



# Swinburne Senior Secondary College

## Anaphylaxis Management Policy

### Definition of Anaphylaxis

Anaphylaxis is a severe and sudden allergic reaction when a person is exposed to an allergen. The most common allergens in school-aged children are eggs, peanuts, tree nuts (e.g. cashews), cow's milk, fish and shellfish, wheat, soy, certain insect stings and medications.

### Rationale

The key to prevention of anaphylaxis in schools is knowledge, awareness and planning.

Under the Ministerial Order 706-Anaphylaxis Management in Schools, Swinburne Senior Secondary College has the following in place to manage students with Anaphylaxis:

- An Anaphylaxis Management Plan for each student, developed in consultation with the student's parents/carers and medical practitioner.
- Prevention strategies for in-school and out-of-school settings.
- Communication Plan to raise staff, student and school community awareness about anaphylaxis and the school's policies.
- Regular training and updates for school staff in recognising and responding appropriately to an anaphylactic reaction, including competently administering an Adrenaline Autoinjector.

Swinburne Senior Secondary College uses Ministerial Order 706-Anaphylaxis Management in Schools and the Anaphylaxis Guidelines for Victorian Government Schools to assess and review their current management policies and practices.

### Communication Plan

#### Raising Staff Awareness

Information regarding training requirements for school staff is detailed below in Anaphylaxis Training Requirements.

The Principal will provide information to all staff (including specialist staff, new staff, sessional staff, canteen staff and office staff) so that they are aware of students who are at risk of anaphylaxis, the student's allergies, the school's management strategies and first aid procedures. This can include providing copies or displaying the student's ASCIA Action Plan in canteens, classrooms and staff rooms

The Daily Organiser will provide similar information for casual replacement teachers.

#### Raising Student Awareness

Peer support is an important element of support for students at risk of anaphylaxis.

School Staff can raise awareness in School through fact sheets or posters displayed in hallways, canteens and classrooms. Class teachers can discuss the topic with students in class, with a few simple key messages, outlined in the following:

#### Student messages about anaphylaxis

1. Always take food allergies seriously – severe allergies are no joke.
2. Don't share your food with friends who have food allergies.
3. Wash your hands after eating.
4. Know what your friends are allergic to.
5. If a school friend becomes sick, get help immediately even if the friend does not want to.

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| 6. Be respectful of a school friend's Adrenaline Autoinjector.        |
| 7. Don't pressure your friends to eat food that they are allergic to. |

Source: Be a MATE kit, published by Anaphylaxis & Allergy Australia.

It is important to be aware that a student at risk of anaphylaxis may not want to be singled out or be seen to be treated differently. All staff should also be aware that bullying of students at risk of anaphylaxis can occur in the form of teasing, tricking a student into eating a particular food or threatening a student with the substance that they are allergic to, such as peanuts. Staff should talk to the students involved so they are aware of the seriousness of an anaphylactic reaction. Any attempt to harm a student diagnosed at risk of anaphylaxis must be treated as a serious and dangerous incident and dealt with in line with the School's anti-bullying policy.

Schools can refer to the Bully Stoppers website, an anti-bullying resource for ideas and strategies for dealing with bullying situations. Further information about Bully Stoppers is available at: <http://www.education.vic.gov.au/about/programs/bullystoppers/Pages/default.aspx>

### Working with Parents

Parents or carers are required to advise the college on enrolment or as they become aware of their child's allergy. They are required to complete the necessary Anaphylaxis or Allergy Management Plan, and complete the necessary Medication Authority Form and to provide any required medications. (see Appendices A and B)

- Inform the school, either at enrolment or diagnosis, of the student's allergies, and whether the student has been diagnosed as being at risk of anaphylaxis
- Obtain information from the student's medical practitioner about their condition and any medications to be administered. Inform school staff of all relevant information and concerns relating to the health of the student
- Meet with the school to develop the student's Anaphylaxis Management Plan, including if the Adrenaline Autoinjector will be kept in the first aid room or with the student
- Provide an ASCIA Action Plan, or copies of the plan to the school that is signed by the student's medical practitioner and has an up to date photograph
- Provide the Adrenaline Autoinjector and any other medications to the school
- Replace the Adrenaline Autoinjector before it expires
- Assist school staff in planning and preparation for the student prior to school camps, field trips, incursions, excursions or special events such as class parties or sport days
- Supply alternative food options for the student when needed
- Inform staff of any changes to the student's emergency contact details
- Participate in reviews of the student's Anaphylaxis Management Plan, e.g. when there is a change to the student's condition or at an annual review.

NOTE \* students who do not have a valid Adrenaline Autoinjector will not be permitted to attend school until such time that one has been lodged with the school nurse.

### Raising Community Awareness

The school will take reasonable steps to raise awareness about anaphylaxis in the school community so that there is an increased understanding of the condition. This will normally be done by providing information in the school newsletter. A copy of the school's Anaphylaxis Management Policy will be published on the website under Policies.

Parent Information Sheets that promote greater awareness of severe allergies can be downloaded from the Royal Children's Hospital website at: [www.rch.org.au/allergy/parent\\_information\\_sheets/Parent\\_Information\\_Sheets/](http://www.rch.org.au/allergy/parent_information_sheets/Parent_Information_Sheets/)

### ***Anaphylaxis Training Requirements***

The following School Staff will be appropriately trained:

- School Staff who conduct classes that students with a medical condition that relates to allergy and the potential for anaphylactic reaction; and
- Any further School Staff that are determined by the Principal.

