

Anaphylaxis Management Policy

AIM

To raise awareness in the Yarra Hills Secondary College community of the college's guidelines and processes in managing anaphylaxis at the school.

SCHOOL STATEMENT

Yarra Hills Secondary College will comply with:

- Ministerial Order 706.
- Anaphylaxis Guidelines for Victorian Schools published and amended by the DET.

Yarra Hills Secondary College will maintain this policy, reviewing it every three years or as required. This policy will be implemented in conjunction with the First Aid Policy and other related policies.

RATIONALE

The purposes of this policy are:

- To raise awareness about anaphylaxis and the school's anaphylaxis management policy.
- Through education, staff training and policy implementation, minimise the risk of a student having an anaphylactic reaction at school.
- To provide as far as practicable, a safe & supportive environment in which students at risk of anaphylaxis, can participate equally in all aspects of schooling.
- To ensure that each staff member has adequate knowledge about allergies, anaphylaxis and the school's policy & procedures to respond to an anaphylactic reaction.
- To facilitate communication between the school and families, to ensure the safety and wellbeing of students at risk of anaphylaxis.
- To actively involve parents/guardians of students at risk of anaphylaxis in assessing risks.
- To ensure the location of auto-injectors are well known and in appropriate locations.

DEFINITION

Anaphylaxis is a severe, rapidly progressive allergic reaction that is potentially life threatening. Up to two per cent of the general population and up to five percent of children are at risk. The most common causes in young children are eggs, nuts, cows milk, bee or other insect stings and some medications.

POLICIES AND PROCEDURES

The following policies and procedures will be implemented in conjunction with the First Aid Policy and other related policies.

- As part of the enrolment procedure, parents are asked whether the child has any allergies or is at risk of anaphylaxis. This information is documented on the child's enrolment records and flagged on Compass. The school will ensure that the student's Individual Australasian Society of Clinical Immunology and Allergy (ASCIA) Action Plan is inserted into the enrolment records for that student and published in the General Office.
- It is the parent/caregiver's responsibility to ensure that an Individual ASCIA Action Plan is provided to Yarra Hills Secondary College and has been signed by the student's registered medical practitioner. This will occur as soon as practicable and be in place preferably before the student commences their first day of school.
- The First Aid Coordinator will record when the student's Individual ASCIA Action Plan is provided and record the expiry date of the adrenaline auto-injector.
- Copies of ASCIA action plans (including photos) of all students to be displayed in the main staffroom under the 'Medical Alerts' board. It is the responsibility of all staff to make themselves familiar with these students.
- Anaphylactic medical alert to be placed on student's compass account. This alert will then appear on attendance rolls, to assist staff in identifying students at risk of anaphylaxis.

- The First Aid Coordinator is to develop an Individual Management Plan (IMP) in consultation with the students' parents. The IMP is to be uploaded to the students compass account to be available for staff viewing.
- In the event of an anaphylactic reaction, the Emergency Response Procedures outlined (Appendix A) will be followed, together with the school's general first aid procedure and the student's Individual ASCIA Action Plan.

Individual Anaphylaxis Management Plans

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. 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.

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 ASCIA Action Plan.

School staff will then implement and monitor the student's Individual Anaphylaxis Management Plan. The student's Individual Anaphylaxis Management Plan may be reviewed, in consultation with the student's parents in any 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.

Adrenaline Auto-Injectors for General Use

Yarra Hills Secondary College will purchase adrenaline auto-injectors for general use and as a back up to those supplied by parents.

Mooroolbark Campus has four (4) adrenaline auto-injectors for general use. These are located:

- 2 at the General office.
- 2 at the General office for to be taken to offsite activities.

Mt Evelyn Campus has four (4) adrenaline auto-injectors for general use. These are located:

- 2 at the General office
- 2 at the General office to be taken to offsite activities

The general use adrenaline auto-injectors are, EpiPens. The adrenaline auto-injectors for general use have a limited life, usually expiring within 12-18 months and will be replaced at the school's expense, either at the time of use or expiry, whichever is first.

