ANAPHYLAXIS
MANAGEMENT POLICY

Rationale:
• Anaphylaxis is an acute allergic reaction to certain food items, medications, chemicals and insect stings. The condition develops in approximately 1-2% of the population. The most common allergens are nuts, eggs, cow’s milk and bee or other insect stings, and some medications.

Aims:
• Mortlake College will fully comply with Ministerial Order 706 and the associated guidelines published and amended by the Department.
• To provide a safe and healthy school environment that takes into consideration the needs of all students, including those who may suffer from anaphylaxis.
• To raise community awareness about anaphylaxis and the school’s anaphylaxis management policy.
• 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:
• Anaphylaxis is a severe and potentially life-threatening condition.
• Signs and symptoms of anaphylaxis include hives/rash, tingling in or around the mouth, abdominal pain, vomiting or diarrhoea, facial swelling, cough or wheeze, heart palpitations, difficulty breathing or swallowing, loss of consciousness or collapse, or cessation of breathing.
• Anaphylaxis is best prevented by knowing and avoiding the allergens.
• The principal will ensure that an individual 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 & 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 students emergency contact details and
  • An ASCIA Action Plan.

NOTE: The red and blue “ASCIA Action Plan for Anaphylaxis” is the recognised form for emergency procedure plans that is provided by Medical Practitioners to Parents when a child is diagnosed as being at risk of anaphylaxis. School Staff will then implement and monitor the student’s Individual Anaphylaxis Management Plan.
• The student’s individual management plan will be reviewed, in consultation with the student’s parents/ carers in all of the following circumstances:

Ref: St John Ambulance – 03 8588 8391 for Anapen and anaphylaxis training
• annually, and as applicable,
• if the student’s medical condition, in so far as it relates to allergy and the potential for anaphylactic reaction, changes,
• as soon as practicable after a 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 and incursions). This will be the responsibility of the camp/subject co-ordinator. Planning for off site activities includes contact with parents to specify specific prevention strategies.

Parent Responsibilities:
• It is the responsibility of the parent to:
  • provide the emergency procedures plan (ASCIA Action Plan).
  • inform the school in writing if their child’s medical condition, in so far as it relates to allergy and the potential for anaphylactic reaction, changes, and if relevant provide an updated emergency procedures plan (ASCIA Action Plan).
  • provide an up to date photo for the emergency procedures plan (ASCIA Action Plan) when the plan is provided to the school and when it is reviewed.
  • Provide the school with an Adrenaline Autoinjector that is current and not expired for their child

Prevention Strategies:
Risk Management and prevention strategies that Mortlake College will put in place for all relevant in-school and out-of-school settings which include the following:
• All teachers and staff will be informed about students with Anaphylaxis in their class, including casual relief teachers and specialist classes.
• All staff are to notify the office of bee hives or wasp nests in the school grounds, for removal by tradespeople.
• Students with anaphylaxis to insect bites are encouraged to wear long shirts, hats and shoes during recess and lunchtimes.
• Students will be given annually an age appropriate education session about calling ambulances for anaphylaxis.
• For special events, including incursions, sports & cultural days, fetes or class parties, excursions and camps, co-ordinators will discuss specific prevention strategies if required with parent.

School Management and Emergency Response:
• The school maintains 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.
• The school has Individual Anaphylaxis Management Plans and ASCIA Action Plans that are held in set locations including –
  o in the students files,
  o in the sick bay room on the wall (ASCIA Action Plan) and in medical file.
  o On school camps/excursions with the medical files with the teacher in charge
  o ASCIA action plans are also displayed in the general staff room and CRT folders.
• School staff will be informed about the storage of general use Epipens and students’ own Epipens minimum twice a year.
• School staff will be informed of changes in anaphylaxis management plans or ASCIA action plans when they occur.
• School staff will be informed minimum twice yearly about students with anaphylaxis at the school through and in person briefing plus email communication once per term.

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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:
  o The number of students enrolled at the school who have been diagnosed as being at risk of anaphylaxis
  o The accessibility of Adrenaline Autoinjectors that have been provided by parents of students who have been diagnosed as being at risk of anaphylaxis
  o The availability and sufficient supply of Adrenaline Autoinjectors for general use in specific locations at the school including – in the school yard, and at excursions, camps and special events conducted or organised by the school, and
  o 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.

Communication:
• Staff will be advised by the Principal about how to respond to an anaphylactic reaction by a student in the classroom, school yard and school buildings at the start of each year. Staff will be advised by the Principal about how to respond to an anaphylactic reaction during off-site or out of school activities, including on excursions, school camps and at special events conducted or organised by the school.
• Students in all age groups p-12 will be given an annual education session about calling an ambulance. Students in the secondary level will also be given an annual information session about anaphylaxis.
• Parents will be given information twice a year about responding to anaphylaxis in the school newsletter.
• Casual Relief teachers will be informed through being provided with the ASCIA action plan for students with anaphylaxis at the school, the location of the child’s Epipen, a list of first aid staff members and the location of information about emergency procedures at the school.
• Volunteers at the school working directly with students with the potential for an anaphylactic reaction will be notified of the condition and the student and who to go to in a medical emergency.

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:
• All School Staff will be appropriately trained in Anaphylaxis Management.
• Principal will delegate at least 2 staff members to be School Anaphylaxis Supervisors and undertake Course in Verifying the Correct Use of Adrenaline Autoinjector Devices 22303VIC. This competency is valid for 3 years.
• All School Staff will undertake the following training:
  o An online Australasian Society of Clinical Immunology and Allergy (ASCIA) e-training course followed by a competency check by the School Anaphylaxis Supervisor – competency is valid for 2 years.
  o Participate in a briefing to occur twice per calendar year (with the first briefing to be held at the beginning of the school year) conducted by the School Anaphylaxis Supervisors on –
    ■ The school’s Anaphylaxis Management Policy
    ■ The causes, symptoms and treatment of anaphylaxis

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- The identities of the students with a medical condition that relates to an allergy and the potential for anaphylactic reaction, and where the medication is located
- How to use an Adrenaline Autoinjector, including hands on practise with a trainer of a 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.

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 preferably before the students’ 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 sufficient number of School Staff present who have successfully completed a Verifying the Correct Use of Adrenaline Autoinjector Devices 22303VIC Course in the 3 years prior.

- **Annual Risk Management Checklist:**

- **Evaluation:**

  - This policy will be reviewed annually in the review cycle.

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This policy was last ratified by School Council in....

### Staff Anaphylaxis Register

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<tr>
<th>Staff member Surname</th>
<th>Staff First name</th>
<th>Expiry Month</th>
<th>Expiry - Year</th>
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<td>Cherie</td>
<td>April</td>
<td>2019</td>
</tr>
<tr>
<td>BOURKE</td>
<td>Carmel</td>
<td>June</td>
<td>2019</td>
</tr>
<tr>
<td>JENKINS</td>
<td>Dot</td>
<td>April</td>
<td>2019</td>
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