The identified School Staff will undertake the following training:

- an Anaphylaxis Management Training Course in the three years prior; and
- participate in a briefing, to occur twice per calendar year (with the first briefing to be held at the beginning of the school year) on:
  - o the School's Anaphylaxis Management Policy;
  - o the causes, symptoms and treatment of anaphylaxis;
  - o the identities of the students with a medical condition that relates to an allergy and the potential for anaphylactic reaction, and where their medication is located;
  - o how to use an Adrenaline Autoinjector, including hands on practise with a trainer Adrenaline Autoinjector device;
  - o the School's general first aid and emergency response procedures; and
  - o 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 in the last 12 months.

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 student's 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 a sufficient number of School Staff present who have successfully completed an Anaphylaxis Management Training Course in the three years prior.

Note: A video has been developed and can be viewed from <http://www.education.vic.gov.au/school/teachers/health/Pages/anaphylaxischl.aspx>

### **Anaphylaxis Management Procedures**

#### **Requirements of the Principal**

School principals have overall responsibility for implementing strategies and processes for ensuring a safe and supporting environment for students at risk of anaphylaxis. Principals should:

- **Actively seek information to identify students with severe life threatening allergies at enrolment**
- Conduct a risk assessment of the potential for accidental exposure to allergens while the student is in the care of the school
- Meet with parents/carers to develop an Anaphylaxis Management Plan for the student. This includes documenting practical strategies for in-school and out-of-school settings to minimise the risk of exposure to allergens, and nominating staff who are responsible for their implementation
- Request that parents provide an ASCIA (Australasian Society of Clinical Immunology and

Allergy) Action Plan that has been signed by the student's medical practitioner and has an up to date photograph of the student

- Ensure that parents provide the student's Adrenaline Autoinjector and that it is not out of date
- Ensure that staff obtain training in how to recognise and respond to an anaphylactic reaction, including administering an Adrenaline Autoinjector
- Develop a communication plan to raise student, staff and parent awareness about severe allergies and the school's policies
- Provide information to all staff (including specialist staff, new staff, sessional staff, canteen staff and office staff) so that they are aware of students who are at risk of anaphylaxis, the student's allergies, the school's management strategies and first aid procedures. This can include providing copies or displaying the student's ASCIA Action Plan in canteens, classrooms and staff rooms
- Ensure that there are procedures in place for informing casual relief teachers of students at risk of anaphylaxis and the steps required for prevention and emergency response
- If schools use an external canteen provider, ensure that the provider can demonstrate satisfactory training in the area of anaphylaxis and its implications on food handling practices
- Allocate time, such as during staff meetings, to discuss, practice and review the school's management strategies for students at risk of anaphylaxis. Practice using the trainer Adrenaline Autoinjector regularly
- Encourage ongoing communication between parents/carers and staff about the current status of the student's allergies, the school's policies and their implementation
- Review the student's Anaphylaxis Management Plan annually or if the student's circumstances change, in consultation with parents.

### Signs and Symptoms

All reactions should be taken seriously, but not all require adrenaline. Signs include:

- Hives/rash
- Tingling feeling around mouth, abdominal pain, vomiting or diarrhoea Localised swelling
- Facial swelling
- Cough or wheeze
- Difficulty in breathing or swallowing Loss of consciousness or collapse Breathing stops

### If an Allergic Reaction Occurs

The following support and procedures are required:

1. Someone to stay with the student
2. Someone to get the Adrenaline Autoinjector and apply it
3. Someone to call the ambulance 000 and provide details to them:
  - location of emergency nearest intersection nearest gate entrance
  - the number of the phone for ambulance to contact the school for further advice
  - the age of the student
  - ascertain whether the patient conscious
  - ascertain whether the patient breathing
4. Someone to direct the ambulance
5. Someone to supervise other students in the emergency area

### Using an Adrenaline Autoinjector

- Remove wrapping and the pale grey safety cap from the base of the pen
- Place black tip on outer thigh at right angles to the leg
- Push hard and hold in place. Count slowly to 15 ( 15 seconds). Remove Adrenaline Autoinjector from thigh. The needle will be visible
- Massage the injection site for 10-20 seconds
- Monitor student's breathing and condition until ambulance arrives

- Apply lifesaving procedures should breathing fail

#### Post Incident Actions

- Contact parents/carers or Emergency Contacts to advise them of the incident
- Request a replacement of the Adrenaline Autoinjector for possible future need
- Record incident in student injury register
- Conduct post critical incident review with staff and students involved

***Endorsed by School Council and effective as of: (insert date)***

**Reviewed Annually**

**Appendix A:  
Swinburne Senior Secondary College  
Anaphylaxis Management Plan**

**To be completed by the principal/ nominee based on medical practitioner information provided by the parent/carer**

Student's name:		
Date of birth:	Year level:	
Severely allergic to:		
Other health conditions:		
Medication at school:		
Parent/carer contact:	Parent/carer information (1)	Parent/carer information (2)
	Name:	Name:
	Relationship:	Relationship:
	Home phone:	Home phone:
	Work phone:	Work phone:
	Mobile:	Mobile:
	Address:	Address:
Other emergency contacts (if parent/carer not available):		
Medical practitioner contact:		
Emergency care to be provided at school:		
EpiPen® storage:		
The following Anaphylaxis Management Plan has been developed with my knowledge and input and will be reviewed on .....		
Signature of parent:		Date:
Signature of principal (or nominee):		Date:

