ANAPHYLAXIS MANAGEMENT POLICY

Ministerial Order 706 – Anaphylaxis Management in Schools

School Statement
Alvie Consolidated School fully complies with Ministerial Order 706 and the associated Guidelines published and amended by the Department from time to time.

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 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.

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 (eg. class parties, elective subjects, cultural days, fetes, incursions).

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
The following Risk Minimisation and Prevention Strategies will be put in place for all relevant in-school and out-of-school settings which include (but are not limited to) the following:
• during classroom activities (including class rotations, specialist and elective classes);
• between classes and other breaks;
• in canteens;
• during recess and lunchtimes;
• before and after school; and
• special events including incursions, sports, cultural days, fetes or class parties, excursions and camps.

School Management and Emergency Response
Alvie Consolidated School will provide 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;
• details of Individual Anaphylaxis Management Plans and ASCIA Action Plans and where these can be located:
  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;
• how communication with School Staff, students and Parents is to occur in accordance with a communications plan.

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**

As soon as practicable after the student enrols, and where possible before their first day of school all staff will be informed of the fact that a student with anaphylaxis has enrolled and that they are aware of the students’ individual anaphylaxis management plan and the location of the auto injector.

Students will be informed of the student’s allergens and will be made aware that they are not to share any foods with the student.

Parents will be informed via a student notice the new students and their listed allergens.

Parents will be informed about the School's Anaphylaxis Management Policy and it will be posted on the school website.

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.
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.

**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.

This Policy was approved by the Alvie School Council on ……………………………...

(Anaphylaxis Communication Plan attached)
Anaphylaxis Communication Plan

This plan should be read in conjunction with the School’s Anaphylaxis Policy. It relates to the prevention and management of anaphylactic events at School or outside School on School related activities.

At the time of enrolment or (if later) diagnosis, the Teacher and First Aid Coordinator will familiarize themselves with the medical needs of a student with anaphylaxis. It is expected that parents will advise the school without delay when a student is diagnosed by a medical practitioner as being at risk of anaphylaxis.

An Anaphylaxis Communication Plan will be developed and placed in agreed locations around the school.

Alvie Consolidated School’s Anaphylaxis Policy and Communication Plan will be published on the school’s website and intranet site.

Individual Anaphylaxis Management Plans

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. This should include:

• Information about the diagnosis, including the type of allergy or allergies the student has (based on a diagnosis from a medical practitioner).

• Strategies to minimise the risk of exposure to allergens while the student is under the care or supervision of school staff, for in-school and out-of-school settings including camps and excursions.

• The name of the person/s responsible for implementing the strategies.

• The student’s emergency contact details.

• Information on where the student’s medication will be stored.

Location of EpiPens® (or Anapens®) and Student Photo’s

A current up to date photo and EpiPen® or Anapen® will be provided by the parent. The EpiPen® or Anapen® will be located in the following locations:

Location EpiPen® or Anapen® Location Student’s Photo Location

Junior School

• With the classroom teacher

• Spare EpiPen® or Anapen® in the staff room

• Junior School

• With student

• Spare EpiPen® or Anapen®
Anaphylaxis Communication Plan

Location EpiPen® or Anapen® Location Student’s Photo Location

- With the student
- Spare EpiPen® or Anapen® in Staff room

Relieving/ Volunteer / Sport or other Activities Staff

Anaphylaxis information will be provided to all Relieving/Volunteer staff regarding students and this will be provided by the First Aid Coordinator or Director of Activities at the beginning of the applicable season. This information will be an Action Plan for Anaphylaxis which will contain the student’s photo; name and date of birth, allergens to be avoided, contact details and the action required if the student has a mild or serious reaction.

Responding to an Anaphylactic Reaction

Classrooms

In the event of an anaphylactic reaction in the classroom, the teacher is to immediately implement the student’s emergency procedures plan. A reliable student should be sent to Reception to bring the EpiPen® or Anapen® and to alert the First Aid Coordinator. The teacher is to stay with the student who is experiencing the reaction.

All subject teachers and staff having contact with a Student with Anaphylaxis will have completed an accredited Anaphylaxis Course and regular refresher training.

Volunteers & Casual Relief Teachers

Volunteers and casual relief staff will be informed on arrival at the school if they are caring for a student at risk of anaphylaxis and their role in responding to an anaphylactic reaction.

Volunteers and casual relief staff should administer the EpiPen® or Anapen® if trained or seek the support of a trained staff member.

If no trained staff are available the volunteers and casual relief staff members will follow the student’s anaphylaxis action plan.

Casual/relief teachers should be provided with a copy of the student’s ASCIA Action Plan.

Yard

Teachers should not leave a student who is experiencing an anaphylactic reaction unattended. The teacher must direct a reliable student to bring the EpiPen® or Anapen® or contact the Reception desk so that they may alert the School’s First Aid Coordinator.

Special Event Days, Excursions and Camps
Prior to leaving the School for any event, excursion or camp the teacher in charge will consult with the First Aid Coordinator to identify any student with Anaphylaxis. The First Aid Coordinator will provide a medical summary identifying the student’s anaphylaxis symptoms and the known allergens which may affect him and information regarding any other medical issues.

In the event of an anaphylactic reaction away from school the teacher is to immediately implement the student’s emergency procedure plan, call an ambulance, and then notify the school. The Head of Campus and the Headmaster should be notified without delay. They will arrange for parents or guardians to be notified.

**Post-incident Action**

It is expected that after an incident has occurred and has been resolved, that staff members involved will engage in the following activities:

- Completion of an Incident / Accident Report form including full details of the event and what occurred;
- Collection of the student’s personal effects (if he is transported by ambulance and does not have them) for return to School;
- Debrief with students directly involved as witnesses to the event;
- Debrief of staff involved;
- Communication with the Head of Campus or Principal as appropriate regarding the particulars of the incident, actions taken and outcomes;
- Head of Campus to discuss with parents (later) what occurred and ask them to seek medical advice on how it may be prevented in future;
- Head of Campus and First Aid Coordinator to review the student’s individual management plan;
- Implement updated risk prevention strategies (where applicable).

**Administration of an Epipen® or Anapen®:**

- Lay person flat, do not stand or walk. If breathing is difficult allow to sit.
- Give Epipen® or Anapen® (or Epipen® or Anapen® Jnr if under 20kgs).
- Phone ambulance (call 000).
- Contact family or emergency contact.
- A further adrenalin does may be given if there is no response after 5 minutes (use a non-prescription adrenalin auto injector if required).
- Note the time of administration and advise paramedics when they arrive. Hand the paramedics the used adrenalin auto injector(s).
- If in doubt of how to use an Epipen® or Anapen®, use an adrenalin auto injector.