

St Francis Primary School Nathalia

Chapel Street (PO Box 66) Nathalia VIC 3638 Tel: 5866 2271 Fax: 5866 2136 ABN: 54 412 713 465



St Francis will provide a child safe environment where all children have the right to be treated with respect and will be protected from harm.

Anaphylactic Shock Policy

Source of Obligation

Under the Education and Training Reform Act 2006 (VIC) (s 4.3.1 (6)(c)) (the Act), all schools must develop an anaphylaxis management policy, where the school knows or ought to reasonably know, that a student enrolled at the school has been diagnosed as being at risk of anaphylaxis.

'Ministerial Order No. 706: Anaphylaxis Management in Victorian schools' (Ministerial Order No. 706) prescribes specific matters that schools applying for registration and registered schools in Victoria must contain in their anaphylaxis management policy for the purposes of section 4.3.1(6)(c) of the Act.

The Hazard - Anaphylactic Shock

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 and certain insect stings (particularly bee stings).

The key to prevention of anaphylaxis in schools is knowledge of the student who has been diagnosed as at risk, awareness of allergens, and prevention of exposure to those allergens. Partnerships between schools and parents/carers are important in helping the student avoid exposure.

Adrenaline given through an adrenaline auto-injector (such as an EpiPen or EpiPen® Jr) into the muscle of the outer mid-thigh is the most effective first aid treatment for anaphylaxis.

It is important to remember that minimising the risks of anaphylaxis is everyone's responsibility, including the Principal and all school staff, parents/carers, students and the broader school community

St Francis Primary School's Policy

St Francis is committed to providing a safe learning environment for all our students and complying with the current Ministerial Order No.706 and the Department of Education and Training's Anaphylaxis Guidelines as amended by the Department from time to time (Guidelines).

The School recognises that it cannot achieve a completely allergen free environment. It is our policy:

- 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;
- To adopt the recommendations of the Guidelines where relevant to the School;
- To raise awareness about anaphylaxis and the School's anaphylaxis management policy in the school community;
- To engage with parents/carers of each student at risk of anaphylaxis when assessing risks and developing risk minimisation strategies for the student; and
- To ensure that staff have knowledge about allergies, anaphylaxis and the School's policies and procedures in responding to an anaphylactic reaction.

Safe Work Practices

St Francis has developed the following work practices and procedures for managing anaphylactic shock:

- Individual Anaphylaxis Management Plans;
- Adrenaline Autoinjectors Purchase, Storage and Use;
- Communication Plan;
- Emergency Response Procedures;
- Risk Minimisation Strategies; and
- Anaphylaxis Training and Briefing.

Risk Management Checklist

The Principal completes an annual Risk Management Checklist included in the Guidelines, to monitor our obligations.

We regularly check the Department of Education and Training's Anaphylaxis Management in Schools page to ensure the latest version of the Risk Management Checklist is used.

The School's Anaphylaxis Supervisors

The Guidelines recommend that the Principal nominates a staff member to undertake appropriate training to be able to verify the correct use of autoinjector (trainer) devices and lead the twice-yearly briefings on the school's anaphylaxis management policy (Anaphylaxis Supervisor). It is recommended that at least two Anaphylaxis Supervisors per school or campus are appointed at the School.

These staff may include:

- a first aid coordinator;
- a health and wellbeing coordinator or other health and wellbeing staff; and/or
- a senior/leading teacher.

St Francis has appointed the following staff members as its Anaphylaxis Supervisors: Fiona Byrnes, Louise Robertson, Administration Officer

Refer to Roles and Responsibilities: School Anaphylaxis Supervisor below for more information.

Key Definitions

Adrenaline Autoinjector

An adrenaline autoinjector device, approved for use by the Commonwealth Government Therapeutic Goods Administration, which can be used to administer a single pre-measured dose of adrenaline to those experiencing a severe allergic reaction (anaphylaxis). These may include EpiPen® or EpiPen® Jr.