RESPONSIBILITIES

It is the responsibility of the parents/guardians to:

- Provide the school with an Individual ASCIA Action Plan with up-to-date photo, signed by a registered medical practitioner giving written consent to use the auto-injector in line with this action plan, on enrolment or as soon as diagnosed after enrolment.
- Meet with the First Aid Coordinator to develop an Individual Management Plan for their child.
- Read and be familiar with the school's Anaphylaxis Management Policy.
- Provide the school with an adrenaline auto injector that is current and not expired for their child.
- Encourage their child to follow the agreed risk minimisation strategies on their Individual Management Plan (IMP) whilst at school.

It is the responsibilities of School Anaphylaxis Supervisors to:

- Ensure they maintain currency in the Course in Verifying the Correct Use of Adrenaline Autoinjector Devices 22303VIC (every 3 years) and the ASCIA Anaphylaxis e-training for Victorian Schools (every 2 years). Either 10113NAT, 22099VIC or 22300VIC (every 3 years).
- Verify the correct use of the adrenaline auto injector (trainer) devices by other school staff undertaking the ASCIA Anaphylaxis e-training for Victorian Schools.
- Send reminders to staff or information to new staff about anaphylaxis training requirements.
- Provide access to the adrenaline auto-injector (trainer) device for practice use by school staff.
- Lead the twice-yearly anaphylaxis school briefing.
- Develop school specific scenarios to be discussed at the twice yearly briefing, to familiarise staff with responding to an emergency situation requiring anaphylaxis treatment.

It is the responsibility of the First Aid Coordinator to:

- Provide advice and guidance to school staff about anaphylaxis management in the school as required. The First Aid Coordinator will refer to organisations such as ASCIA or Allergy & Anaphylaxis Australia for further advice and resources.
- Monitor the expiry dates of personal and general use auto-injectors and ensure they are replaced as required.
- Monitor the expiry dates of the ASCIA action plans and ensure they are replaced as required.
- Coordinate the duplication and display of ASCIA action plans in the main staffroom and in other key locations.
- Meet with parents/guardians to develop an Individual Management Plan for each student.
- Coordinate the upload of Individual Management Plans to Student's compass accounts in order to make IMPs viewable to staff.
- Ensure an accurate record of all anaphylaxis training completed by staff is maintained.
- Communicate to the Campus Principal if they are having difficulties meeting their responsibilities.

It is the responsibility of the Principal Team to:

- Implement strategies and processes for ensuring a safe and supportive environment for students at risk of anaphylaxis.
- Be aware of the requirements of MO706 and the associated guidelines.
- Nominate at least 1 school staff member for the role of School Anaphylaxis Supervisor per campus and ensure they are appropriately trained.
- Ensure all staff complete the ASCIA Anaphylaxis e-training for Victorian Schools.
- Ensure the twice-yearly Anaphylaxis school briefings are held.
- Complete the Annual Anaphylaxis Risk Management Checklist.
- Ensure this policy is adequately communicated to the wider school community including all employees.

Additional responsibilities

- It is the responsibility of the Campus Principal or Daily Organiser to inform casual/relief staff of their role in responding to an anaphylactic reaction by a student in their care.

STAFF TRAINING AND EMERGENCY RESPONSE

Twice Yearly Anaphylaxis School Briefing

All staff will be briefed each semester by a School Anaphylaxis Supervisor 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, including the location of general use adrenaline auto-injecting devices.
- How to use an auto adrenaline-injector device, with hands on practice with a trainer adrenaline auto-injector available upon request.
- The school's First Aid and Emergency Response procedures on how to respond to an anaphylactic reaction by a student in the following scenarios: classroom, school yard, whole college events, excursions, incursions and camps.

Staff training requirements

All School staff should:

- Complete the ASCIA Anaphylaxis e-training for Victorian Schools (every 2 years)
- Be verified by the School Anaphylaxis Supervisor within 30 days of completing the ASCIA e-training as being able to use the adrenaline auto-injector device correctly.

Schools Anaphylaxis Supervisors

To perform the role of school Anaphylaxis Supervisor must complete and maintain currency in:

- Either 10113NAT, 22099VIC or 22300VIC
- 22303VIC Course in Verifying the Correct Use of Adrenaline Auto-injector Devices (every 3 years).
- ASCIA Anaphylaxis e-training for Victorian Schools (every 2 years).

