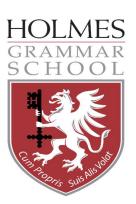
# **Anaphylaxis Management Policy and Procedure**





## 1. Scope

This Policy and Procedure applies to all students and staff of Holmes Grammar School.

## 2. Purpose

- 2.1 Holmes Grammar School fully complies with the Education and Training Reform Act 2006 Ministerial Order 706: Anaphylaxis Management in Schools.
- 2.2 Holmes Grammar fully complies with all guidelines related to anaphylaxis management as published and amended by the Department of Education and Training that may occur from time to time.
- 2.3 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, latex, certain insect stings and medication.
- 2.4 The key to prevention of anaphylaxis in schools is knowledge of those students who have been diagnosed at risk, awareness of triggers (allergens), and prevention of exposure to these triggers.
- 2.5 Partnerships between schools and parents are important in ensuring that certain foods or items are kept away from the student while at school. Adrenaline given through an EpiPen® auto injector to the muscle of the outer mid- thigh is the most effective first aid treatment for anaphylaxis.
- 2.6 This Policy and Procedure is in place to:
  - a. 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;
  - b. Raise awareness about anaphylaxis and the school's anaphylaxis management policy in the school community;
  - Engage with parents/carers of students at risk of anaphylaxis in assessing risks, developing risk minimisation strategies and management strategies for the student; and
  - d. Ensure that each staff member has adequate knowledge about allergies, anaphylaxis and the school's policy and procedures in responding to an anaphylactic reaction.

## **3** Policy Principles

- 3.5 On application, families will complete all sections pertaining to medical condition of students.
- 3.6 All students on orientation will complete a Student Medical Form with reference to allergic reactions that could be defined as anaphylactic.
- 3.7 In the event that Holmes Grammar School has enrolled a student in circumstances where the school knows, or ought reasonably to know, that the student has been diagnosed as being at risk of anaphylaxis, then the school will implement the

following anaphylaxis management procedures.

# 4 Procedure Principles

## **Prevention Strategies**

- 4.1 The School takes responsibility for identifying the triggers and prevention of exposure to these. For those students identified as anaphylactic, their own individual ASCIA Action Plan will lists a series of preventative strategies to protect them from exposure. The School will undertake to:
  - a. Undertake to conduct a risk assessment based on a student's routine
  - b. Plan for special events
  - c. Establish various emergency procedures for a range of contexts
  - d. Monitor food types within the range of contexts

### **Individual Anaphylaxis Management Plans**

- 4.2 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.
- 4.3 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:
  - a. Information about the diagnosis, including the type of allergy or allergies the student has (based on a diagnosis from a medical practitioner).
  - b. 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.
  - c. The name of the person/s responsible for implementing the strategies.
  - d. Information on where the student's medication will be stored.
  - e. The student's emergency contact details.
  - f. An emergency procedures plan (ASCIA Action Plan), provided by the parent, that:
    - i. Sets out the emergency procedures to be taken in the event of an allergic reaction;
    - Is signed by a medical practitioner who was treating the child on the date the practitioner signs the emergency procedures plan; and
    - iii. Includes an up to date photograph of the student.
- 4.4 The student's individual management plan will be reviewed, in consultation with the student's parents/ carers:
  - a. Annually, and as applicable,
  - b. If the student's condition changes, or
  - c. Immediately after a student has an anaphylactic reaction at school
  - d. Where 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.
- 4.5 It is the responsibility of the school to:
  - a. Provide ready access to the adrenaline auto-injectors supplied by parents.

- The first-aid room and Principal's office will be used for this purpose.
- b. Purchase additional adrenaline auto-injectors for general use and as a back up to those supplied by parents. This will be arranged by the Principal. The purchase of these additional adrenaline auto-injections will be determined by the number of students identified as at risk.
- c. Monitor the general life of each of these auto-injection devices. Expiry normally takes place after 12 months and will be replaced at this time or after use at the school's expense.
- d. Plan ahead for special activities or special occasions such as excursion, incursions, sports days, camps and parties. The school will work with parents/carers to provide appropriate food for the student.
- e. Make available a sufficient supply of adrenaline auto-injectors at specified locations at the school including common areas and for such events as listed above.
- 4.6 It is the responsibility of the parent to:
  - a. Provide the emergency procedures plan (ASCIA Action Plan).
  - b. Provide the school with an adrenaline auto-injector that is current and not expired.
  - c. Inform the school if their child's medical condition changes, and if relevant provide an updated emergency procedures plan (ASCIA Action Plan).
  - d. 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.

