Anaphylaxis management policy at...

MOUNT CLEAR COLLEGE/GPLACE

BACKGROUND
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 the school.
Adrenaline given through an EpiPen® autoinjector to the muscle of the outer mid-thigh is the most effective first aid treatment for anaphylaxis.

PURPOSE
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.
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.

INDIVIDUAL ANAPHYLAXIS MANAGEMENT PLANS
Note: A template of an individual anaphylaxis management plan can be found on Page 18 Anaphylaxis Guidelines for Victorian Government Schools or the Department’s website:

The Principal 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 enrols, 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
• an ASCIA Action Plan.

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Note: The red and blue ‘ASCIA Action Plan’ is the most common form of emergency procedures plan that is provided by medical practitioners to parents when a child is diagnosed as being at risk of anaphylaxis. An example can be found on page 20 of the Anaphylaxis Guidelines or downloaded from http://www.education.vic.gov.au/school/teachers/health/Pages/anaphylaxisisschl.aspx

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; 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 (e.g. class parties, elective subjects, cultural days, fetes, incursions).

The School’s Anaphylaxis Management Policy must state that 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 Autoinjector that is current and not expired for their child.

PREVENTION STRATEGIES

Note: Chapter 8 of the Anaphylaxis Guidelines for Victorian Schools contains advice about a range of Prevention Strategies that can be put in place.

The Risk Minimisation and Prevention Strategies that Mount Clear College will put in place for all relevant in-school and out-of-school settings which include (but are not limited to) the following:

- classroom activities (including class rotations, specialist and elective classes);
  - Be sure the ASCIA Action Plan is easily accessible even if the Adrenaline Autoinjector is kept in another location.
  - Liaise with Parents about food-related activities ahead of time. All food technology classes are nut free.
  - Liaise with class friends about allergies and keeping classes allergy free for specific allergens.
- between classes and other breaks;
  - students carry their EpiPens with them in their pencil cases at all times
- in canteens;
  - Canteen staff have received 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:

‘A community of learners’
• during recess and lunchtimes;
  o If a School has a student who is at risk of anaphylaxis, 100% of School Staff on yard duty have been trained in the administration of the Adrenaline Autoinjector (i.e. EpiPen®/Anapen®) to be able to respond quickly to an anaphylactic reaction if needed. Epipens are carried in the Yard Duty First Aid Bag.
  o Students with anaphylactic responses to insects are encouraged to stay away from water or flowering plants. School Staff should liaise with Parents to encourage students to wear light or dark rather than bright colours, as well as closed shoes and long-sleeved garments when outdoors. Gardens are continuously maintained and grass is mown regularly.
  o Students are informed to keep drinks and food covered while outdoors.
• before and after school
  o students carry their EpiPens with them in their pencil cases at all times
• special events including incursions, sports, cultural days, fetes or class parties, excursions and camps.
  o Back up EpiPens and medical information and management plan are taken on all excursions
  o If food is provided externally – information is given about allergens.

SCHOOL MANAGEMENT AND EMERGENCY RESPONSE
Note: Chapter 9 of the Anaphylaxis Guidelines for Victorian Schools contains advice about procedures for School management and emergency response for anaphylactic reactions.

The Mount Clear College procedures for emergency response to anaphylactic reactions include the following:
• 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 kept;
• details of Individual Anaphylaxis Management Plans and ASCIA Action Plans and where these can be located are communicated to all staff:
  o in a classroom;
  o in the school yard;
  o in all school buildings and sites including gymnasiums and halls;
  o on school excursions;
  o on school camps; and
  o at special events conducted, organised or attended by the school.
• Information about the storage and accessibility of Adrenaline Autoinjectors is communicated to all staff
Communication with School Staff, students and Parents is to occur in in accordance with a communications plan – ie briefed at least twice per calendar year.

ADRENALINE AUTOINJECTORS FOR GENERAL USE
The Principal will purchase Adrenaline Autoinjector(s) for General Use (purchased by the School) and as a back up to those supplied by Parents.
The Principal will determine the number of additional Adrenaline Autoinjector(s) required. In doing so, the Principal 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.

Note: Adrenaline Autoinjectors for General Use are available for purchase at any chemist. No prescriptions are necessary.

COMMUNICATION PLAN
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.

This section should set out a Communication Plan to provide information to all School Staff, students and Parents about anaphylaxis and the School’s Anaphylaxis Management Policy.

The Communication Plan must include strategies for advising School Staff, students and Parents about how to respond to an anaphylactic reaction by a student in various environments including:
• during normal school activities including in the classroom, in the school yard, in all school buildings and sites including gymnasiums and halls; and
• during off-site or out of school activities, including on excursions, school camps and at special events conducted or organised by the School.

The Communication Plan must include procedures to inform volunteers and casual relief staff of students with a medical condition that relates to allergy and the potential for anaphylactic reaction and their role in responding to an anaphylactic reaction by a student in their care.

It is the responsibility of the Principal of the School to ensure that relevant School Staff are:
• trained; and
• briefed at least twice per calendar year.