COMMUNICATION PLAN

- All school staff, students and parents are to refer to the Emergency Response Procedures listed in Appendix A for guidance on how to respond to an anaphylactic reaction.
- Volunteers and casual relief staff who will teach or who are likely to come into contact with students at risk of anaphylaxis, will have the student identified to them. Additionally casual/relief staff will be informed of their role in responding to an anaphylactic reaction by a student in their care by the Daily Organiser or Campus Principal.
- The College Principal is responsible for making sure this policy is adequately communicated to the wider school community including all employees.
- All staff to attend the twice yearly anaphylaxis school briefing.

PREVENTION STRATEGIES

The prevention strategies used by the school to minimise the risk of an anaphylactic reaction occurring with the school are drawn from the DET's Discussion Guide Ideas on Risk Minimisation Strategies in the School and/or Childcare Environment. This discussion guide will also be provided to staff and parents for consultation when developing and reviewing a student's IMP.

EVALUATION / POST INCIDENT SUPPORT

An anaphylactic reaction can be a very traumatic experience for the student, others witnessing the reaction and parents. In the event of an anaphylactic reaction, students and school staff may benefit from post incident counselling, provided by the Well-being Team.

If a child has an anaphylactic reaction, there will be a review of the adequacy of the response of the

school and consider the need for additional training and other corrective action. This will include the following steps.

1. The adrenaline auto-injector must be replaced by the parent/caregiver before the student is allowed to return to school.
2. If the general use adrenaline auto-injector is used, this should be replaced as soon as possible.
3. The students IMP should be reviewed in consultation with the students parent/care givers.
4. The schools anaphylaxis management policy should be reviewed to ensure that it adequately responds to the anaphylactic reactions by students who are in the care of the school staff.
5. An Injury Report is to be completed and entered on CASES21 for all student anaphylactic reactions and on Edusafe for all staff reactions.
6. The following of additional post incident procedures detailed in the First Aid Policy.

OTHER RELATED POLICIES

First Aid Policy

Duty of Care Policy

Camps Policy

Ratified by School Council September 2017

APPENDIX A: EMERGENCY RESPONSE PROCEDURE

Responding to an incident

If a student shows the first signs and symptoms of an allergic reaction, it is vital to react quickly. Please read the following emergency response procedures and know what to do if a child has an anaphylactic reaction in the relevant areas while in your care.

1. IN THE CLASSROOM

Raise the alarm, locate the adrenaline auto-injector and follow the ASCIA Action Plan.

- 1.1 Sit or lay student down and reassure. Ask a reliable student to call on the teacher in the next closest classroom.
- 1.2 Teacher or assisting teacher to use mobile phone to call front office, requesting the student's adrenaline auto-injector and ASCIA Plan, as well as the general adrenaline auto-injector be brought to the classroom immediately – teacher to be explicit and clear of the student's name and the classroom number.
- 1.3 If the phone is not available/working instruct a student to run to the office and alert office staff to bring the student's adrenaline auto-injector to the classroom. Students to state 'anaphylaxis emergency' and be explicit and clear of the student's name and the classroom number.
- 1.4 Two office staff members to attend the classroom with the student's adrenaline auto-injector, ASCIA plan and a general adrenaline auto-injector.
- 1.5 Teachers are to follow the instructions on the student's ASCIA plan.
- 1.6 **In the case of mild reaction:** Teachers in attendance will determine if the student is showing signs of a mild to moderate allergic reaction. If this is the case student should be taken to the first aid room for strict observation and parents called.
- 1.7 **In the case of moderate to severe reaction:** If the student is showing signs of anaphylaxis such as difficulty breathing, swelling of the tongue, tightness in the throat, hoarse voice, wheeze or persistent cough and loss of consciousness, then the adrenaline auto-injector will be administered by the first teacher while the second teacher rings 000. Teachers are to follow instructions as provided by the paramedics on the phone. **IF IN DOUBT, GIVE THE ADRENALINE AUTO-INJECTER.** Two teachers are to remain with the student – one to keep student calm, the other to relay information to the paramedics.
- 1.8 One office staff member to attend the main gate/entrance to school to await ambulance and direct paramedics to the relevant room on arrival.
- 1.9 Second office staff member to contact parent and advise them of the incident.

