management Plan, stored at the school office. If the student's plan is not immediately available, or they appear to be experiencing a first time reaction, follow steps 2 to 5
2.	<p>Administer an EpiPen or EpiPen Jr (if the student is under 20kg)</p> <ul style="list-style-type: none"> ▪ Remove from plastic container ▪ Form a fist around the EpiPen and pull off the blue safety release (cap) ▪ Place orange end against the student's outer mid-thigh (with or without clothing) ▪ Push down hard until a click is heard or felt and hold in place for 3 seconds ▪ Remove EpiPen ▪ Note the time the EpiPen is administered ▪ Retain the used EpiPen to be handed to ambulance paramedics along with the time of administration
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.

7. COMMUNICATION PLAN

This policy will be available on Surfside Primary School's website so that parents and other members of the school community can easily access information about Surfside Primary

School's anaphylaxis management procedures. The parents and carers of students who are enrolled at Surfside Primary School 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 Surfside 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.

8. STAFF TRAINING AND EMERGENCY RESPONSE

The principal is responsible for ensuring relevant staff are trained and briefed in anaphylaxis management, consistent with the Department's *Anaphylaxis Guidelines*.

A staff member is required to complete Anaphylaxis Management Training every 2 years in order to oversee and train staff.

- Registration for the *Course in Verifying the Correct Use of Adrenaline Auto injector Devices 22303VIC* can be accessed from the Asthma Foundation by phone 1300 314 806 or by visiting: <https://etrainingvic.allergy.org.au>
- A School Anaphylaxis Supervisor Checklist has been developed to guide schools with the requirements of this role. Training agencies that have the *Course in Verifying the Correct Use of Adrenaline Auto injector Devices 22303VIC* in their scope of practice are required to use this checklist to guide their training with Victorian schools.

All staff will be briefed once each semester by a staff member who has up to date anaphylaxis management training on:

- the school's anaphylaxis management policy
- the causes, symptoms and treatment of anaphylaxis
- the identities of students diagnosed at risk of anaphylaxis and where their medication is located
- how to use an auto adrenaline (EPIPEN) injecting device
- the school's first aid and emergency response procedures

9. FURTHER INFORMATION AND RESOURCES

- Policy and Advisory Library:
 - [Anaphylaxis](#)
- Allergy & Anaphylaxis Australia: [Risk minimisation strategies](#)
- ASCIA Guidelines: [Schooling and childcare](#)
- Royal Children's Hospital: [Allergy and immunology](#)

10. REVIEW CYCLE AND EVALUATION

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.

This policy was last updated and ratified at School Council on June 15th 2021 and will be reviewed in June 2022.

APPENDIX 1

This table describes how schools manage students with anaphylaxis.

Strategy	Description
School Anaphylaxis Policy	<p>This is a school-based policy that is required to be developed under s 4.3.1(6) of the Act because the school has at least one enrolled student who has been diagnosed as being at risk of anaphylaxis.</p> <p>This policy describes the school's management of the risk of anaphylaxis. MO706 prescribes the matters which the policy must contain.</p>
Prevention Strategies	Under MO706, a School's Policy must include prevention strategies used by the school to minimise the risk of an anaphylactic reaction.
Communication Plan	A plan developed by the school which provides information to all school staff, students and parents about anaphylaxis and the School's Anaphylaxis Management Policy.
Emergency Response	<p>Procedures which each school develops for emergency response to anaphylactic reactions for all in-school and out-of-school activities.</p> <p>The procedures, which are included in the School's Anaphylaxis Management Policy, differ from the instructions listed on the ASCIA Action Plan of 'how to administer the Adrenaline Auto injector'.</p>
ASCIA Action Plans	<p>An ASCIA Action Plan should be completed by the student's parents/guardians in consultation with the student's medical practitioner and a copy provided to the school.</p> <p>The plan must outline the student's known severe allergies and the emergency procedures to be taken in the event of an allergic reaction.</p>
Individual Management Plans	An individual plan for each student at risk of anaphylaxis, developed in consultation with the student's parents. These plans include the ASCIA Action Plan which describes the student's allergies, symptoms, and the emergency response to administer the student's Adrenaline Auto injector should the student display symptoms of an anaphylactic reaction.
Annual Risk Management Checklist	Principals need to complete an annual Anaphylaxis Risk Management Checklist to monitor their compliance with their legal obligations and the

Strategy	Description
	Guidelines.
Purchase additional adrenaline auto-injection devices	<p>Schools with students at risk of anaphylaxis must purchase a spare or 'backup' adrenaline auto-injection device(s) as part of school first aid kit(s), for general use. Schools can purchase an adrenaline auto-injection device at local chemists. (Schools must regularly check the expiry date of the backup device).</p> <p>Schools must determine the number of backup adrenaline auto injector devices to be purchased for general use, taking into account the number of diagnosed students attending the school and the likely availability of a backup device in various settings, including school excursions and camps.</p>
Training	All school staff with a duty of care responsibility for the wellbeing of students at risk of anaphylaxis should receive training in how to recognise and respond to an anaphylactic reaction including administering an adrenaline auto injector (i.e. EpiPen®).
Encouraging camps and special event participation	<p>Schools should ask the parents/guardians to complete the Department's Confidential Medical Information for School Council Approved School Excursions form.</p> <p>Note: Consideration should be given to the food provided.</p> <p>See: Related policies for:</p> <ul style="list-style-type: none"> • Health Care Needs • Health Support Planning Forms
Communicating with parents	Regularly communicate