



Bethanga Primary School

Anaphylaxis Policy

Purpose of Anaphylaxis Policy: To explain to Bethanga 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 Bethanga Primary School is compliant with Ministerial Order 706 and the Department's guidelines for anaphylaxis management.

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 seeds, latex, certain insect stings and medications. The keys to prevention of anaphylaxis are planning, risk minimisation, awareness and education.

The Department is committed to:

- providing, 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;
- raising awareness about allergies and anaphylaxis in the school community;
- actively involving the Parents of each student at risk of anaphylaxis in assessing risks, developing risk minimisation and management strategies for the student;
- ensuring that every staff member has adequate knowledge of allergies, anaphylaxis and emergency procedures; and
- ensuring schools having policies and procedures in place to ensure that the risks associated with severe allergies are minimised, so that all students can feel safe while at School.

School Statement: Bethanga Primary School will fully comply with Ministerial Order 706 and the associated Guidelines published and amended by the Department from time to time. It is our school's responsibility to maintain an Anaphylaxis Management Policy according to departmental guidelines. In the event of an anaphylactic reaction, the emergency response procedures in this policy must be followed, together with our school's general first aid and emergency response procedures and the student's ASCIA action plan and management plan.

Individual Anaphylaxis Management Plans

A template of an Individual Anaphylaxis Management Plan can be found in Appendix 3 of the Anaphylaxis Guidelines for Victorian Schools or the Department's website:

<http://www.education.vic.gov.au/school/teachers/health/Pages/anaphylaxischl.aspx>

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 prior to their first day of school.

Parents and carers must:

- obtain an ASCIA Action Plan for Anaphylaxis from the student's medical practitioner and provide a copy to the school as soon as practicable
- immediately inform the school in writing if there is a relevant change in the student's medical condition and obtain an updated ASCIA Action Plan for Anaphylaxis
- provide an up-to-date photo of the student for the ASCIA Action Plan for Anaphylaxis when that Plan is provided to the school and each time it is reviewed
- provide the school with a current adrenaline autoinjector for the student that has not expired;
- participate in annual reviews of the student's Plan.

Each student's Individual Anaphylaxis Management Plan must include:

- information about the student's medical condition that relates to allergies and the potential for anaphylactic reaction, including the type of allergies the student has
- information about the signs or symptoms the student might exhibit in the event of an allergic reaction based on a written diagnosis from a medical practitioner
- strategies to minimise the risk of exposure to known allergens while the student is under the care or supervision of school staff, including in the school yard, at camps and excursions, or at special events conducted, organised or attended by the school
- the name of the person(s) responsible for implementing the risk minimisation strategies, which have been identified in the Plan

- information about where the student's medication will be stored
- the student's emergency contact details
- an up-to-date ASCIA Action Plan for Anaphylaxis completed by the student's medical practitioner.

Review and updates to Individual Anaphylaxis Management Plans

A student's Individual Anaphylaxis Management Plan will be reviewed and updated on an annual basis in consultation with the student's parents/carers. The plan will also be reviewed and, where necessary, updated in the following circumstances:

- as soon as practicable after the student has an anaphylactic reaction at school
- if the student's medical condition, as it relates to allergy and the potential for anaphylactic reaction, changes
- when the student is participating in an off-site activity, including camps and excursions, or at special events including fetes and concerts.

Our school may also consider updating a student's Individual Anaphylaxis Management Plan if there is an identified and significant increase in the student's potential risk of exposure to allergens at school.

Prevention Strategies:

In and outside our school setting:

- Management plans will be kept in the classroom, staffroom, First Aid area and on the bus.
- All staff and casual relief staff will be made aware of students with anaphylaxis on entry to school. They will be shown the location of individual management plans and adrenaline autoinjectors as well as the management steps to take should an incident occur.
- The yard duty teacher will carry an emergency anaphylaxis SOS card to be sent to the office should a reaction occur in the yard triggering a 000 call. A general use epi-pen will be included in the yard duty bag along with a copy of the student's anaphylaxis action plan.
- Parents of anaphylactic children will be pre-notified of food related activities ahead of time, and advice sought about suitable food replacements. Products labelled "may contain traces of nuts," should not be served unless a discussion is held with parents and authorisation obtained.
- Regular discussions will be had with students about the importance of washing hands, eating their own food and not sharing food.
- If an anaphylactic student is a bus traveller then an epi-pen will be carried on the bus. The bus driver will be aware of the emergency procedure for administering the epi-pen.
- Whilst on school excursions and camps, the student's emergency pack containing an epi-pen and management plan will be with the child at all times. Each teacher responsible for care of the student will be made aware of the anaphylaxis and management plan. A spare, school purchased epi-pen will also be taken on the excursion or camp. It is the responsibility of the class teacher (of the child with the diagnosed allergy) to ensure that the epi-pen pack is taken on excursions outside the school grounds. The student will be educated to also check that this equipment is on hand prior to leaving school.
- A meeting will be held with parents at least four weeks prior to camps to ensure that all management processes are clarified and known.
- An epi-pen will be purchased by the school each year prior to term 1 commencing.