- Refer to Adrenaline Autoinjector.
- Anaphylaxis Management Training Course
- This means a course in anaphylaxis management training:
- that is accredited as a VET accredited course in accordance with Part 3 of the National Vocational Education and Training Regulator Act 2011 (Cth) that includes a competency check in the administration of an Adrenaline Autoinjector;
- accredited under Chapter 4 of the Act by the Victorian Registration and Qualifications Authority that includes a competency check in the administration of an Adrenaline Autoinjector;
- endorsed and delivered by a tertiary level specialist allergy service within a tertiary level academic teaching hospital that includes a competency check in the administration of an Adrenaline Autoinjector; or any other course including an Online Training Course.

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 for Anaphylaxis

This plan is a nationally recognised action plan for anaphylaxis developed by ASCIA. These plans are device-specific; that is, they list the student's prescribed adrenaline autoinjector (EpiPen® or EpiPen® Jr) and must be completed by the student's medical practitioner. Should a different Adrenaline Autoinjector become available in Australia, then a different ASCIA Action Plan specific to that device would be developed. This plan is one of the components of the student's Individual Anaphylaxis Management Plan.

Communication Plan

A plan developed by St Francis which provides information to all school staff, students and parents about anaphylaxis and this policy.

Refer to Communication Plan.

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 student's allergies, symptoms, and the emergency response to administer the student's adrenaline autoinjector should the student display symptoms of an anaphylactic reaction. The Individual Anaphylaxis Management Plan also importantly includes age-appropriate strategies to reduce the risk of an allergic reaction occurring.

Refer to Individual Anaphylaxis Management Plan.

Online Training Course

Means the course called ASCIA Anaphylaxis e-training for Victorian Schools.

OPTIONAL: The course can be accessed through the External Training Courses page of the Staff Learning System.

Roles and Responsibilities:

Principal

Section 9 of the Guidelines sets out the role and responsibilities of the Principal. The Principal must:

- ensure that the School develops, implements and routinely reviews this policy in accordance with Ministerial Order No. 706 and the 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 the time
 of enrolment or at the time of diagnosis (whichever is earlier);
- ensure that parents/carers provide an ASCIA Action Plan for Anaphylaxis which has been completed and signed by the student's medical practitioner and 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/carers for any student that has been diagnosed by a
 medical practitioner with a medical condition relating to allergy and the potential for
 an anaphylactic reaction, where the School has been notified of that diagnosis;
- ensure students' Individual Anaphylaxis Management Plans are appropriately communicated to all relevant staff;
- ensure that the canteen provider and all of its employees can demonstrate satisfactory training in the area of food allergy and anaphylaxis and its implications for food-handling practices;
- ensure that parents/carers 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 an appropriate Communication Plan is developed;
- ensure there are procedures in place for providing information to school volunteers and casual relief staff about students who are at risk of anaphylaxis, and their role in responding to an anaphylactic reaction of a student in their care;
- ensure that relevant school staff have successfully completed an approved
 Anaphylaxis Management Training Course and that their accreditation is current;
- ensure that school staff who are appointed as Anaphylaxis Supervisor(s) are appropriately trained in conducting autoinjector competency checks and that their accreditation is current;
- ensure that all school staff are briefed at least twice a year by the Anaphylaxis Supervisor (or other appropriately trained member of the school staff);
- allocate time, such as during staff meetings, to discuss, practise and review this policy;
- encourage regular and 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 at the beginning of each school year; when the student's medical condition changes; as soon as practicable 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 and reviewed annually; and
- arrange to purchase and maintain an appropriate number of Adrenaline
 Autoinjectors for general use to be part of the School's first aid kit, stored with a
 copy of the general ASCIA Action Plan for Anaphylaxis (orange).

Roles and Responsibilities: School Anaphylaxis Supervisor

The Anaphylaxis Supervisor must complete the School Anaphylaxis Supervisor Checklist in conjunction with the Principal and other school staff to ensure that responsibilities, training requirements and tasks relating to anaphylaxis are being met by the School.

Section 9 of the Guidelines sets out the role and responsibilities of the School Anaphylaxis Supervisor.

