



Anaphylaxis Management Policy and Procedures

1. Commitment

All students who attend Victoria University Secondary College have a right to feel and to be safe. The wellbeing and safety of all students in our care is our first priority and we have zero tolerance to child abuse. The protection of students is the responsibility of everyone who is employed at, or is engaged by Victoria University Secondary College in child-connected work. To ensure the safety and best interests of all students, we take into account the needs of those with an Aboriginal or Torres Strait Islander heritage, those from culturally and/or linguistically diverse backgrounds and those with a disability.

2. Overview

2.1 Victoria University Secondary College complies with Ministerial Order 706 and the Anaphylaxis guidelines - A resource for managing severe allergies in Victorian Schools as published by the Department of Education and Training.

2.2 In the event of an anaphylactic reaction, Victoria University Secondary College first aid and emergency response procedures as well as the procedures in this policy, the student's ASCIA plan and Individual Anaphylaxis Management Plan (IAMP) will be followed.

2.3 The Australasian Society of Clinical Immunology and Allergy (ASCIA) plan is a device specific plan outlining the type of auto injector prescribed and is completed by the student's medical practitioner.

2.4 Anaphylaxis is a severe, rapidly progressive allergic reaction that is potentially life threatening, with the worst case scenario being death in 3-5 minutes. Anaphylaxis always requires an emergency response. 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.

2.5 Eight foods cause 95% of food allergic reactions in Australia and can be common causes of anaphylaxis. Main causes include, but are not limited to:

- peanuts
- tree nuts (ie. hazelnuts, cashews, almonds, walnuts, pistachios, macadamias, brazil nuts, pecans, chestnuts and pine nuts);
- eggs;
- cow's milk;
- wheat;
- soy;
- fish and shellfish (eg. oysters, lobsters, clams, mussels, shrimps, crabs and prawns); and
- sesame seeds.

Other common allergens include some insect stings, ant stings, tick bites, some medications (eg. antibiotics and anaesthetic drugs) and latex (bandaids, balloons, gloves).

2.6 Adrenaline given through an auto-injector to the muscle of the outer middle thigh is the most effective first aid treatment for anaphylaxis as it raises the heart rate significantly, causing an increase in blood flow.



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2.7 The key to prevention of anaphylaxis in schools is knowledge of the students who have been diagnosed at risk; awareness of triggers (allergens) and; prevention of exposure to these triggers.

2.8 Victoria University Secondary College acknowledges that the management of a student diagnosed at risk of anaphylaxis is a joint responsibility of the school and staff, the student, the student's parents/guardians and the student's Medical Practitioner.

2.9 Victoria University Secondary College is "allergy aware" and not a 'Nut Free School'. A nut free environment is not recommended as it is impossible to guarantee, which potentially provides a false sense of security to students, parents/guardians and staff.

2.10 A 'Nut Free School' environment does not protect students whose allergen may be egg, insect bite etc. A 'Nut Free School' environment does not enable the school to prepare a student with life skills in teaching them how to manage their risk of anaphylaxis.

2.11 Age appropriate education of children with anaphylaxis is primarily the responsibility of parents/guardians, but the college has a role to play in reinforcing awareness and educating staff.

3. Purpose

To ensure that the College can:

- Ensure that the School Principal and School Staff, parents, students and the broader community remember that minimization of the risk of anaphylaxis is everyone's responsibility
- Support parents/guardians in the management of their child's severe allergy
- Support students in the management of their severe allergy
- Provide resources and training to staff enabling them to respond appropriately to an anaphylactic emergency
- Instill preventative measures to minimise the risk of exposure to an identified allergen
- Promote awareness of anaphylaxis within the school community
- Design and implement an Emergency Response Strategy as per DE&T guidelines.

4. Aims

Victoria University Secondary College fully complies with the guidelines set out in Ministerial Order 706. The school aims to minimise the risk of anaphylaxis occurring, and is committed to:

- Providing as far as practicable, a safe and supportive environment in which our students at risk of anaphylaxis can participate equally in all aspects of school life.
- Raise awareness about anaphylaxis and the School's Anaphylaxis Management Policy, in the school community.
- Engage with the parents/guardians of our students at risk of anaphylaxis, in assessing risks and developing risk minimisation strategies and management strategies for the student
- Ensuring that each staff member has adequate knowledge about allergies, anaphylaxis and the college's policies and procedures about responding to an anaphylactic reaction.



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5. Signs and Symptoms of Anaphylaxis

5.1. The symptoms of a mild to moderate allergic reaction can include:

- swelling of the lips, face and eyes;
- hives or welts;
- tingling mouth; and
- abdominal pain and/or vomiting (these are signs of a severe allergic reaction to insects).