2. IN THE SCHOOL YARD

Raise the alarm, locate the adrenaline auto-injector and follow the ASCIA Action Plan.

- 2.1 For yard duties, teachers are asked to take a mobile phone with them, making sure they have the office number on it.
- 2.2 Teacher is to stay with student, sit or lay them down and ask their name.

- 2.3 If teacher has a mobile phone they are to call the office and alert them that there is a student having an anaphylactic reaction, provide the student's name and the exact location of the student.
- 2.4 If teacher does not have a mobile phone, teacher is to send a reliable student to office to raise the alarm stating 'anaphylactic emergency' along with student's name and exact location in the school grounds.
- 2.5 Teacher to send another student to nearest yard duty teacher for assistance and for mobile phone access.
- 2.6 Two office staff members to attend the relevant area in the school yard with the student's adrenaline auto-injector, general adrenaline auto-injector and ASCIA plan.
- 2.7 Teachers are to follow the instructions on the student's ASCIA plan.
- 2.8 **In the case of mild reaction:** Teachers in attendance will determine if the student is showing signs of mild to moderate allergic reaction. If this is the case student should be taken to the first aid room for strict observation and parents called.
- 2.9 **In the case of moderate to severe reaction:** If the student is showing signs of anaphylaxis such as difficulty breathing, swelling of the tongue, tightness in the throat, hoarse voice, wheeze or persistent cough and loss of consciousness then the adrenaline auto-injector will be administered by the first teacher while the second teacher rings 000. Teachers are to follow instructions as provided by the paramedics on the phone. **IF IN DOUBT, GIVE THE ADRENALINE AUTO-INJECTER.**
- 2.10 One office staff member to attend the main gate/entrance to school to await ambulance and direct paramedics to the relevant area on arrival.
- 2.11 Second office staff member to contact parent and advise them of the incident.

3. **INCURSIONS**

Raise the alarm, locate the adrenaline auto-injector and follow the ASCIA Action Plan.

- 3.1 For in-school activities such as cross country, teachers are asked to take a mobile phone with them, making sure they have the office number on it.
- 3.2 Teacher is to stay with the student and sit or lay them down. Teacher is to call the office and notify them of the child's name and the exact location.
- 3.3 If teacher does not have a mobile phone, teacher is to send a reliable student to office to raise the alarm stating 'anaphylactic emergency' along with student's name and exact location in the school grounds.
- 3.4 Two office staff members to attend the relevant area in with the student's adrenaline auto-injector, general adrenaline auto-injector and student's plan.
- 3.5 **In the case of mild reaction:** Teacher in attendance will determine if the student is showing signs of mild to moderate allergic reaction. If this is the case the student should be taken to the first aid room for strict observation and parents called.
- 3.6 **In the case of moderate to severe reaction:** If the student is showing signs of anaphylaxis such as difficulty breathing, swelling of the tongue, tightness in the

throat, hoarse voice, wheeze or persistent cough and loss of consciousness then the adrenaline auto-injector will be administered by the teacher. 1 office staff member in attendance rings 000. The other office staff member proceeds to the school entrance/gate to await the ambulance and escort paramedics to the scene.

4. **EXCURSIONS**

Raise the alarm, locate the adrenaline auto-injector and follow the ASCIA Action Plan