School Management and Emergency Response

Communication Plan

- An up to date list of students identified as having a medical condition that relates to allergy and the potential for anaphylactic is maintained in the office and first aid room. All staff (including casual relief staff are made aware of who these students are and management processes.
- ASCIA Action Plans are located in the classroom (attached to student's personal epi-pen bag), staffroom, first aid area and also attached to the epi-pen pack located on the bus.
- Individual student epi-pens and management plans are taken on excursions and carried by the staff member supervising the group containing the child with the identified allergy.
- The Principal will contact parents prior to the beginning of each year for an updated and signed ASCIA action plan which includes a recent photo.
- The yard duty teacher will carry an emergency anaphylaxis SOS card to be sent to the office should a reaction occur in the yard triggering a 000 call. A general use epi-pen will be included in the yard duty bag along with a copy of the student's anaphylaxis action plan.
- In the event of an anaphylactic reaction, the emergency response procedures in this policy must be followed, together with our school's general first aid and emergency response procedures and the student's ASCIA action plan and management plan.
- Roles and responsibilities of specific school members are attached to this policy. They must be known and enacted upon.

Staff Training

All teaching staff and classroom aides will be trained in anaphylaxis management training. This formal training will occur annually.

A briefing will occur twice per calendar year (the first briefing will be held on the first pupil free day of the year with training being provided by an accredited instructor) 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.

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 enrolls, and 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.

A video has been developed and can be viewed from

<http://www.education.vic.gov.au/school/teachers/health/Pages/anaphylaxischl.aspx>

EMERGENCY RESPONSE TO AN ANAPHYLACTIC REACTION:

The adrenaline autoinjector belonging to the student will be kept in their classroom. One general use autoinjector will be kept in the yard duty bag (along with ASCIA action plan) and the remaining general use autoinjector will be kept in an unlocked first aid cupboard. If the student is a bus traveller then an autoinjector will also be kept on the bus.

Where possible, only school staff with training in the administration of the adrenaline autoinjector should administer the student's adrenaline autoinjector. However, it is imperative that an adrenaline autoinjector is administered as soon as possible after an anaphylactic reaction. Therefore, if necessary, the adrenaline autoinjector is designed to be administered by any person following the instructions in the student's ASCIA action plan.

Step	Action
1.	<ul style="list-style-type: none">• Lay the person flat• Do not allow them to stand or walk• If breathing is difficult, allow them to sit• Be calm and reassuring• Do not leave them alone• Seek assistance from another staff member or reliable student to locate the student's adrenaline autoinjector or the school's general use autoinjector, and the student's Individual Anaphylaxis Management Plan, stored in the First Aid room and student's classroom.• If the student's plan is not immediately available, or they appear to be experiencing a first-time reaction, follow steps 2 to 5
2.	Administer an EpiPen <ul style="list-style-type: none">• Remove from plastic container• Form a fist around the EpiPen and pull off the blue safety release (cap)• Place orange end against the student's outer mid-thigh (with or without clothing)• Push down hard until a click is heard or felt and hold in place for 3 seconds• Remove EpiPen• Note the time the EpiPen is administered• Retain the used EpiPen to be handed to ambulance paramedics along with the time of administration
3.	Call an ambulance (000)
4.	If there is no improvement or severe symptoms progress (as described in the ASCIA Action Plan for Anaphylaxis), further adrenaline doses may be administered every five minutes, if other adrenaline autoinjectors are available.
5.	Contact the student's emergency contacts.