The Anaphylaxis Supervisor must:

- work with the Principal to develop, implement and regularly review this policy;
- obtain regular training in how to recognise and respond to an anaphylactic reaction, including administering an Adrenaline Autoinjector;
- verify the correct use of Adrenaline Autoinjector (trainer) devices by other school staff undertaking an Online Training Course through completion of the School Supervisors' Observation Checklist;
- provide access to the Adrenaline Autoinjector (trainer) device for practice by school staff;
- send reminders to staff or information to new staff about anaphylaxis training requirements and liaise with the Principal to maintain records of training undertaken by staff at the school;
- lead the twice-yearly anaphylaxis school briefing;
- develop school-specific scenarios to be discussed at the twice-yearly briefing to familiarise staff with responding to an emergency situation requiring anaphylaxis treatment, for example
- a bee sting occurs on school grounds and the allergic student is conscious; or
- an allergic reaction where the student has collapsed on school grounds and the student is not conscious;
- keep an up-to-date register of students at risk of anaphylaxis;
- keep a register of Adrenaline Autoinjectors, including a record of when they are 'in'
 and 'out' from the central storage point. For instance, when they have been taken
 on excursions, camps etc;
- work with the Principal, parents/carers and students to develop, implement and review each Individual Anaphylaxis Management Plan in accordance with this policy;
- provide advice and guidance to school staff about anaphylaxis management in the School, and undertake regular risk identification and implement appropriate minimisation strategies;
- work with school staff to develop strategies to raise their own, students and school community awareness about severe allergies; and
- provide or arrange post-incident support (e.g. counselling) to students and school staff, if appropriate.

Roles and Responsibilities: Staff

Section 9 of the Guidelines sets out the role and responsibilities of the School staff.

The school staff must:

- know and understand the requirements of this policy;
- know the identity of students who are at risk of anaphylaxis, know their face and if possible, what their specific allergy is;
- 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;
- know where to find a copy of each student's ASCIA Action Plan for Anaphylaxis 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;
- know and follow the 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 the school, or away from the school;
- avoid the use of food treats in class or as rewards, as these may contain allergens;
- work with parents/carers to provide appropriate treats for students at risk of anaphylaxis, or appropriate food for their child if the food the school/class is providing may present an allergy risk;
- 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 before and after handling food; and
- raise student awareness about allergies and anaphylaxis, and the importance of each student's role in fostering a school environment that is safe and supportive for their peers.

Roles and Responsibilities: Parents/Carers

Section 9 of the Guidelines sets out the role and responsibilities of the parents/carers of a student at risk of anaphylaxis.

Parents/carers must:

- inform the School in writing, either at enrolment or diagnosis, of the student's allergies, and whether the student has been diagnosed as being at risk of anaphylaxis;
- obtain and provide the School with an ASCIA Action Plan for Anaphylaxis from the student's medical practitioner that details:
- their condition;
- any medications to be administered; and
- any other relevant emergency procedures;
- immediately inform school staff in writing of any changes to the student's medical condition and if necessary, obtain and provide an updated ASCIA Action Plan for Anaphylaxis;
- provide the School with an up to date photo for the student's ASCIA Action Plan for Anaphylaxis when the plan is reviewed;
- meet with and assist the School to develop the student's Individual Anaphylaxis Management Plan, including risk minimisation and 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; and
- participate in reviews of the student's Individual Anaphylaxis Management Plan.

Worker Responsibilities

All workers must follow the anaphylactic shock management guidelines set out in this policy.

Signage

ASCIA Action Plans are posted in the staffroom with first aid procedures.

With permission from parents/carers, it may be appropriate to have a student's name, photo and the foods they are allergic to, displayed in other locations around the school.

Implementation

- This policy is implemented through a combination of:
- School premises inspections (to identify wasp and bee hives);
- Staff training and supervision;
- Maintenance of medical records;
- Effective incident notification procedures;
- Effective communication procedures with the student's parents/carers; and
- Initiation of corrective actions where necessary.
- Discipline for Breach of Policy
- Where a staff member breaches this policy St Francis may take disciplinary action.