

# ANAPHYLAXIS MANAGEMENT POLICY

## PURPOSE

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

## 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.

## POLICY

### School statement

Pakenham Lakeside Primary School will fully comply with Ministerial Order 706 and the associated guidelines published by the Department of Education and Training.

## INTRODUCTION

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 (cashews), cow's milk, fish and shellfish, wheat, soy, sesame, latex, certain insect stings and medication.

Mild to moderate allergic reactions can include:

- Swelling to the lips, faces and eyes
- Hives or welts
- Tingling mouth
- Abdominal pain and/or vomiting (these are the signs of a severe allergic reaction to insects)

Anaphylaxis (severe allergic reaction) can include:

- Difficult/noisy breathing
- Swelling of tongue
- Swelling/tightness in throat
- Difficulty talking and/or hoarse voice
- Wheeze or persistent cough
- Persistent dizziness or collapse
- Pale and floppy (young children)

Symptoms mostly appear within 10 minutes to several hours after exposure to an allergen, but can appear within a few minutes.

## TREATMENT

Adrenaline given as an injection into the muscle of the outer mid-thigh is the most effective first aid treatment for anaphylaxis.

## DUTY OF CARE

All school staff have a duty of care to take reasonable steps to protect a student in their care from risks of injury that are reasonably foreseeable. In relation to anaphylaxis management, PLPS and the staff have a duty to take reasonable steps to inform themselves as to whether an enrolled student is at risk of anaphylaxis. In order to discharge their duty of care, school staff need to comply with their obligations under the Act, Order and Guidelines, as well as the PLPS Anaphylaxis management policy. When determining what actions or steps need to be undertaken to comply with their obligations, staff should ask themselves what a fair and sensible person of sound judgment would do in the circumstances.

*Pakenham Lakeside Primary School will comply with Ministerial Order 706 and DET Guidelines to ensure it meets requirements for continued registration as defined by the Victorian Registration and Qualifications Authority (VRQA).*

The key to prevention of anaphylaxis at PLPS is an awareness of those students who have been diagnosed at risk, knowledge of the triggers (allergens) and the prevention of exposures to those triggers.

Partnerships and the exchange of information between the school and parents and carers are crucial in ensuring the students feel safe and supported at school.

At PLPS our endeavours strive 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 management policy in the school community
- Engage with parents and 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 PLPS policy and procedures in responding to anaphylactic reactions.

## INDIVIDUAL ANAPHYLAXIS MANAGEMENT PLANS

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 enrolls, and where possible before their first day of school. The plan will set out the following:

- Information about the diagnosis, including the type of allergy or allergies the student has (based on medical diagnosis)
  - Strategies to minimise the risk of exposure to allergens while the student is under the care or supervision of school staff, including camps and excursions
  - The name of the person/s responsible for implementing the strategies
  - Information on where the student's medication will be stored
  - The student's emergency contact details
  - An emergency procedures plan (ASCIA Action Plan) provided by the parent that
    - sets out the emergency procedures to be taken in the event of an allergic reaction
    - is signed by a medical practitioner who was treating the child on the date the practitioner signs the emergency procedures plan
  - Includes an up to date photograph of the student.

The student's individual management plan will be reviewed in consultation with the parents/carers:

- annually and as applicable
- if the student's condition changes
- immediately after a student has an anaphylactic reaction at school.

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 Plan)
- provide an up to date photograph for the emergency procedures plan (ASCIA Plan) when the plan is reviewed and provided to the school
- provide the school with an Adrenaline Autoinjector that is current and has not expired for their child.

Copies of each student's Individual Anaphylaxis Management Plan should be kept in various locations around the school so it is easily accessible by school staff in the event of an incident. Locations include the staffroom, individual learning spaces, teacher resource rooms and the first aid room.

## COMMUNICATION PLAN

The principal will be responsible for ensuring there is effective communication to all staff, students and parents about anaphylaxis and the school's anaphylactic management policy.