(a) In-school environment:

- *Classrooms: Classroom phone or mobile phone will be used to raise the alarm. This will involve one staff member calling 000 immediately (as our school is remote, the ambulance service/CERT must be dispatched immediately.) One staff member will administer the adrenaline autoinjector and remain with the student. Another staff member will take responsibility for the supervision of remaining students.*
- *Yard: A card system will be used to notify other staff that a reaction has occurred, staff on duty will have a mobile phone with them: 000 will be called. An adrenaline autoinjector will be available in the yard duty pack with the duty teacher. The student's action plan will also be included.*

(b) Out-of school environments:

- *Excursions and camps: Each individual camp and excursion will require a risk assessment. Emergency procedures will vary accordingly. There must be staff trained in anaphylaxis management at each event. A planned camp will trigger communication with the camp venue and staff to ensure all risk management strategies and emergency response processes are considered and in place. A camp will also require a meeting with parents at least a month prior to the camp to ensure all management processes and responses are clarified and known.*

Adrenaline Autoinjectors for General Use

The Principal will purchase one Adrenaline Autoinjectors (epi-pen) for General Use annually as a back up to those supplied by Parents. These will be replaced at the school's expense, either at the time of use or at the beginning of each school year, whichever is first.

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.

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:

<http://www.education.vic.gov.au/school/teachers/health/Pages/anaphylaxisschl.aspx>

Evaluation:

School Council Approval is not required for this policy however it will be checked for required updates annually and it will be shared with School Council.

POLICY REVIEW AND APPROVAL

This policy was last reviewed October 2022

Approved by: Rachel Saunders (Principal)

Next scheduled review date: October 2025

(Recommended Review Cycle for this Policy is 3-4 years)

Role and responsibilities of Principals

School Principals have overall responsibility for implementing strategies and processes for ensuring a safe and supportive environment for students at risk of anaphylaxis. To assist Principals in meeting their responsibility, a summary of some of the key obligations under the Order, and suggested prevention strategies, is set out below. This is a guide only, and is not intended to contain an exhaustive list to be relied upon by Principals:

- ✓ Ensure that the School develops, implements and reviews its School Anaphylaxis Management Policy in accordance with the Order and these Guidelines
- ✓ Actively seek information to identify students with severe life-threatening allergies or those who have been diagnosed as being at risk of anaphylaxis, either at enrolment or at the time of diagnosis (whichever is earlier).
- ✓ Ensure that Parents provide an ASCIA Action Plan which has been signed by the student's Medical Practitioner and that contains an up-to-date photograph of the student.
- ✓ Ensure that an Individual Anaphylaxis Management Plan is developed in consultation with the student's Parents for any student that has been diagnosed by a Medical Practitioner with a medical condition relating to allergy and the potential for anaphylactic reaction, where the School has been notified of that diagnosis.
This includes ensuring the documentation of practical strategies for activities in both in-School and out-of-School settings to minimise the risk of exposure to allergens, and nomination of staff who are responsible for implementation of those strategies. The risk minimisation plan should be customised to the particular student for participation in normal School activities (e.g. during cooking and art classes) and at external events (e.g. swimming sports, camps, excursions and interstate/overseas trips). Ensure students' Individual Anaphylaxis Management Plans are communicated to staff.
- ✓ If using an external canteen provider, be satisfied that that the provider can demonstrate satisfactory training in the area of anaphylaxis and its implications for food-handling practices. This includes careful label reading, and an understanding of the major food allergens that trigger anaphylaxis and cross-contamination issues specific to food allergies.
- ✓ Ensure that Parents provide the School with an Adrenaline Autoinjector for their child that is not out-of-date and a replacement Adrenaline Autoinjector when requested to do so.
- ✓ Ensure that a Communication Plan is developed to provide information to all School Staff, Students and Parents about anaphylaxis and the School's Anaphylaxis Management Policy.
- ✓ Ensure there are procedures in place for providing 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.
- ✓ Ensure that relevant School Staff have successfully completed an anaphylaxis management training course in the three years prior.
- ✓ Ensure that relevant School Staff are briefed at least twice a year by a staff member who has completed current anaphylaxis management training on:
 - the School's Anaphylaxis Management Policy;
 - the causes, symptoms and treatment of anaphylaxis;
 - the identities of students diagnosed at risk of anaphylaxis and the location of their medication;
 - how to use an Adrenaline Autoinjector, including hands-on practise with a trainer Adrenaline Autoinjector (which does not contain adrenaline);
 - the School's general first aid and emergency procedures; and
 - the location of Adrenaline Auto-injecting devices that have been purchased by the School for General Use
- ✓ Allocate time, such as during staff meetings, to discuss, practise and review the School's Anaphylaxis Management Policy. Practise using the trainer Adrenaline Autoinjectors as a group and undertake drills to test effectiveness of the School's general first aid procedures
- ✓ Encourage ongoing communication between Parents and School Staff about the current status of the student's allergies, the school's policies and their implementation.
- ✓ Ensure that the student's Individual Anaphylaxis Management Plan is reviewed in consultation with Parents annually, when the student's medical condition changes, as soon as practicably after a student has an anaphylactic reaction at School, and whenever a student is to participate in an off-site activity such as camps or excursions or at special events conducted, organised or attended by the School.
- ✓ Ensure the Risk Management Checklist for anaphylaxis is completed annually.
- ✓ Arrange to purchase and maintain an appropriate number of Adrenaline Autoinjectors for General Use to be part of the School's first aid kit.