#### **Communication Plan**

- 4.7 The Principal will be responsible for ensuring that a communication plan is developed to provide information to all staff, students and parents about anaphylaxis and the school's anaphylaxis management policy. The communication plan will include information about what steps will be taken to respond to an anaphylactic reaction by a student in a classroom, in the school yard, on school excursions, on school camps and special event days. In the event of an off-site or out of school activity, the student will be flagged on the attendance role with staff provided both personal Action Plan and Epi-Pen.
- 4.8 Volunteers and casual relief staff of students at risk of anaphylaxis will be informed of students at risk of anaphylaxis and their role in responding to an anaphylactic reaction by a student in their care. Each will be provided the School's Communication Plan that will guide them accordingly with a complete and up to date list of students at risk of anaphylaxis.
- 4.9 All staff will be briefed once each semester by a staff member who has up to date anaphylaxis management training on:
  - a. The School's Anaphylaxis Management Policy;
  - b. The causes, symptoms and treatment of anaphylaxis;
  - c. The identities of students diagnosed at risk of anaphylaxis and where their medication is located;
  - d. How to use an auto-adrenaline injecting device; and
  - e. The School's first aid and emergency response procedures.

## **Staff Training**

- 4.10 The Principal will ensure that all teachers and other school staff who conduct classes which students at risk of anaphylaxis attend, or give instruction to students at risk of anaphylaxis must have up to date training in an anaphylaxis management training course. All training will meet the requirements of Ministerial Order 706.
- 4.11 Staff will also participate in two briefings over the course of the academic year in a presentation conducted by the School Anaphylaxis Supervisor. First of these briefings will take place at the beginning of the academic year. These briefings must include but not limited to:
  - a. The School's Anaphylaxis Management Policy
  - b. The causes, symptoms and treatment of anaphylaxis
  - c. The identities of students at risk of anaphylaxis, the details of their medical condition, and where their medication is located
  - d. The School's general first aid and emergency response procedures
  - e. The location of, and access to, adrenaline auto injectors that have been provided by parents or purchased by the school for general use.
- 4.12 The Principal will ensure that these briefings take place as planned to instil a level of confidence for the whole community. At other times while the student is under the care or supervision of the school, including excursions, yard duty, camps and special event days, the Principal must ensure that there is a sufficient number of staff present who have up to date training in an anaphylaxis management training course.
- 4.13 The Principal will identify other school staff to be trained based on a risk assessment. This will include Student Service staff and all other campus staff who interact directly with students. Training will be provided to these staff as soon as practicable after the student enrolls. Wherever possible, training will take place before the student's first day at school. Where this is not possible, an interim plan will be developed in consultation with the parents. In many schools this will mean that the majority or all staff will need to be trained.
- 4.14 One staff member will be designated as School Anaphylaxis Supervisors. These staff will:
  - a. Have an up to date Anaphylaxis Certificate (10313NAT Course in Anaphylaxis Awareness or similar).
  - b. Complete the course in "Verifying the Correct Use of Adrenaline Auto-injector Devices" (22303VIC).
  - c. Administer competency checks to assess their colleagues' ability to use an autoinjector (EpiPen).
- 4.15 All school staff will complete the online ASCIA Anaphylaxis e-training for Victorian Schools and then be verified by the School Anaphylaxis Supervisors as competent in using an autoinjector (EpiPen).