### STAFF

The communication plan will include information about much of the material contained in this policy, particularly prevention and what members of our school community can do to contribute to minimising risk. A number of avenues, including our regular school newsletter, the term newsletter sent home by each year level, our school website and other general notices, will be used to disseminate this important information to our school community. Staff will be briefed each semester regarding practices and the Anaphylaxis Management Policy. Casual relief staff of students at risk of anaphylaxis will be informed of these students as part of the home group information package they receive when attending PLPS.

### STUDENTS

Peer support is an important element of support for students at risk of anaphylaxis. Staff can raise awareness through discussions around the topic with students, with a few key messages outlined below:

1. Always take food allergies seriously – severe allergies are no joke
2. Don't share your food with friends for safety reasons
3. Wash your hands after you finish eating any food
4. Know what your friends are allergic to
5. If a school friend becomes sick, get help immediately even if the friend doesn't want you to
6. Be respectful of a friend's adrenaline autoinjector
7. Don't pressure your friends to eat food.

It is important to be aware that a student at risk of anaphylaxis may not want to be singled out or seen to be treated differently. Students may be teased or try to be tricked into eating a food allergen. It is important that all students understand and realise the seriousness of anaphylaxis.

### *PARENTS*

Some parents of children who are at risk of anaphylaxis may experience considerable anxiety about sending their child to school. It is important that our school conveys to them that we have appropriate management strategies in place. This anxiety can also be considerably reduced by regular communication and increased education, awareness and support from the school community.

### *COMMUNITY*

At PLPS we want to raise awareness about anaphylaxis so there is an increased understanding of the condition. We will continue to communicate information through our school newsletter, as well as our year level newsletters which are sent home each term.

### **PREVENTION STRATEGIES**

Minimisation of the risk of anaphylaxis is everyone's responsibility. Parents have important obligations under the Order which will assist the school to manage the risks associated with anaphylaxis. These are mentioned above.

<i>LEARNING SPACES</i>
Keep a copy of the student's Individual Anaphylaxis Management Plan in the classroom. 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.
Never give food from outside sources to a student is at risk of anaphylaxis.
Be aware of the possibility of hidden allergens in food and other substances used in cooking, food preparation, science and art classes. eg. egg cartons, milk cartons, empty peanut butter jars
Have regular discussions with students about the importance of washing hands, eating their own food and not sharing food.

<i>THE YARD</i>
Ensure yard duty teachers are aware of their responsibility to respond quickly to an anaphylactic reaction if needed and are trained in the administration of the Adrenaline Autoinjector.
The Adrenaline Autoinjector and each student's Individual Anaphylaxis Management Plan are easily accessible from the yard and staff should be aware of the exact location.
Schools must have a Communication Plan in place so the student's medical information and medication can be retrieved quickly if a reaction occurs in the yard. All staff on yard duty must be aware of how to contact the general office of an anaphylactic reaction in the yard.
Outdoor rubbish bins must have their lids closed to prevent the presence of insects around them.

<i>SPECIAL EVENTS</i>
If the school has a student at risk of anaphylaxis, sufficient school staff supervising the event must be trained in the administration of an Adrenaline Autoinjector.
School staff should avoid using food in activities or games, including as rewards

For special occasions, school staff should consult parents in advance to either develop an alternative food menu or request the parents to send a meal for the student.

The Adrenaline Autoinjector and a copy of the Individual Anaphylaxis Management Plan for each student at risk should be easily accessible.

For each event a risk assessment should be undertaken on behalf of each individual student attending who is at risk of anaphylaxis.

Parents may wish to accompany their child to events. This should be discussed with parents as another strategy for supporting the student who is at risk.

### **EXCURSIONS & CAMPS**

Prior to engaging a camp's services, the school should make enquiries as to whether it can provide food that is safe for anaphylactic students. If they cannot provide this confirmation to the school, then the school should consider using an alternative service provider.

Schools must not sign any disclaimer or statement from a camp operator that indicates that they are unable to provide food which is safe for students at risk of anaphylaxis. Schools have a duty of care to protect students in their care from reasonably foreseeable injury and this duty cannot be delegated to any third party.

