

ANAPHYLAXIS & SEVERE ALLERGY

POLICY & PROCEDURES

Rationale:

All students who attend Lorne P-12 College have a right to feel and to be safe. The wellbeing and safety of all students in our care is our first priority and we have zero tolerance to child abuse. The protection of students is the responsibility of everyone who is employed at, or is engaged by Lorne P-12 College in child-connected work. To ensure the safety and best interests of all students, we take into account the needs of those with an Aboriginal or Torres Strait Islander heritage, those from culturally and/or linguistically diverse backgrounds and those with a disability.

Lorne P-12 College complies with Ministerial Order 706 and the *Anaphylaxis guidelines-A resource for managing severe allergies in Victorian Schools* as published by the Department of Education and Early Childhood Development.

In the event of an anaphylactic reaction, Lorne P-12 College's first aid and emergency response procedures as well as the procedures in this policy, the student's ASCIA plan and Individual Anaphylaxis Management Plan will be followed. The Australasian Society of Clinical Immunology and Allergy (ASCIA) plan is a device specific plan outlining the type of auto injector prescribed and is completed by the student's medical practitioner.

Anaphylaxis is a severe, rapidly progressive allergic reaction that is potentially life threatening, with the worst case scenario being death in 3-5 minutes. Anaphylaxis always requires an emergency response. 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.

Signs and symptoms of anaphylaxis include swelling of the tongue, difficulty/noisy breathing, swelling/tightness in throat, difficulty talking and/or hoarse voice, wheeze or persistent cough, persistent dizziness or collapse, pale and floppy (young children). In addition, for those diagnosed at risk of anaphylaxis to insects, abdominal pain, vomiting are considered as signs of a severe allergic reaction (anaphylaxis). The signs and symptoms of anaphylaxis, usually develop within a few minutes and up to two hours following exposure to an allergen.

Adrenaline given through an EpiPen® autoinjector to the muscle of the outer middle thigh is the most effective first aid treatment for anaphylaxis as it raises the heart rate significantly, causing an increase in blood flow.

The key to prevention of anaphylaxis in schools is knowledge of the students who have been diagnosed at risk; awareness of triggers (allergens) and; prevention of exposure to these triggers. Lorne P-12 College acknowledges that the management of a student diagnosed at risk of anaphylaxis is a joint responsibility of the school and staff, the student, the student's parents/guardians and the student's Medical Practitioner.

Lorne P-12 College is "allergy aware" and not a NUT FREE SCHOOL. A nut free environment is not recommended as it is impossible to guarantee, which potentially provides a false sense of security to students, parents/guardians and staff. A nut free school environment does not protect students whose allergen may be egg, insect bite etc. A nut free school environment does not enable the school to prepare a student with life skills in teaching them how to manage their risk of anaphylaxis

Purpose:

To ensure that Lorne P-12 College can:

- Confirm that the School Principal and Staff, parents, students and the school community are informed that minimisation of the risk of anaphylaxis is everyone's responsibility.
- Support parents/guardians in the management of their child's severe allergy.
- Support students in the management of their severe allergy.
- Provide resources and training to staff enabling them to respond appropriately to an anaphylactic emergency.
- Instil preventative measures to minimise the risk of exposure to an identified allergen.
- Promote awareness of anaphylaxis within the school community.
- Design and implement an Emergency Response Strategy.

Aims:

- To provide, as far as practicable, a safe and supportive environment in which students at risk of anaphylaxis and severe allergic reactions can participate equally in all aspects of the student's schooling.
- To raise awareness about anaphylaxis and the school's anaphylaxis management policy in the school community.
- To engage with parents/carers of students at risk of anaphylaxis in assessing risks, developing risk minimisation strategies and management strategies for the student.
- 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:

ASCIA Plan

- It is the responsibility of the parent/carer to provide a copy of the ASCIA plan (**Appendix B**) prior to the student commencing at Lorne P-12 College. The parent/carer must also supply the school with an in date auto-injector and any other prescribed medications such as an antihistamine as per the ASCIA plan.
- The ASCIA plan clearly sets out the emergency procedures to be taken in the event of an allergic reaction and needs to be signed by a medical practitioner. An up to date colour photograph of the student must also be included.
- Information regarding this will be obtained from the Student Information Medical Sheets which are to be completed by all parents/carers, prior to the student commencing during enrolment.

Individual Anaphylaxis Management Plans

Lorne P-12 College will ensure that an individual anaphylaxis management plan (**Appendix A**) is developed within the first month of school each year, in consultation with the student's parents/carers, student (where appropriate) and the school First Aid Officer/Principal, for any student who has been diagnosed by a medical practitioner as being at risk of anaphylaxis.

The student's individual anaphylaxis management plan will be reviewed by the School First Aid Officer, in consultation with the student's parents/carers:

- Every year, and/or
- If the student's condition changes, or
- Immediately after a student has an anaphylactic reaction at school or out of school.

This is in addition to the ASCIA plan which is provided by the parents/guardians.

