



# ANAPHYLAXIS

## MANAGEMENT POLICY

### PURPOSE

To explain to Mortlake College 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 Mortlake College 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

Mortlake College will fully comply with Ministerial Order 706 and the associated guidelines published by the Department of Education and Training.

#### Anaphylaxis

Anaphylaxis is a severe allergic reaction that occurs after exposure to an allergen. The most common allergens for school aged children are nuts, eggs, cow's milk, fish, shellfish, wheat, soy, sesame, latex, certain insect stings and medications.

#### *Symptoms*

Sights and symptoms of a mild to moderate allergic reactions can include:

- swelling of the lips, face and eyes
- hives or welts
- tingling in the mouth

Signs and symptoms of anaphylaxis, a severe allergic reaction, can include:

- difficult/noisy breathing
- swelling of tongue
- difficulty talking and/or hoarse voice
- wheeze or persistent cough
- persistent dizziness or collapse
- student appears pale or floppy
- abdominal pain and/or vomiting

Symptoms usually develop within ten minutes and up to two 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 first aid treatment for anaphylaxis.

Individuals diagnosed as being at risk of anaphylaxis are prescribed an adrenaline autoinjector for use in an emergency. These adrenaline autoinjectors are designed so that anyone can use them in an emergency.

## **Individual Anaphylaxis Management Plans**

All students at Mortlake College who are diagnosed as being at risk of suffering from an anaphylactic reaction by a medical practitioner must have an Individual Anaphylaxis Management Plan. When notified of an anaphylaxis diagnosis, the principal of Mortlake College is responsible for developing a plan in consultation with the student's parents/carers.

Where necessary, an Individual Anaphylaxis Management Plan will be in place as soon as practicable after a student enrolls at Mortlake College and where possible, before the student's first day.

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 is 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 allergy 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 Principal and Health and Safety Representative are 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 Plans*

A student's Individual Anaphylaxis 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, insofar 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.

## Location of plans and adrenaline autoinjectors

### 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 specific 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.
- Adrenaline Autoinjectors for general use are located at the General Office and Activity Centre.
- A copy of each student's Individual Anaphylaxis Management Plan will be stored with their ASCIA Action Plan for Anaphylaxis at the General Office and Sickbay
- Students are encouraged to keep their adrenaline autoinjectors on their person at all times. Adrenaline autoinjectors must be labelled with the student's name.

## Risk Minimisation 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
- staff and students are regularly reminded to wash their hands after eating
- students are discouraged from sharing food
- garbage bins at school are to remain covered with lids to reduce the risk of attracting insects
- gloves must be worn when picking up papers or rubbish in the playground
- year groups will be informed of allergens that must be avoided in advance of class parties, events or birthdays
- 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.

## Emergency Response

In the event of an anaphylactic reaction, the emergency response procedures in this policy must be followed, together with the school's general first aid procedures, emergency response procedures and the student's Individual Anaphylaxis Management Plan.

A complete and up to date list of students identified as being at risk of anaphylaxis is maintained by Health and Safety Representative and stored at General Office and Sickbay.

For camps, excursions and special events, a designated staff member will be responsible for maintaining a list of students at risk of anaphylaxis attending the special event, together with their Individual Anaphylaxis Management Plans and adrenaline autoinjectors, where appropriate.

If a student experiences an anaphylactic reaction at school or during a school activity, school staff must:

Step	Action
1.	<ul style="list-style-type: none"><li>• Lay the person flat</li><li>• Do not allow them to stand or walk</li><li>• If breathing is difficult, allow them to sit</li><li>• Be calm and reassuring</li><li>• Do not leave them alone</li><li>• 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 at General Office or Activity Centre Office.</li><li>• If the student's plan is not immediately available, or they appear to be experiencing a first time reaction, follow steps 2 to 5</li></ul>
2.	Administer an EpiPen or EpiPen Jr (if the student is under 20kg) <ul style="list-style-type: none"><li>• Remove from plastic container</li><li>• Form a fist around the EpiPen and pull off the blue safety release (cap)</li><li>• Place orange end against the student's outer mid-thigh (with or without clothing)</li><li>• Push down hard until a click is heard or felt and hold in place for 3 seconds</li><li>• Remove EpiPen</li><li>• Note the time the EpiPen is administered</li><li>• Retain the used EpiPen to be handed to ambulance paramedics along with the time of administration</li></ul>
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.

If a student appears to be having a severe allergic reaction, but has not been previously diagnosed with an allergy or being at risk of anaphylaxis, school staff should follow steps 2 – 5 as above.

*[Note: If in doubt, it is better to use an adrenaline autoinjector than not use it, even if in hindsight the reaction is not anaphylaxis. Under-treatment of anaphylaxis is more harmful and potentially life threatening than over treatment of a mild to moderate allergic reaction. Refer to page 41 of the [Anaphylaxis Guidelines](#)].*

## Communication Plan

This policy will be available on Mortlake P-12 College's website so that parents and other members of the school community can easily access information about Mortlake P-12 College's anaphylaxis

management procedures. The parents and carers of students who are enrolled at Mortlake P-12 College and are identified as being at risk of anaphylaxis will also be provided with a copy of this policy.

- 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:
  - 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.
  - 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
    - 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.

The briefing must be conducted by a member of school staff who has successfully completed an Anaphylaxis Management Training Course and is still valid.

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.

## 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 AND EVALUATION

This policy was last updated on April 2017 and is scheduled for review annually

The principal will complete the Department's Annual Risk Management Checklist for anaphylaxis management to assist with the evaluation and review of this policy and the support provided to students at risk of anaphylaxis.

## Anaphylaxis Management Trainers

Staff member Surname	Staff First name	Expiry Month	Expiry - Year
ROBERTSON	Cherie	April	2019
BOURKE	Carmel	June	2019
JENKINS	Dot	April	2019