Schools should conduct a risk assessment and develop a risk management strategy for students at risk of anaphylaxis. This should be developed in consultation with parents of students at risk and camp operators prior to the camp dates.

Prior to the camp taking place school staff should consult with the student's parents to review the child's individual plan to ensure that it is up to date and relevant to the circumstances of the particular camp

School staff participating in the camp should be clear about their roles and responsibilities in the event of an anaphylactic reaction. Check the emergency response procedures that the camp provider has in place. Ensure that these are sufficient in the event of an anaphylactic reaction and ensure all school staff are aware of their required roles and responsibilities.

Our school will purchase an Adrenaline Autoinjector for general use in the first aid kit and include this as part of the Emergency Response Procedures.

### **STORAGE OF ADRENALINE AUTOINJECTORS**

It is recommended that:

- Adrenaline Autoinjectors for individual students or general use be stored correctly and be able to be accessed quickly, because in some cases, exposure to an allergen can lead to an anaphylactic reaction in as little as five minutes
- Adrenaline Autoinjectors be stored in an unlocked, easily accessible place away from direct light and heat but not in a refrigerator or freezer
- Each Adrenaline Autoinjectors should be clearly labelled with the student's name and be stored with a copy of the student's ASCIA Action Plan
- An Adrenaline Autoinjectors for general use be clearly labelled and distinguishable from those allocated to specific students
- Trainer Adrenaline Autoinjectors (which do not contain adrenaline or a needle) are not stored in the same location due to the risk of confusion
- Key first aid personnel conduct a review each semester to ensure no Adrenaline Autoinjectors are out of date.

### **ROLES & RESPONSIBILITIES**

The school's Principal has overall responsibility for implementing strategies and processes for ensuring a safe and supporting environment for students at risk of anaphylaxis.

At PLPS the Principal will:

- actively seek information to identify students with severe life threatening allergies at enrolment
- conduct a risk assessment of the potential for accidental exposure to allergens while the student is in the care of the school
- meet with parent/carers to develop an Individual Anaphylaxis Management Plan for the student
- request that parents provide an ASCIA (Australasian Society of Clinical Immunology and Allergy) Action Plan that has been signed by the student's medical practitioner and has an up to date photograph of the student
- ensure that the parents provide the student's EpiPen and that it is not out of date
- ensure that staff obtain training in how to recognize and respond to an anaphylactic reaction, including the administration of an EpiPen
- develop a communication plan to raise student, staff and parent awareness about severe allergies and the school's policy
- provide information to all staff, including specialist staff, new staff, casual staff, canteen staff (if an external canteen provider, ensure that the provider can demonstrate satisfactory training for staff in the area of anaphylaxis and its implications on food handling practices) and office staff, so that they are aware of students who are at risk of anaphylaxis, the student's allergies, the school's management strategies and first aid procedures
- ensure there are steps in place to inform casual relief teachers of students at risk of anaphylaxis and the steps required for prevention and emergency response
- allocate time, such as during staff briefings, to discuss, practise and review the school's management strategies for students at risk of anaphylaxis
- encourage ongoing communication between parents/carers and staff about the current status of the student's allergies, the school's policies and their implementation
- review the student's Individual Anaphylaxis Management Plan annually or if the student's circumstances change, in consultation with parents.

At PLPS staff will:

- know the identity of students who are at risk of anaphylaxis
- understand the causes, symptoms and treatment of anaphylaxis
- obtain training in how to recognize and respond to an anaphylactic reaction, including administering an EpiPen
- know the school's first aid emergency procedures and what your role is in relation to responding to an anaphylactic reaction
- keep a copy of the student's ASCIA Action Plan and follow it in the event of an allergic reaction
- know where the student's EpiPen is kept
- know and follow the prevention strategies in the student's Individual Anaphylaxis Management Plan
- plan ahead for special class activities or special occasions such as excursions, incursions, sport days, camps and parties – work with parents/carers to provide appropriate food for the student
- avoid the use of food treats in class or as rewards, as these may contain hidden allergens – work with parents/carers to provide appropriate treats for the student
- be aware of the possibility of hidden allergens in foods and traces of allergens when using items such as egg or milk cartons in art or cooking classes
- be careful of the risk of cross-contamination when preparing, handling and displaying food

- make sure that tables and surfaces are wiped down regularly and that students wash their hands after handling food
- raise student awareness about severe allergies and the importance of their role in fostering a school environment that is safe and supportive for their peers.