It is the responsibility of the First Aid Officer to:

- Keep up-to-date records of students with anaphylaxis.
- Obtain training in the treatment of anaphylaxis and attend regular trainer updates as required.
- Ensure auto injectors are stored correctly.
- Notify parents/carers to replace the student's auto injector and/or antihistamine prior to expiry.

- Communicate with staff to ensure they are aware of anaphylactic students when in class, on excursions, school events or camps.
- Keep staff up-to-date with any changes to information regarding student's at risk of anaphylaxis and strategies to minimise the risk of exposure to allergens.
- Provide all teachers with a list of anaphylactic students and ASCIA action plans for the classroom Emergency Management folders.
- Provide the Daily Organiser with list of anaphylactic students and ASCIA action plans to be given to all casual relief teachers (CRTs).
- Conduct staff training in an accredited anaphylaxis management training course that meet the requirements of Ministerial Order 706 as outlined below under the subheading of *Staff Training*.
- Conduct twice yearly staff briefings to staff where the first one is held at the beginning of the school year. This will include: the school's anaphylaxis management policy, the causes, symptoms and treatment of anaphylaxis, the identities of students at risk of anaphylaxis and location of their medication, how to use an adrenaline auto-injector which includes hands on practice with a trainer auto-injector, Lorne P-12 College first aid and emergency response procedures and the location of and access to adrenaline auto-injector provided to the school by parents/guardians as well as the adrenaline auto-injector which have been purchased by the school as "back up" or for general use.
- Ensure that the students diagnosed at risk of anaphylaxis have their ASCIA plan displayed in relevant classroom offices, staff room and First Aid Room.
- Keep back up auto-injectors within the school which can be used where required and replace these prior to expiry.
- Provide informal education to students diagnosed at risk of anaphylaxis where required.
- Conduct an annual risk management checklist (**Appendix F**) in conjunction with review of the Lorne P-12 College's Management Policy and Procedures in April of every year or as required in response to any legislative requirements.

Storage of autoinjectors

All students' prescribed autoinjector EpiPen® kits will be stored in the First Aid Room – please see **Appendix E** for EpiPen® kit specifics.

Back up autoinjector

The school will purchase a minimum of one back up EpiPen® autoinjector for school use. This autoinjector will be stored in the First Aid room.

It is the responsibility of the parent to:

- provide the ASCIA action plan including an up to date colour photo of the student
- inform the school if their child's medical condition changes, and if relevant provide an updated ASCIA plan with a colour photo
- provide the school with their child's autoinjector and any other medications prescribed. ie antihistamine
- replace the autoinjector and any other medications as prescribed on the ASCIA plan **prior to expiry**
- supply alternative food options when required
- supply a second autoinjector for camps and other school events if required after notification from the school's First Aid Officer.

It is the responsibility of the principal to:

- arrange the purchase of additional adrenaline auto-injector for general use and as a back up to those supplied by parents.
- Consider the following factors when purchasing additional adrenaline auto-injectors for general use:
 - number of students enrolled at risk of anaphylaxis
 - the accessibility of adrenaline auto-injectors supplied by parents

- the availability of a sufficient supply of adrenaline auto-injectors for use in school areas and during special events organised or attended by the school
- the limited life of adrenaline auto-injectors.

Communication Plan

- The principal will be responsible for ensuring that a communication plan is developed to provide information to all staff, students and parents about anaphylaxis and the school's anaphylaxis management policy – **Appendix C**.
- The communication plan will include information about what steps will be taken to respond to an anaphylactic reaction by a student in a classroom, in the school yard, on school excursions, camps and during special event days – **Appendix D**.
- The school will always follow the student's ASCIA Action Plan.
- Casual relief staff of students at risk of anaphylaxis or a severe allergic reaction will be informed of students at risk and their role in responding to an anaphylactic reaction by a student in their care through each class's CRT communication folder.
- Lorne P-12 College recognises the importance of raising student awareness and will achieve this by the use of age appropriate resources such as allergy books and posters. Allergy awareness will be promoted annually during Allergy Awareness Week and in response to specific needs.

School-based Anaphylaxis Management Strategies

In the classroom:

- All teachers will have an Emergency Management folder detailing anaphylactic students and the ASCIA Action Plans.
- Staff will be trained in prevention, recognition and treatment of anaphylactic reactions.
- Nuts will not be used in Science experiments.
- Appropriate risk minimisation strategies will be discussed and implemented where required for any classroom activities which may involve food.
- The school actively discourages easily spreadable high allergen foods, such as nut butters, being brought into our school community.

During eating times:

- Students are asked to not share food with one another, which supports all students eating the food packed for them by their parents/carers.
- If food items are being used to celebrate birthdays or special events, parents/carers of children who are at risk of anaphylaxis will be informed in advance (when possible), so risk minimisation strategies can be discussed and put in place.
- Primary students will be monitored by a teacher during eating times, if a spreadable nut product is identified, staff will ensure the eating area is cleaned and that the student eating the product has carefully washed their hands after eating. Spreadable nut products will be actively discouraged.
- All students are encouraged to wash their hands prior to and after eating.