STAFF TRAINING
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.

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 Autoinjector, including hands on practise with a trainer Adrenaline Autoinjector device;
  - the School’s general first aid and emergency response procedures; and
  - the location of, and access to, Adrenaline Autoinjector that have been provided by Parents or purchased by the School for general use.

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.

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In the event that the relevant training and briefing has not occurred, the Principal 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 enrols, and preferably before the student’s first day at School.

The Principal will ensure that while the student is under the care or supervision of the School, including excursions, yard duty, camps and special event days, there is a sufficient number of School Staff present who have successfully completed an Anaphylaxis Management Training Course in the three years prior.

Note: A video has been developed and can be viewed from:

STAFF TRAINING AND EMERGENCY RESPONSE
Teachers and other school staff who conduct classes which students at risk of anaphylaxis attend, or give instruction to students at risk of anaphylaxis must have up to date training in an anaphylaxis management training course.

At other times while the student is under the care or supervision of the school, including excursions, yard duty, camps and special event days, the principal must ensure that there is a sufficient number of staff present who have up to date training in an anaphylaxis management training course.

The principal will identify the school staff to be trained based on a risk assessment.

Note: A risk assessment tool has been included in this information pack to assist principals and can be downloaded from http://www.sofweb.vic.edu.au/wellbeing/support/anaphyl.htm

Training will be provided to these staff as soon as practicable after the student enrols.

Wherever possible, training will take place before the student’s first day at school. Where this is not possible, an interim plan will be developed in consultation with the parents.

The school’s first aid procedures and students emergency procedures plan (ASCIA Action Plan) will be followed in responding to an anaphylactic reaction.
ANNUAL RISK MANAGEMENT CHECKLIST

The Principal 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:

<table>
<thead>
<tr>
<th>Date Implemented</th>
<th>April 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Author</td>
<td>Alan Archbold</td>
</tr>
<tr>
<td>Approved By</td>
<td>School Council</td>
</tr>
<tr>
<td>Approval Authority (Signature &amp; Date)</td>
<td></td>
</tr>
<tr>
<td>Date Reviewed</td>
<td>April 2014</td>
</tr>
<tr>
<td>Responsible for Review</td>
<td>Assistant Principal</td>
</tr>
<tr>
<td>Review Date</td>
<td>April 2016</td>
</tr>
<tr>
<td>References</td>
<td>Victorian Government Schools Policy &amp; Advisory Guide</td>
</tr>
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</table>
ANAPHYLAXIS RISK MANAGEMENT CHECKLIST

Mount Clear College
Olympic Avenue
Mount Clear 3350

Date of Review: ________________________ Time: ________________________

School Contact Person: Name: ________________________
(Who provided information collected)

Position: ________________________

Review given to: Name: ________________________
(If different from above)

Position: ________________________

Comments: ________________________

1. How many current students are diagnosed with anaphylaxis? ________________________

2. Have any students ever had an allergic reaction while at school?  
   YES ☐ NO ☐
   If Yes, how many times? ________________________

3. Have any students had an Anaphylactic Reaction at school?  
   YES ☐ NO ☐
   If Yes, how many times? ________________________

4. Has a staff member been required to administer an EpiPen® to a student?  
   YES ☐ NO ☐
   If yes, how many times? ________________________
## ANAPHYLAXIS RISK MANAGEMENT CHECKLIST

### Section 1 Anaphylaxis Management Plans and ASCIA Action Plans

1. Does every student who has been diagnosed at risk of anaphylaxis have an individual Anaphylaxis Management Plan in place? (see Section 4.1 and Appendix 1, Anaphylaxis Guidelines)?
   - YES ☐ NO ☐

2. Are all Anaphylaxis Management Plans reviewed regularly with parents (at least annually)?
   - YES ☐ NO ☐

3. Do they set out strategies to minimise the risk of exposure to allergens for in-school and out of class settings?
   - During classroom activities, including elective classes
     - YES ☐ NO ☐
   - In canteens or during lunch or snack times
     - YES ☐ NO ☐
   - Before and after school, in the school yard and during breaks
     - YES ☐ NO ☐
   - For special events, such as excursions, sport days, class parties and extra curricular activities?
     - YES ☐ NO ☐
   - For excursions and camps
     - YES ☐ NO ☐
   - Other
     - NO ☐

4. Do all students who suffer from anaphylaxis have a copy of their ASCIA Action Plan kept at school (provided by the parent)?
   - YES ☐ NO ☐

5. Where are they kept?

6. Do the anaphylaxis action plans have a recent photo of the student with them?
   - YES ☐ NO ☐

### Comments

### Section 2 Storage and Accessibility of the EpiPen

1. Where are the students EpiPen’s stored?

2. How are the EpiPens stored?

3. Is the storage safe (out of reach of students)?
   - YES ☐ NO ☐
   - Is the storage unlocked and accessible to staff at all times?
     - YES ☐ NO ☐

### Comments

Is the EpiPen easy to find?