At PLPS the designated first aid officer will:

- take a lead role in supporting all staff to implement prevention and management strategies for the school
- keep an up to date register of students at risk of anaphylaxis
- ensure that students' emergency details are kept up to date
- obtain training in how to recognize and respond to an anaphylactic reaction, including administering an EpiPen
- check that the EpiPen is not out of date on a regular basis eg. beginning of each term
- inform parents/carers a month prior in writing that the EpiPen requires replacing
- ensure that the EpiPen is stored correctly, at room temperature and away from light, in an unlocked easily accessible place, and that it is appropriately labelled
- provide or arrange post-incident support eg. counselling to students and staff if appropriate
- work with staff to conduct regular reviews of prevention and management strategies
- work with staff to develop strategies to raise school staff, student and community awareness about severe allergies.

At PLPS the parents/carers of a student at risk of anaphylaxis will:

- inform the school, either at enrolment or diagnosis, of the student's allergies, and whether the student has been diagnosed as being at risk of anaphylaxis
- obtain information from the student's medical practitioner about their condition and any medications to be administered; and inform staff of all relevant information and concerns relating to the health of the student
- meet with the school to develop the student's Individual Anaphylaxis Management Plan
- provide an ASCIA Action Plan, or copies to the school that is signed by the student's medical practitioner and has an up to date photograph
- provide the EpiPen and any other medications to the school
- replace the EpiPen before it expires
- assist school staff in planning and preparation for the student prior to school camps, incursions, excursions or special events such as class parties or sport days
- supply alternative food options to the student when needed
- inform staff of any changes to the student's emergency contact details
- participate in reviews of the Individual Anaphylaxis Management Plan eg. when there is a change to the student's condition or at an annual review

## EMERGENCY RESPONSE

It is important that we have response procedures in place to support any student who experiences an anaphylactic reaction. It is important that in responding to an incident, the student does not stand and is not moved, unless they are in further danger.

<b>ADMINISTERING AN EpiPen®</b>
Remove from the plastic container.
Form a fist around the EpiPen® and pull off the blue safety 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 10 seconds.
Remove the EpiPen®

Massage injection site for 10 seconds.
Note the time you administered the EpiPen®
The used autoinjector must be handed to the attending ambulance staff along with the time of administration.

<b>ADMINISTERING AN Ana Pen®</b>
Remove from box and check the expiry date.
Remove the black needle shield.
Form a fist around the Ana pen® and remember to have your thumb in reach of the red button, then remove grey safety cap.
Place needle against the student's outer mid-thigh.
Press the red button with your thumb so it clicks and hold for 10 seconds.
Replace needle shield and note the time of administration.
The used autoinjector must be handed to the attending ambulance staff along with the time of administration.

<b>IF ADMINISTERING, THE SCHOOL MUST</b>
Immediately call an ambulance (000 or 112)
Lay the student flat and elevate their legs. Do not allow the student to stand or walk. If breathing is difficult for them, allow them to sit but not to stand.
Reassure the student experiencing the reaction if they are feeling anxious as a result of the reaction and the side effects of the adrenaline. Monitor the student closely in case of a worsening condition. Ask other staff to move students away if they are in proximity.
In the situation where there is no improvement or severe symptoms progress (as described in the ASCIA Action Plan), a second injection (of the same dosage) may be administered after five minutes, if a second autoinjector is available.
Then contact the student's emergency contacts.
Later contact Security Services Unit, DET to report the incident on 9589 6266

## FOOD BANS

Department of Education and Training advice on the banning of food or other products is not recommended due to the possibility of encouraging complacency among staff and students, the presence of hidden allergens and the difficulty of monitoring and enforcing a ban. At PLPS the focus will be placed on raising awareness of the risks associated with anaphylaxis, and to implement practical, age appropriate strategies to minimize exposure to known allergens.