In the kitchen and café, and during hospitality:

- The kitchen is only for use by secondary students.
- The kitchen staff are all trained in anaphylaxis management and food handling practices.
- ASCIA Action Plans are to be displayed in the kitchen staff area.
- No sharing of food recommendation is implemented.
- Foods known to contain traces of nuts are not to be served to students who are identified as being of risk of anaphylaxis to nuts.
- School risk management requires that for any food preparation, peanuts or tree nuts are not used as ingredients. In addition when relevant, a review of the concerned student's ASCIA Action Plan and

Anaphylaxis Management Plan will occur prior to food related activities, which may deem that other ingredients identified as allergens will not be used.

- The school will not serve foods to any members of our school community where peanuts or tree nuts are listed in the main body of ingredients. Please note that this does not mean that the school is 'nut free'.
- Where packaging states that there may be traces of nuts and the food is being served to parents, visitors or students who do not have an allergy to nuts, this is acceptable. However, foods which are labelled as may contain traces of nuts should not be served to those who are known to have an allergy or anaphylaxis to nuts.

In the school yard:

- Staff on duty will be knowledgeable of students with anaphylaxis and will be trained in the prevention, recognition and treatment of an anaphylactic reaction.
- There will be laminated Anaphylaxis Alert Cards (Red Cards) in the first aid kits for teachers on yard duty. In the event of a child experiencing an anaphylactic reaction as per (**Appendix D – Anaphylaxis Reaction Steps**), the teacher on yard duty can alert the office to obtain assistance.

During school events, excursions and camps:

- Lorne P-12 College will ensure that all staff attending events, excursions and camps have up to date training in an accredited anaphylaxis management training course, as per Ministerial Order 706.
- School staff taking students at risk of anaphylaxis on events or excursions are required to take the students EpiPen® kits, which include the student's medications and ASCIA Action Plan.
- All staff taking anaphylaxis students on camps are required to take the student's EpiPen® kit including a 'back up' EpiPen®. For camps, students at risk need to bring two autoinjectors, their ASCIA Action Plan and Travel ASCIA Action Plan if required.

In Administration:

- School risk management requires that all student medical details are screened for allergies during enrolment, and updated and maintained as required, and all relevant administrators are informed including the School First Aid Officer.
- Anaphylaxis management is clearly identified and integrated in our schools first aid and emergency response procedures, including an annual drill for managing and Anaphylaxis Emergency.

Staff Training

All school teaching staff will have up to date training in an anaphylaxis management training course which complies with Ministerial Order 706 and includes a competency check in the administration of an adrenaline autoinjector. The courses which are approved by the Secretary, DET are:

- 1) **ASCIA Anaphylaxis e-training for Victorian Schools followed by a competency check by the School Anaphylaxis Supervisor AND 2 staff being the School Anaphylaxis Supervisors by attending **Course in Verifying the Correct Use of Adrenaline Autoinjector Devices 22303VIC.****
- 2) **22300VIC Course in First Aid Management of Anaphylaxis**
- 3) **10313NAT Course in Anaphylaxis Awareness.**

In addition, the School First Aid Officer or the School Anaphylaxis Supervisors will provide staff briefings to all staff twice a year. The first session will occur at the beginning of the school year, delivered by a staff member who has successfully completed an anaphylaxis management training course in the last two years.

The content of this session will include information on:

- The school's anaphylaxis management policy and procedures
- The school's first aid and emergency response procedures
- A demonstration of how to use and adrenaline autoinjector device, including 'hands-on' practice with a trainer adrenaline autoinjector
- The causes, symptoms and treatment of anaphylaxis

- Identities of students diagnosed with a medical condition that relates to allergy and the potential for an anaphylactic reaction, where their medication is located, their ASCIA anaphylaxis action plan and their previous year's Anaphylaxis Management Plan which outlines appropriate risks minimisation strategies.

In the instance where a staff member has been unable to attend the provided briefing, the Principal will develop an interim plan in consultation with parents and training will occur as soon as possible.

Information will also be regularly disseminated to staff throughout the course of the year reflecting any changes that have occurred.

At other times while the student is under the care or supervision of the school, including sporting activities, excursions, yard duty, camps and special event days, the school will ensure that the staff present, have up to date training in an anaphylaxis management training course including how to administer an autoinjector.

Staff will also be made aware of preventative measures including use of food; possible hidden allergens such as in milk or egg cartons; food handling; cleaning and raising student awareness. All staff will be made aware of students with anaphylaxis during the training course and via regular updates from the school First Aid Officer.

Links and Appendices:

The following are links to support material for schools:

- [DET Anaphylaxis Management in Schools](#)
- [ASCIA Anaphylaxis Action Plan](#)
- The Royal Children's Hospital Anaphylaxis advisory line (03) 9345 4235
- [Allergy & Anaphylaxis Australia](#)

Appendices connected with this policy are:

- **Appendix A:** Anaphylaxis Management Plan
- **Appendix B:** ASCIA Action Plan
- **Appendix C:** Anaphylaxis Communication Plan
- **Appendix D:** Anaphylaxis Reaction Plan
- **Appendix E:** Anaphylaxis EpiPen Kit Requirements
- **Appendix F:** Annual Risk Management Checklist

Evaluation:

This policy will be reviewed annually.

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

October 2017