Role and responsibilities of School Staff

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. This includes administrators, canteen staff, casual relief staff, specialist staff, sessional teachers and volunteers.

To assist School Staff who conduct classes that students with a medical condition that relates to allergy and the potential for anaphylactic reaction attend, and others School Staff where relevant, a summary of some of the key obligations under the Order, and suggested prevention strategies, is set out below. This is a guide only, and is not intended to contain an exhaustive list to be relied upon by School Staff when seeking to discharge their duty of care:

- ✓ Know and understand the School Anaphylaxis Management Policy.

- ✓ Know the identity of students who are at risk of anaphylaxis. Know the students by face.
- ✓ Understand the causes, symptoms, and treatment of anaphylaxis.
- ✓ Obtain regular training in how to recognise and respond to an anaphylactic reaction, including administering an Adrenaline Autoinjector. Refer to Chapter 12 for more details.
- ✓ Know where to find a copy of each student's Individual Anaphylaxis Management Plan quickly, and follow it in the event of an allergic reaction.
- ✓ Know the School's general first aid and emergency response procedures, and understand their role in relation to responding to an anaphylactic reaction.
- ✓ Know where students' Adrenaline Autoinjectors and the Adrenaline Autoinjectors for General Use are kept. (Remember that the Adrenaline Autoinjector is designed so that anyone can administer it in an emergency).
- ✓ Know and follow the prevention and risk minimisation strategies in the student's Individual Anaphylaxis Management Plan.
- ✓ Plan ahead for special class activities (e.g. cooking, art and science classes), or special occasions (e.g. excursions, incursions, sport days, camp, cultural days, fetes and parties), either at School, or away from School. Work with Parents to provide appropriate food for their child if the food the School/class is providing may present a risk for him or her.
- ✓ Avoid the use of food treats in class or as rewards, as these may contain hidden allergens. Consider the alternative strategies provided in this document (see Chapter 8). Work with Parents to provide appropriate treats for students at risk of anaphylaxis.
- ✓ Be aware of the possibility of hidden allergens in foods and of traces of allergens when using items such as egg or milk cartons in art or cooking classes.
- ✓ Be aware 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.

Role and responsibilities of Parents of a student at risk of anaphylaxis

Parents have an important role in working with the School to minimise the risk of anaphylaxis. Set out below is a summary of some of the key obligations for Parents under the Order, and some suggested areas where they may actively assist the School. This is a guide only, and is not intended to contain an exhaustive list to be relied upon by Parents.

- ✓ Inform the School in writing, either at enrolment or diagnosis, of the student's allergies, and whether the student has been diagnosed at the time as being at risk of anaphylaxis.
 - ✓ Obtain an ASCIA Action Plan from the student's Medical Practitioner that details their condition, and any medications to be administered, and other emergency procedures and provide this to the School.
 - ✓ Inform School Staff in writing of any changes to the student's medical condition and if necessary, provide an updated ASCIA Action Plan.
 - ✓ Provide the School with an up to date photo for the student's ASCIA Action Plan and when the plan is reviewed.
 - ✓ Meet with and assist the School to develop the student's Individual Anaphylaxis Management Plan, including risk management strategies.
 - ✓ Provide the School with an Adrenaline Autoinjector and any other medications that are current and not expired.
 - ✓ Replace the student's Adrenaline Autoinjector and any other medication as needed, before their expiry date or when used.
 - ✓ Assist School Staff in planning and preparation for the student prior to camps, field trips, incursions, excursions or special events (e.g. class parties, cultural days, fetes or sport days).
 - ✓ If requested by School Staff, assist in identifying and/or providing alternative food options for the student when needed.
 - ✓ Inform School Staff in writing of any changes to the student's emergency contact details.
- Participate in reviews of the student's Individual Anaphylaxis Management Plan:
- ✓ when there is a change to the student's condition;
 - ✓ as soon as practicable after the student has an anaphylactic reaction at School;
 - ✓ at its annual review; and
 - ✓ prior to the student participating in an off-site activity such as camps and excursions, or at special events conducted, organised or attended by the School.