4. Is a copy of students’ ASCIA Action Plans kept together with their EpiPen?
   - YES ☐ NO ☐

### Comments

5. Are EpiPen’s and Action Plans clearly labelled with students’ names?
   - YES ☐ NO ☐

### Comments

6. Has someone been designated to check the EpiPen’s expiry dates on regular basis?
   - YES ☐ NO ☐

### Comments

7. Has the College signed up to EpiClub (a free reminder service)?
   - YES ☐ NO ☐

8. Do all staff know where the EpiPen® and Action Plans are stored?
   - YES ☐ NO ☐
Comments

9. Is there a spare EpiPen? .............................................................. YES ○ NO ○
   If Yes, what Type? ........................................................................

10. Where is it stored? ................................................................. YES ○
11. Is it clearly labelled as the 'backup EpiPen'? ......................... YES ○ NO ○

Section 1 Prevention Strategies

1. Have you done a risk assessment of the potential for accidental exposure to allergens for a student with anaphylaxis? ................................................................. YES ○
2. Has the school implemented any of the prevention strategies (in Appendix 2 of the Guidelines)? ................................................................. YES ○ NO ○
3. Which ones? ....................................................................................
4. Others: ............................................................................................
5. Is there always a trained staff member on yard duty? ..................... YES ○ NO ○
6. How many staff have completed training? .....................................

Section 4 Training and Emergency Response

1. Have all staff responsible for the care of students with anaphylaxis been trained? ................................................................. YES ○ NO ○
2. When does their training need to be renewed? ..............................
3. Do all staff have an understanding of the causes, signs and symptoms of anaphylaxis and of their role in the school’s first aid and emergency response procedures? ................................................................. YES ○
4. Have you planned how the alarm will be raised if an allergic reaction occurs? ................................................................. YES ○
   In the classroom? ........................................................................
   In the school yard? ....................................................................
   At school camps and excursions? ......................................................
   On special event days, such as sports days? ......................................
5. Does your plan include who will call the Ambulance? ................. YES ○
       How? ......................................................................................
6. In an emergency is there a plan for who will be sent to collect the EpiPen and Action Plan? ................................................................. YES ○ NO ○
   Who will this be when in the classroom? ...........................................
   Who will this be when in the school yard? ......................................
   Who will this be at sporting activities? ...............................................
7. Have you checked how long will it take to get to the EpiPen and Action Plan to a student from various areas of the school? ................................................................. YES ○ NO ○
   How long? ..................................................................................
   When in the classroom? ..............................................................
   When in the school yard? ..............................................................

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How long..........................................
When at sports fields? YES O
NO O
How long?...........................................

8. On excursions or other out of school event is there a plan for who will look after the EpiPen® and Action Plan?
YES O
NO O
Who will do this on excursions?.................................

Who will do this on camps?.................................

Who will do this on sporting activities?.................................

9. Is there a process for post incident support in place?
YES O NO O

10. Have all staff been briefed on:
the school’s Anaphylaxis Management Policy? YES O
NO O
the causes, symptoms and treatments of anaphylaxis? YES O NO O
the identities of students diagnosed at risk of anaphylaxis and where their medication is located? YES O NO O
how to use an adrenaline auto-injecting device, including hands on practice with a trainer adrenaline auto-injecting device
YES O NO O
the school’s first aid and emergency response procedures YES O
NO O

Section 5: Communicating with staff, students and parents / carers

1. Is there a communication plan in place to provide information about anaphylaxis and the school’s policies to staff, students and parents/ carers? YES O
NO O

2. Are there procedures in place for informing casual relief teachers of students at risk of anaphylaxis and the steps required for prevention and emergency response? YES O
NO O
Comments

2. Do all staff know which students suffer from anaphylaxis? YES O NO O
Comments

How is this information kept up to date?

4. Are there strategies in place to increase awareness about severe allergies among students? YES O NO O
Comments
Anaphylaxis Management Plan

Cover Sheet

This Plan is to be completed by the principal or nominee on the basis of information from the student’s medical practitioner provided by the parent/carer

<table>
<thead>
<tr>
<th>Mount Clear College/GPlace</th>
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<tbody>
<tr>
<td>(03) 5330 1500</td>
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<table>
<thead>
<tr>
<th>Student’s name:</th>
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<tr>
<th>Severely allergic to:</th>
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<th>Other health conditions:</th>
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<th>Medication at school:</th>
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<th>Parent/carer information (2)</th>
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<tr>
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Other emergency contacts (if parent/carer not available):

Medical practitioner contact:

Emergency care to be provided at school:

EpiPen® storage:

The following Anaphylaxis Management Plan has been developed with my knowledge and input and will be reviewed on ...........................................................
(insert date of proposed review).

<table>
<thead>
<tr>
<th>Signature of parent:</th>
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<table>
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<th>Signature of principal (or nominee):</th>
<th>Date:</th>
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## Strategies To Avoid Allergens

<table>
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<th>Risk</th>
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