### **Emergency Response**

- 4.16 The school's approach to responding to an anaphylaxis reaction is interwoven with that of its First Aid policy. It is a requirement that all emergency, First Aid and a student's ASCIA Action response procedures are followed as documented.
- 4.17 In the event of an emergency in relation to an anaphylactic reaction the school will have available:
  - a. A complete and up to date list of students at risk of anaphylaxis as provided by either the Principal or Head of School;

- Details of individual anaphylaxis management plans and ASCIA plans located with the Principal's Office during on-site activities as well as Off-Site Activities by the coordinating teacher;
- c. Adrenaline Auto-Injectors stored on site in Principal Office's and High School Staffroom. For off-site activities the coordinating teacher to take responsibility of care and storage as documented and prepared through the Risk Management Plan; and
- d. Sufficiently trained staff is available to supervise students who are identified as at risk for off-site activities.

### **Emergency procedures**

- 4.18 In the event of a student experiencing an anaphylactic reaction,
  - a. Where possible they are to be moved to the sick bay where they can be treated appropriately;
  - b. Instruct the nearest person to locate the Principal, Head of School or First Aid Officer;
  - c. If a student has already been identified as anaphylactic then the student's ASCIA Action Plan should be implemented, and where possible staff with training in the administration of the EpiPen, should administer the EpiPen;
  - d. If a student has had a severe allergic reaction but has not yet been previously diagnosed with the allergy or as being at risk of anaphylaxis, 000 should be called immediately;
  - e. Principal, Head of School & First Aid Officer designated to collect student's adrenaline auto-injector and individual ASCIA Action Plan for Anaphylaxis;
  - f. Ambulance should be called immediately by either the Principal, Head of School or First Aid Officer;
  - g. Contact made with student's emergency contacts;
  - h. Student should be reassured and comforted through the process of administering the EpiPen and its after effects;
  - Where there is no marked improvement and severe symptoms are present, a second injection may be administered after 5-10 mins if available;
  - j. During off-site activities, the same procedures to be followed as supported by Risk Assessment procedures and arrangements for the possibility of an anaphylactic response.

#### **Post-Incident Support**

- 4.19 Beyond any event as described above, the school will directly monitor the student in their recovery of such an allergic reaction:
  - a. The student's ASCIA Action Plan should be reviewed in assessing whether any aspect of this plan should be amended. This may require consultation with both medical practitioner and family.
  - b. A debriefing of the specific staff involved, particularly the staff member at the scene of the event.
  - c. A critical incident report to be completed the staff member directly involved as soon as possible following the event. The report then needs to be received directly by the Principal.

d. The School's Policy to be reviewed evaluating the response procedure executed to determine its effectiveness.

### **Risk Management**

4.20 It will be the responsibility of the Principal to complete an annual Risk Management checklist.

## **Policy Review**

4.21 The school's policy will be reviewed both the end of each school year, and where there has been a specific critical incident event.

## **Version Control and Accountable Officers**

It is the joint responsibility of the Implementation Officer and Responsible Officer to ensure compliance with this policy.

| Responsible Officer     | School Principal |
|-------------------------|------------------|
| Implementation Officers | All school staff |
| Review Date             | 12/08/2021       |

## Approved by

School Council

#### **Associated Documents**

Anaphylaxis-Communication-Plan

**Emergency Management Plan** 

HGS Workplace Health and Safety Strategy

Holmes Grammar School Staff Manual

Key Documents Development and Review Policy and Procedure

Safe Environment Policy and Procedure - Grammar School

| Version | Brief Description of the Changes   | Date Approved | Effective Date |
|---------|--|---------------|----------------|
| 1       | New Policy   | 01/07/2008    | 01/07/2008     |
| 2       | <ul> <li>The inclusion of Communication<br/>Plan</li> <li>Staff training requirement</li> <li>Appointment and Training of<br/>School Anaphylaxis Supervisors</li> </ul>  | 09/08/2015    | 09/08/2015     |
| 3       | <ul> <li>Statement indicating school's compliance with amendments by DET</li> <li>Reference procedure in relation to offsite activities</li> <li>Availability of Epi-pens in all contexts</li> <li>Replacement of Epi-pens</li> <li>Addition of Communication Plan and associated strategies</li> <li>Procedures for notification to inform volunteers and casual</li> </ul> | 12/08/2021    | 12/08/2021     |

| staff of students identified as anaphylactic  Identified responsibility of Principal for training of staff |  |  |
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