



## **ANAPHYLAXIS MANAGEMENT PLAN**

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## **1. ANAPHYLAXIS MANAGEMENT POLICY**

### **BACKGROUND**

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.

The key to preventing anaphylactic reactions at Darul Ulum College is awareness of those students who have been diagnosed as being at risk; awareness of triggers (allergens), and preventing exposure to these triggers. Partnership between the school and parents is important in ensuring that certain foods or items are kept away from the school.

Adrenaline given through an Adrenaline Auto-injector to the muscle of the outer mid-thigh is the most effective first aid treatment for anaphylaxis.

This Policy is to be read in conjunction with the College's First Aid Policy, Duty of Care Policy and Privacy Policy.

### **RATIONALE**

The safety and well-being of children who are at risk of anaphylaxis is a whole community responsibility. Therefore, at Darul Ulum College of Victoria, we will as far as practicable, provide a safe and healthy environment in which children at risk of anaphylaxis can participate equally in all aspects of the school's programs and activities.

Darul Ulum College is committed to fully comply with *Ministerial Order 706* and all associated guidelines on anaphylaxis management as published and amended by the Department. This Policy will apply to children enrolled at the school, their parents/guardians and staff.

### **AIMS**

1. 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 their schooling.
2. To raise awareness about anaphylaxis and the school's anaphylaxis management policy in the school community.
3. To engage with parents/carers of students at risk of anaphylaxis in assessing risks, developing risk minimisation strategies and management strategies for the student.
4. To ensure that each staff member has adequate knowledge about allergies, anaphylaxis and the school's policy and procedures in responding to an anaphylactic reaction.

## 2. PROCEDURES AND PROTOCOLS

### ASCIA Anaphylaxis Action Plans

2.1 It is the responsibility of the parents / guardians to provide the school with:

- An Action Plan based on the form approved by the Australasian Society of Clinical Immunology and Allergy (ASCIA) for any student diagnosed by a medical practitioner as being at risk of anaphylaxis. The Action Plan must be completed by a medical practitioner outlining the relevant information.

2.2 Parents must provide the school with an updated Action Plan:

- Annually;
- if the student's condition changes; and
- immediately after a student has an anaphylactic reaction at school.

2.3 The **Action Plans** must be displayed by the School Nurse in the following venues:

- Sick bay of the relevant sub-school
- Inside the child's medication container along with the Auto-injector
- Child's classroom
- Staff rooms
- Canteen
- Heads' of School offices
- Daily Organisers' offices

2.4 The **Daily Organisers** will provide the Casual Relief Teachers with a file consisting of the following:

- a copy of the students' Management Plans
- a copy of the students' Action Plans
- a copy of the schools Anaphylaxis Management Policy & First Aid Policy

2.5 The School Nurse will contact parents /guardians of diagnosed students to provide updated ASCIA plans and an Auto-injector at the beginning of Term One each year. The Nurse will report to the relevant Head of School if they are unable to reach the parent.

## Individual Management Plans

- 2.6 The respective Heads of School with the support of the School Nurse will ensure that an individual management plan is developed (as per Ministerial Order No. 706, Part C7) in consultation with parents, for any student who has been diagnosed by a medical practitioner as being at risk of anaphylaxis. The Management Plan will be guided by the student's Action Plan.
- 2.7 The Management Plan will be in place as soon as practicable after the student enrolls, and where possible, before their first day of school.
- 2.8 The Management Plan will set out the following:
- information about the diagnosis, including the type of allergy or allergies the student has (based on diagnosis from a medical practitioner);
  - 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 camp and excursions
- 2.9 The student's individual Management Plan will be reviewed by the Head of School or his/her representative (School Nurse), in consultation with the student's parents/carers:
- annually;
  - if the student's condition changes;
  - **before the student participates in an excursion, incursion or camp; and**
  - immediately after a student has an anaphylactic reaction at school.
- 2.10 In the event of an anaphylactic reaction, Darul Ulum College's first aid and emergency response procedures and the student's individual Management Plan must be implemented.