- 4.1 Prior to excursions, teachers need to identify the students at risk for anaphylaxis who will be under their care.
- 4.2 Teacher must sign out the auto-injector/s and ASCIA Action Plan/s and make sure it is/they are kept with the teacher who is supervising that child for the duration of the excursion.
- 4.3 The supervising teacher must also sign out a general auto-injector from the office which is to be carried by the student as a backup.
- 4.4 The supervising teacher must carry a mobile phone with them.
- 4.5 The supervising teacher must have up to date training on anaphylaxis management.
- 4.6 The adrenaline auto-injectors must stay with the group and not be left behind in the bus or left with bags etc.
- 4.7 **In the case of mild reaction:** If a student is observed showing signs of a mild allergic reaction, sit them down and keep them under observation whilst you locate their adrenaline auto-injector. Contact the parents and school. The student should not be allowed to play sport or exert themselves physically whilst having an allergic reaction.
- 4.8 **In the case of moderate to severe reaction:** If the student has an anaphylactic reaction, the supervising teacher must stay with the student, administer the auto injector and follow the student's ASCIA Action Plan. The supervising teacher is to send a reliable student to locate another teacher, if available, to assist in managing the situation. The supervising teacher is to call 000 immediately and follow instructions from the paramedics.

5. **WHOLE COLLEGE EVENTS**

Raise the alarm, locate the adrenaline auto-injector and follow the ASCIA Action Plan.

- 5.1 For special event days such as athletic or swimming carnivals, held outside the college, home group (WOW) teachers will need to be aware of the students in their home group who are at risk of anaphylaxis and collect and sign out their student's adrenaline auto-injector and ASCIA Action Plan on the morning of the event.
- 5.2 The staff member in charge of first aid for the day must collect the general use auto-injectors designated for excursion use. The non-excursion general use auto-injectors are to remain at the office. The event organiser is responsible for communicating this to the relevant staff.
- 5.3 The adrenaline auto-injector should travel with the home group teacher on the same bus as the student.
- 5.4 On arrival at the event, the adrenaline auto-injector must be given to the staff member who has been allocated to attend to first aid duties. All auto-injectors should be stored in the first aid area remembering to keep them out of direct light and below

30 degrees.

- 5.5 At the completion of the day, the homeroom teacher will need to collect the adrenaline auto-injector from the first aid area and return it to the front office at the school. The adrenaline auto-injector should travel on the same bus as the student. The staff member in charge of first aid will assist home group teachers in meeting their first aid responsibilities.
- 5.6 **Emergency procedure:** If the student has a suspected allergic reaction at an event, stay with the student sit or lay student down and reassure. Ask a teacher or reliable student to raise the alarm at the first aid area. The staff member in charge of first aid will attend the scene with at least one other staff member.
- 5.7 **In the case of mild reaction:** If a student is observed showing signs of a mild allergic reaction, they will be taken to the first aid area for strict observation and parents called. They should not be allowed to play sport or exert themselves physically whilst having an allergic reaction.
- 5.8 **In the case of moderate to severe reaction:** If the student has an anaphylactic reaction, the supervising teacher must stay with the student, administer the auto injector and follow the student's ASCIA Action Plan. The supervising teacher is to call 000 immediately and follow instructions from the paramedics.
- 5.9 One staff member to attend the main gate/entrance to await ambulance and direct paramedics to the relevant area on arrival.

6. **COLLEGE CAMPS**

- 6.1 Prior to the camp, the teacher in charge needs to identify the students at risk for anaphylaxis who will be under their care.
- 6.2 Prior to the camp, the teacher in charge must make contact with their parents to discuss strategies to avoid allergens and a management plan is to be developed. During discussions, it can be decided who will be responsible for looking after the adrenaline auto-injector and student's ASCIA Action Plan, supervising the student, monitoring food supply, providing alternative foods and informing all staff and supervisors of the student's allergy etc.
- 6.3 Staff in attendance at the camp must have up to date training in anaphylaxis management.
- 6.4 In completing the risk assessment for the camp, the teacher must include how long it would take an ambulance to reach the location of the camp. If more than 20 minutes, parents must be informed of the increased risk.
- 6.5 If a student is observed showing signs of a mild allergic reaction, sit them down and keep them under observation whilst you locate their adrenaline auto-injector. Contact the parents and school. They should not be allowed to play sport or exert themselves physically whilst having an allergic reaction.
- 6.6 If the student has an anaphylactic reaction, the teacher in charge of that student must be able to locate the adrenaline auto-injector quickly, raise the alarm, follow the action plan and be able to contact an ambulance.
- 6.7 The adrenaline auto-injector must stay near the student at all times for it to be an effective first aid device.