## 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 guidance officers or school support staff.

## REVIEW

After an anaphylactic reaction has taken place that has involved a student from PLPS, it is important the following review process take place.

The adrenaline autoinjector must be replaced by the parent as soon as possible.
The Principal should ensure that there is an interim plan in place should another anaphylactic reaction occur prior to the replacement being provided.
If the general use autoinjector has been used this should be replaced as soon as possible.
The student's individual plan should be reviewed in conjunction with the student's parents.

The PLPS Anaphylaxis Management policy should be reviewed to ensure it adequately met the conditions and requirements needed to address the situation encountered and any changes noted and made.

## STAFF TRAINING

Relevant staff who will be trained and briefed are:

- those who conduct classes with students with a medical condition relating to an allergy and the potential for anaphylactic reaction
- any further school staff that the Principal identifies, based on an assessment of the risk of an anaphylactic reaction occurring while a student is under the care or supervision of the school.

Training requirements

Training and briefing will centre around:

- the requirements of staff at PLPS as outlined in Ministerial Order 706
  - All staff will attend online training — ASCIA Anaphylaxis e-training for Victorian Schools every two years
  - Four staff members will complete the additional training required to be certified as Anaphylaxis supervisors, to ensure all accreditation and training is completed and up to date each year for all staff
  - All staff will attend and participate in a briefing twice a year (the first at the beginning of the year) by an accredited staff member who is a designated Anaphylaxis supervisor and will facilitate training on:
    - the school's anaphylaxis management policy
    - the causes, symptoms and treatment of anaphylaxis
    - knowing the students at risk of anaphylaxis and associated knowledge, including allergen triggers and where their medication is located
    - how to use an adrenaline autoinjector, including hands on practise with the training auto injector
    - The school's general first aid and emergency response procedures
    - The location of and access to the adrenaline autoinjectors that have been provided by parents or the school for general use

GLOSSARY	
TERM	DEFINITION
Act	The Education and Training Reform Act, 2006 (Vic)
ASCIA	Australasian Society of Clinical Immunology and Allergy, the peak professional body of clinical immunology and allergy in Australia and New Zealand.
ASCIA Action Plan	This plan is a nationally recognised action plan for anaphylaxis developed by ASCIA. These plans are device specific; they list the child's prescribed Adrenaline Auto injector and must be completed by the student's medical practitioner. This plan is one of the requirements of the student's Individual Anaphylaxis Management Plan.

Communication Plan	A plan developed by the school which provides information to all school staff, students and parents about anaphylaxis and the PLPS Anaphylaxis Management Policy.
Department	The Department of Education and Training (DET)
Individual Anaphylaxis Management Plan	An individual plan for each student at risk of anaphylaxis, developed in consultation with the student's parents. The Individual Anaphylaxis Management Plan includes the ASCIA Action Plan which describes the students' allergies, symptoms and the emergency response to administer the student's Adrenaline Auto injector should the student display symptoms of an anaphylactic reaction.
Order	Ministerial Order 706 – Anaphylaxis Management in Schools (effective April 22 <sup>nd</sup> , 2014)
School Anaphylaxis Management Policy	This is a school-based policy that is required to be developed under Part 4.3.1 (6) of the Act because the school has enrolled students who have been diagnosed as being at risk of anaphylaxis. This policy describes the school's management of the risk of anaphylaxis. The Order prescribes the matters which the policy must contain

#### FURTHER INFORMATION AND RESOURCES

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

#### REVIEW CYCLE

This policy will be reviewed and evaluated annually as part of the ongoing strategic cycle and policy and processes review, or due to any mandated legislative requirement.