5.2. Anaphylaxis (severe allergic reaction) can include:

- difficult/noisy breathing;
- swelling of the tongue;
- swelling/tightness in the throat;
- difficulty talking and/or hoarse voice;
- wheezing or persistent coughing;
- persistent dizziness or collapse; and
- young children may appear pale and floppy.

Symptoms usually develop within 10 minutes to several hours after exposure to an allergen, but can appear within a few minutes.

6. Role and Responsibilities of the Principal

6.1. The Principal has overall responsibility for implementing strategies and processes for ensuring a safe and supporting environment for students at risk of anaphylaxis. The Principal will:

- 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.
- Ensure that the First Aid Officer meets with parents/carers to develop an Anaphylaxis Management Plan for the student (see Appendix A). 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 (see Appendix B).
- Ensure that parents provide the student's EpiPen® and that it is not out of date.
- Ensure that the school has back-up EpiPens which are stored correctly and are not out of date.
- Conduct staff training in an accredited anaphylaxis management training course that meet the requirements of Ministerial Order 706. These are:
 - ASCIA Anaphylaxis e-training for Victorian Schools followed by a competency check by the School Anaphylaxis Supervisor AND 2 staff per campus (4 in total) Course in Verifying the Correct Use of Adrenaline Autoinjector Devices 22303VIC. These staff are the School Anaphylaxis Supervisors who will conduct twice yearly briefings to staff where the first one is held at the beginning of the school year.



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- 22300VIC Course in First Aid Management of Anaphylaxis
- 10313NAT Course in Anaphylaxis Awareness
- Develop a communication plan to raise student, staff and parent awareness about severe allergies and the college's policies.
- Provide information to all staff so that they are aware of students who are at risk of anaphylaxis, the student's allergies, the college's management strategies and first aid procedures. This can include providing copies or displaying the student's ASCIA Action Plan in staff rooms, canteen kitchens, Food Technology offices and Gym offices, noting privacy considerations.
- 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.
- Ensure that any external canteen 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, practise and review the college's management strategies for students at risk of anaphylaxis. Practise using the trainer EpiPen® 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.

7. Role and Responsibilities of Staff

7.1. Staff who are responsible for the care of students at risk of anaphylaxis have a duty to take steps to protect students from risks of injury that are reasonably foreseeable. In addition to teaching staff, this may include administrators, canteen staff, casual relief staff, and volunteers. Members of staff are expected to:

- Know the identity of students who are at risk of anaphylaxis.
- Understand the causes, symptoms, and treatment of anaphylaxis.
- Obtain training in how to recognise and respond to an anaphylactic reaction, including administering an EpiPen®.
- Know the college's first aid emergency procedures and what your role is in relation to responding to an anaphylactic reaction.
- Know where the student's ASCIA Action Plan is and follow it in the event of an allergic reaction.
- Know where the student's EpiPen® and back-up EpiPens are kept. Remember that the EpiPen® is designed so that anyone can administer it in an emergency.
- Know and follow the prevention strategies in the student's Anaphylaxis Management Plan.
- Plan ahead for special class activities or special occasions such as excursions, incursions, sport days, camps and parties. Work with parents/carers to provide appropriate food for the student.
- 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 careful of the risk of cross-contamination when preparing, handling and displaying food.



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- Make sure that tables and surfaces are wiped down regularly and that students wash their hands after handling food.
- Raise student awareness about severe allergies and the importance of their role in fostering a school environment that is safe and supportive for their peers.

8. **Individual Anaphylaxis Management Plans**

8.1. Every student who has been diagnosed as at risk of anaphylaxis will have an individual Anaphylaxis Management Plan. The student's Anaphylaxis Management Plan will clearly set out:

- the type of allergy or allergies.
- the student's emergency contact details.
- practical strategies to minimise the risk of exposure to allergens for in-school and out of class settings, including:
 - » during classroom activities, including elective classes
 - » in canteens or during lunch or snack times
 - » before and after school, in the yard and during breaks
 - » for special events such as incursions, sport days, extra-curricular activities or college events
 - » for excursions and camps.
- the name of the person/s responsible for implementing the strategies.
- information on where the EpiPen® will be stored.

8.2. The Anaphylaxis Management Plan will also include an individual ASCIA Action Plan, which sets out the emergency procedures to be taken in the event of an allergic reaction. (ASCIA, the Australasian Society of Clinical Immunology and Allergy, is the peak body of immunologists and allergists in Australia).

8.3. It is the responsibility of parents/carers to complete an ASCIA Action Plan, in consultation with their child's medical practitioner, and provide a copy to the college. The ASCIA Action Plan must be signed by the student's medical practitioner, and have an up to date photograph of the student.