## Procedures for Excursions, Camps, Sporting and Extra-Curricular Activities

- 2.11 Prior to any excursion / incursion or camp, the teacher in-charge must fill in the Excursion/Incursion Proposal Form which includes a checkbox pertaining to students with an anaphylaxis plan and kit prompting the teacher to account for them.
- 2.12 It is the responsibility of the **teacher in-charge** (*the teacher in-charge is the teacher who submits the Excursion / Incursion Proposal Form or the coordinator organising the event e.g. PE Coordinator*) to:
- Take the individual student's Action Plan, Management Plan and the student's anaphylaxis kit to any excursion, off-site activity or sporting event
  - Include any student diagnosed at risk in the Risk Management Checklist along with the risk minimisation strategies
  - Familiarises himself / herself with the triggers and suggested treatment for each student as per the outline of the student's Management Plan
  - Inform all accompanying teachers/ staff of each child's situation and their Management Plan

- Takes an additional Auto-injector (general use) from the school as a precautionary measure

2.13 For all **camp**s, it is the joint responsibility of the Events Coordinator and the relevant Head of School to ensure that the Action Plan(s), Management Plan(s) and the students' anaphylaxis kit(s) are accompanied by the teacher in-charge of the camp. They will also ensure that the above-mentioned points are actioned and that the camp site service providers are made aware of the situation.

2.14 When an anaphylaxis kit is collected for any extra-curricular activity, the responsible staff member must sign in the assigned **Auto-injector Register**, which is kept in the sick bays. The Register must also be signed again upon returning the kit.

### 3. COMMUNICATION PLAN

3.1 The Heads of School with the support of the School Nurses will be responsible for ensuring that a communication plan is developed to provide relevant information to all staff, students and parents about anaphylaxis and the school's anaphylaxis management plan.

3.2 On a periodical basis, usually once each semester, information pertaining to the schools Anaphylaxis Management Policy and general information about the symptoms of anaphylaxis and strategies to mitigate risks will be included in the College's newsletters, on the Parent Page of the Learning Management System. Students will be briefed on this during assemblies once every term by the school nurses to create awareness among students. In addition to this, the school nurses are expected to conduct a briefing session with the class that has diagnosed students at the beginning of semester one and semester two.

3.3 The induction sessions conducted for new staff members, casual relief teachers and volunteers will include a briefing on the College's Anaphylaxis Management Policy and they will be provided with a school safety kit consisting of all pertinent policies.

3.4 Teachers are advised to remind their students about the seriousness of food allergies, the specific allergies of a student in the class (where applicable) and that sharing of food is not allowed in school.

### 4. STAFF TRAINING

#### Training and Briefing Requirements

4.1 The Heads of School will ensure that all staff involved in the care of students at risk of anaphylaxis, including class teachers, office staff, casual relief teachers, canteen staff, administrative and other non-teaching staff will be briefed once each semester (with the first briefing to be held at the beginning of the school year) by the School Nurse who has up-to-date anaphylaxis management training (trained in the last 12 months) on:

- the school's Anaphylaxis Management Policy;
- the causes, symptoms and treatment of anaphylaxis;
- the preventative strategies in place;
- the identities of students diagnosed as at risk of anaphylaxis and where their medication is located;
- the location of the personal Auto-injectors for students (labelled with the student's name)
- the location of Auto-injectors purchased by the school for general use;
- how to use an Adrenaline auto injecting device; and
- the school's first aid and emergency response procedures.

4.2 The Heads of School will ensure that while the student is under the care or supervision of the school – including yard duty, excursions, camps and special event days, there is a sufficient number of school staff present who have successfully completed an Anaphylaxis Management Training Course within the three-year period.

## 5. SCHOOL MANAGEMENT AND EMERGENCY RESPONSE

5.1 The school will maintain a complete and up-to-date list of students identified as having a medical condition that relates to allergy and the potential for an anaphylactic reaction.

