

Management of Students at Risk of Anaphylaxis

This policy follows the authority provided in the Victorian Anaphylaxis Guidelines: A resource for managing severe allergies in Victorian Schools published by the Victorian Department of Education, and Ministerial Order No 706: Anaphylaxis Management in Victorian Schools, and was written in collaboration with Allergy & Anaphylaxis Australia.

Source of Obligation

The Education and Training Reform Act 2006 (Vic) (s 4.3.1 (6)(c)) requires all schools to 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' 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 – Anaphylaxis

Anaphylaxis is the most severe form of allergic reaction. Individuals can have a mild, moderate or severe allergic reaction. Anaphylaxis is a severe, rapidly progressive allergic reaction that is potentially life-threatening. The most common allergies in school-aged children are peanuts, cow's milk, egg, tree nuts (e.g. cashews and walnuts), wheat, soy, sesame and certain insect bites and stings (particularly bees, wasps, ants and ticks).

The key to prevention of anaphylaxis in school is knowledge of students who have been diagnosed as at risk, awareness of allergies and prevention of exposure to those triggers that cause allergic reactions.

Partnerships between the School and parents/guardians are important in helping students avoid exposure as well as age-appropriate education for students.

Adrenaline given through an adrenaline (epinephrine) autoinjector (such as an EpiPen® or EpiPen® Jr) into the muscle of the outer mid-thigh is the first aid treatment for anaphylaxis. Adrenaline autoinjectors are designed for use by laypeople.

It is important to remember that minimisation strategies to help reduce the risk of anaphylaxis are everyone's responsibility, including the Principal and all School staff, parents/guardians, students and the broader School community.

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.

St Francis School's Policy

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

The School recognises that while policies and procedures to reduce the risk of an allergic reaction can be developed and maintained, they cannot achieve a completely allergen-free environment.

It is critical that staff can recognise an allergic reaction and a potential anaphylaxis risk and treat it appropriately in an emergency.

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 schooling
- raise awareness of food and insect allergy and the risk of anaphylaxis and the School's anaphylaxis management policy in the School community
- engage with parents/guardians of each student at risk of anaphylaxis when assessing risks and developing risk minimisation strategies for the student
- ensure that staff have knowledge about allergies, can recognise an allergic reaction including anaphylaxis and understand the School's policy and guidelines and emergency procedures in responding to anaphylaxis.

Our Duty of Care

The School has a common law duty of care to put in place strategies to manage students at risk of anaphylaxis while they are at the School and engaged in School-related activities.

When a student is diagnosed as being at risk of anaphylaxis, the exercise of the School's duty of care requires the development of an Individual Anaphylaxis Management Plan, which includes an ASCIA Action Plan for Anaphylaxis (emergency response plan) and risk minimisation strategies.

Students at risk of allergic reactions, including anaphylaxis, could also be singled out or subjected to bullying behaviour within the wider School community. As part of our Bullying Prevention and Intervention policy, the School maintains an atmosphere of respectful relationships and actively develops and implements programs for bullying prevention, provides support for any student who is at risk of being bullied and empowers the whole School community to recognise and respond appropriately to bullying and behave as responsible bystanders.

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Safe Work Practices

School has developed the following work practices and procedures for managing the risk of anaphylaxis:

Individual Anaphylaxis Management Plans
(This plan includes Risk Minimisation Strategies)

Adrenaline Autoinjectors – Purchase, Storage and Use

Communication Plan

Emergency Response Procedures

Staff Training

Risk Management Checklist.

St Francis has also developed a flowchart which outlines our practices for enrolled students or students presenting for enrolment.

Risk Management Checklist

The Principal or School Anaphylaxis Supervisor completes an annual Risk Management Checklist included in the Anaphylaxis Guidelines for Victorian Schools, 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.

Roles and Responsibilities:

Principal

The Principal is responsible for:

- ensuring that the School develops, implements and annually reviews this policy in accordance with the Order and the Guidelines
- actively seeking information to identify students with allergies to food and insects for example, that have not been prescribed an adrenaline autoinjector and those who have been diagnosed as being at risk of anaphylaxis and been prescribed an adrenaline autoinjector, either at enrolment or at the time of diagnosis (whichever is earlier)
- ensuring that parents/guardians provide an ASCIA Action Plan which has been completed and signed by the student's medical practitioner and contains an up-to-date photograph of the student
- ensuring that an Individual Anaphylaxis Management Plan is developed in consultation with the student's parents/guardians for any student that has been diagnosed by a medical practitioner with a medical condition relating to allergy and the potential for an anaphylaxis, where the School has been notified of that diagnosis

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- ensuring that an Interim Individual Anaphylaxis Management Plan is developed for a student where:
- the School has not been notified of a student's potential for anaphylaxis, but there is reason to believe that the student is at risk (e.g. where the parents/guardians have not told the school about any allergies, but the student mentions it in class), or
- a student's adrenaline autoinjector has been used or lost and not yet replaced, or
- a student's adrenaline autoinjector is identified as out of date or cloudy/discoloured, or
- relevant training has not occurred for a member of staff who has a child in their class at risk of anaphylaxis.
- ensuring students' Individual Anaphylaxis Management Plans are appropriately communicated to all relevant staff
- ensuring 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. See free online training for food service staff
- ensuring that parents/guardians 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
- ensuring that an appropriate Communication Plan is developed to provide information to all School staff, students and parents/guardians about anaphylaxis and this policy
- ensuring 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 recognising an allergic reaction and responding to an allergic reaction, including anaphylaxis, of a student in their care
- ensuring that relevant School staff have successfully completed an approved anaphylaxis management training course and that their accreditation is current
- ensuring that School staff who are appointed as School Anaphylaxis Supervisors are appropriately trained in conducting autoinjector competency checks and that their accreditation is current
- ensuring that all School staff are briefed at least twice a year by a School Anaphylaxis Supervisor (or other appropriately trained member of the School staff), with the first briefing to occur at the start of each year
- allocating time, such as during staff meetings, to discuss, practise and review this policy
- encouraging regular and ongoing communication between parents/guardians and School staff about the current status of the student's allergies, the School's policies and their implementation
- ensuring that the student's Individual Anaphylaxis Management Plan is reviewed in consultation with parents/guardians annually at the beginning of each school year, when the student's medical condition changes, as soon as practicable after a student has an anaphylaxis at the 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
- ensuring the Risk Management Checklist for anaphylaxis is completed and reviewed annually
- arranging 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 ASCIA Action Plan for Anaphylaxis (Orange) for general use.

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Roles and Responsibilities:

School Anaphylaxis Supervisor

The School appoints appropriate School staff for the role of School Anaphylaxis Supervisor ('the Supervisor') (two are recommended).

These staff may include:

- a School-employed nurse
- a first aid coordinator
- a health and wellbeing coordinator or other health and wellbeing staff, and/or
- a senior/leading teacher.

A person should complete the School Anaphylaxis Supervisors course before being nominated the School Anaphylaxis Supervisor. The School Anaphylaxis Supervisor must complete the School Anaphylaxis Supervisor Observation 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.

St Francis has appointed the following staff members as its Anaphylaxis Supervisors:

Fiona Byrnes - WHS Officer

Louise Robertson - Administration Office

Responsibilities of the School Anaphylaxis Supervisor/s include:

- working with the Principal to develop, implement and regularly review this policy
- obtaining regular training on how to recognise and respond to anaphylaxis, including administering an adrenaline autoinjector
- verifying the correct use of adrenaline autoinjector (trainer) devices by other School staff undertaking online anaphylaxis training through completion of the School Supervisors' Observation Checklist
- providing access to the adrenaline autoinjector (trainer) device for practice by School staff
- sending reminders to staff or information to new staff about anaphylaxis training requirements and liaising with the Principal to maintain records of training undertaken by staff at the School
- leading the twice-yearly anaphylaxis School briefing
- developing 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 student with bee allergy is conscious, or an allergic reaction where the student has collapsed on School grounds and the student is not conscious
- organising anaphylaxis drills (not unlike a fire drill) in the School to practise getting an adrenaline autoinjector to a student requiring it quickly in an emergency
- keeping an up-to-date register of students at risk of anaphylaxis
- keeping 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.

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- working with parents/guardians (and students) to develop, implement and review each Individual Anaphylaxis and Allergic Reactions Management Plan in accordance with this policy
- providing advice and guidance to School staff about anaphylaxis management in the School and undertaking regular risk identification and implement appropriate minimisation strategies
- working with School staff to develop strategies to raise their own, students' and School community awareness about severe allergies
- providing or arranging post-incident support (e.g. counselling) to students and School staff, if appropriate.

Roles and Responsibilities:

Staff

The responsibilities of School staff include:

- knowing and understanding the requirements of this policy
- knowing the identity of students who are at risk of anaphylaxis and knowing their face if possible
- understanding the causes, signs and symptoms, and treatment of anaphylaxis
- obtaining regular training on how to recognise and respond to an allergic reaction (including anaphylaxis), including administration of an adrenaline autoinjector
- knowing where to find a copy of each student's ASCIA Action Plan quickly and following it in the event of an allergic reaction
- knowing the School's general first aid and emergency response procedures and understanding their role in relation to responding to anaphylaxis
- knowing where students' adrenaline autoinjectors and the adrenaline autoinjectors for general use are kept
- knowing and following the individual risk minimisation strategies in the student's Individual

Anaphylaxis or Allergic Reactions Management Plan

- planning 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
- working with parents/guardians to provide appropriate food for their child if the food the School/class is providing may present an allergy risk for them
- avoiding the use of food treats in class or as rewards, as these may contain allergens. If food treats are used, however, work with parents/guardians to provide appropriate treats for students at risk of anaphylaxis
- being 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
- being aware of the risk of cross-contamination when preparing, handling and displaying food
- making sure that tables and surfaces are wiped down regularly and that students wash their hands before and after handling food
- raising 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.

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Roles and Responsibilities:

Parents/Guardians

The responsibilities of parents/guardians of students at risk of anaphylaxis include:

- informing the School in writing, either at enrolment or diagnosis, of the student's allergies, and whether the student has been prescribed an adrenaline autoinjector or not
- providing the School with an ASCIA Action Plan from the student's medical practitioner that details their condition, any medications to be administered, and any other relevant emergency procedures
- immediately informing School staff in writing of any changes to the student's medical condition and if necessary, providing an updated ASCIA Action Plan
- providing the School with an up to date photo for the student's ASCIA Action Plan when the plan is reviewed
- meeting with and assisting the School to develop the student's Individual Anaphylaxis or Allergic Reactions Management Plan, including risk minimisation strategies
- providing the School with an adrenaline autoinjector and any other medications that are current and not expired
- replacing the student's adrenaline autoinjector and any other medication as needed before their expiry date or when used
- assisting 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, assisting in identifying and/or providing alternative food options for the student when needed
- informing School staff in writing of any changes to the student's emergency contact details
- participating in reviews of the student's Individual Anaphylaxis or Allergic Reactions Management Plan.

Staff Responsibilities

All staff must follow the anaphylaxis management guidelines set out in this policy.

Signage

Copies of the ASCIA Action Plans are posted in the staff room and are located with first aid procedures as well as being in each student's medical kit with their adrenaline autoinjector/s.

With permission from parents/guardians (and older students), it may be appropriate to have a student's name, photo and the food/insect they are allergic to, displayed in other locations around the School.

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Implementation

This policy is implemented through a combination of:

- school premises inspections (to identify wasp and bee hives)
- staff training and supervision
- maintenance of student medical records
- effective incident notification procedures
- effective communication with the student at risk and their parent/guardian
- completion of annual risk management checklist
- effective communication procedures with the school community including all students' parents/guardians
- initiation of corrective actions where necessary.

Discipline for Breach of Policy

Where a staff member breaches this policy, St Francis may take disciplinary action.

Related Documents

Individual Anaphylaxis Management Plan Template
Facilitator Guide for Anaphylaxis Management
Anaphylaxis Management Briefing Presentation
Risk Management Checklist
School Anaphylaxis Supervisor Checklist
School Supervisors' Observation Checklist
Risk Minimisation strategies for schools Template

Review

St Francis is committed to the continuous improvement of our Child Protection Program. In accordance with our Continuous Improvement and Review Policy this Policy is regularly reviewed for overall effectiveness and to ensure compliance with all child protection related laws, regulations and standards.

Date Created – 2017

Date Reviewed – 2020

Next Review - 2023