8.4. As a student's allergies may change with time, our college will ensure that the student's Anaphylaxis Management Plan and ASCIA Action Plan are kept current and reviewed annually with the student's parents/carers. When reviewed, parents will be expected to provide an updated photo of the child for the ASCIA Action Plan.

9. **Prevention Strategies**

9.1. The following prevention strategies will be in place within the college:

- A copy of each student's ASCIA Action plan will be displayed or accessible in the Senior Campus Administration Office, the Junior Campus Administration Office, the Food Technology offices, the Gym offices, the canteen kitchens and the main staffrooms at both campuses.
- EpiPens which are labelled for general use only in case of an emergency will be held in the Senior Campus Administration Office, the Junior Campus Administration Office, the Food Technology offices and the Gym offices. EpiPens must not be refrigerated or exposed to direct heat/sunlight.



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- Staff on yard duty will always have a college phone with them.
- Never give food from outside sources to a student who is at risk of anaphylaxis.
- Be aware of the possibility of hidden allergens in any classroom cooking activities, science and art classes (eg. egg, milk cartons and cereal boxes).
- The Daily Organisers will inform casual relief teachers of students at risk of anaphylaxis, preventative strategies in place and the college's emergency procedures.
- Volunteers who work with children at risk of anaphylaxis will be briefed about preventative strategies in place and the college's emergency procedures.

9.2. The following prevention strategies will be in place for excursions, camps and other off campus events:

- The students' EpiPens, action plans and a mobile phone must be taken to all off campus events.
- A staff member who has been trained in the recognition of anaphylaxis and the administration of the EpiPen must accompany students.
- Staff must have in place an emergency procedure that sets out clear roles and responsibilities in the event of an anaphylactic reaction.
- Staff should consult parents/carers in advance to discuss issues that may arise, eg. develop an alternative food menu or request that the parent/carer provide meals (if required).
- Camp venues must be advised in advance of any students with food allergies.
- Camp venues must be checked for mobile phone coverage.
- Use of other substances containing allergens should be avoided where possible.
- All staff present need to be aware if there is a student present who is at risk of anaphylaxis.
- Staff must be aware of local emergency services and know how to access them.
- The EpiPen should remain close to the student (and other students if appropriate) and staff must be aware of its location at all times.
- A back up EpiPen will be available in the first aid kit.
- Students with allergic reactions to insects should always wear closed shoes and long-sleeved clothing when outdoors.
- Cooking and art and craft activities should not involve the use of known allergens.

10. Communication Plan

10.1. The steps that must be taken when responding to an anaphylactic reaction will form part of this policy.

10.2. Procedures are in place to inform CRT's and preservice teachers of students at risk and their role in responding to a reaction.

10.3. Whole college meetings are held twice yearly to brief all staff on the following:

- a. The school's anaphylaxis management policy;
- b. Causes, symptoms and treatment of anaphylaxis;
- c. How to identify students at risk and location of EpiPens;
- d. Practise using the EpiPen;
- e. Emergency response procedures.

10.4. This policy will be published on the college intranet, Sharepoint.



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10.5. This policy will be communicated to parents and school community via the college website.

11. How to Respond to Anaphylaxis

If a child presents with symptoms of anaphylaxis:

- Lay the child flat (or allow them to sit). Do not allow them to stand or walk.
- Contact the School Anaphylaxis Supervisor (or a First Aid Officer if unavailable) to obtain an EpiPen, a back-up EpiPen and the child's Anaphylaxis Action Plan.
- Give EpiPen (for 10 seconds then massage injection site for 10 seconds).
- Phone ambulance on 000. Office staff will ensure the closest entry point to the student is accessible.
- The office will phone family/emergency contact.
- A further EpiPen dose may be given if no response after five minutes.
- Record the date and time of administration of the EpiPen.
- If in doubt, give the EpiPen.
- Never leave an unwell child alone.
- If uncertain whether it is asthma or anaphylaxis, give the EpiPen first, then asthma reliever.
- Commence CPR at any time if the child is unresponsive and not breathing normally.
- The child must be taken to hospital and the used EpiPen must go with the child.

While waiting for the ambulance:

- Keep the child lying down, legs slightly raised
- If breathing is difficult, they may sit up a little
- Do not ask them to get up or move them to a different location
- Stay and monitor the child and offer reassurance.

12. Review

In accordance with Ministerial Order 706, the Anaphylaxis Management Policy and Procedures will be reviewed annually and endorsed by school council.

13. Appendices

Appendix A: Anaphylaxis Management Plan template

Appendix B: ASCIA Action Plan for Anaphylaxis template