5.2 Teachers and school staff, who are responsible for the care of students at risk of anaphylaxis, will be trained on how to recognise and respond to an anaphylactic reaction, including administering an Adrenaline Auto-injector.

5.3 When the student is under the care or supervision of the school – including recess and lunch breaks, excursions, camps and special event days, the Heads of School will ensure that there are sufficient numbers of staff present who have up-to-date training in an anaphylaxis management training course.

5.4 The following actions must be taken by the teacher or staff member when responding to a student known to the school as being diagnosed at risk of anaphylaxis:

- **Follow the procedures and instructions outlined in the student's **Individual Management Plan and ASCIA Action Plan**;**
- **The Head of School or the representative (School Nurse) must contact the parent to review the Management Plan and to seek a replacement for the Auto-injector**
- **An Auto-injector from the school will be assigned to that student until the parent sends the replacement**
- **The Head of School will request the parent to review and update the Action Plan with the medical practitioner and provide the school with the updated version**

5.5 The following actions must be taken when responding to a student who is **NOT** known to the school as being diagnosed at risk of anaphylaxis but is displaying symptoms of a reaction. The supervising teacher or staff member must:

- **Contact the ambulance** immediately or may instruct someone else to contact the ambulance
- Reach out for a general **use auto-injector** and administer it
- Administer procedures outlined in the **First Aid Policy**
- Contact the School Nurse
- Contact the student's parents
- Report the incident to the Head of School or Principal for follow up and review in a timely manner

## 6. PREVENTION STRATEGIES

The classroom teacher and/or other teachers and staff members are responsible for the following:

- 6.1 Use non-food treats / rewards at all times. Food treats are not allowed as per school policies.
- 6.2 Remind students not share food with anyone else, particularly with students identified at risk
- 6.3 Conduct regular discussions with students about the importance of washing hands, and maintaining good hygiene practices
- 6.4 Liaise with parents/carers about food related activities which have been approved by the relevant Head of School in advance. Provide parents with the ingredients of the food items used for the school activity
- 6.5 Ensure that students participating in a school approved food activity have submitted the parental consents in advance
- 6.6 Be aware of the possible hidden allergens in cooking, food technology, science and art classes (e.g. eggs, milk cartons, latex) and try avoiding them at all times
- 6.7 Parents are responsible to provide their child with food on all school days
- 6.8 Students with a Management Plan must avoid purchasing food items from the school's canteen.

## 7. STORAGE AND ACCESSIBILITY OF ADRENALINE AUTOINJECTORS

Children diagnosed as being at risk of anaphylaxis are prescribed adrenaline in an auto-injector commonly known as the EpiPen® or AnaPen®. Children under 20kg are prescribed an EpiPen® junior, which has a smaller dosage of adrenaline. The EpiPen® and EpiPen® Junior are designed so that anyone can use them in an emergency.

- 7.1 A student's Auto-injector is stored in an unlocked, central and easily accessible place away from direct heat. The locations of the student Auto-injectors are as follows:
  - Males Sick Bay – in the cupboard under the sink

- Females Sick Bay – adjacent to the female reception

7.2 The school will also provide Auto-injectors clearly labelled for **general use** in the above-mentioned locations as well as in the:

- Multi-Purpose Hall (downstairs)
- Building D Staff Tea Room - Inside the First Aid Kit
- Prayer Hall (boys)
- Building A (boys) cupboard adjacent to the staircase
- Building A (boys) corridor upstairs

7.3 The number of additional Auto-injectors will be determined by the Heads of School taking into consideration:

- the number of students enrolled at the school who have been diagnosed as being at risk of anaphylaxis;
- the efficient accessibility of Auto-injectors

## **8. ANNUAL RISK MANAGEMENT CHECKLIST**

8.1 The School Nurses, in consultation with the Principal, will complete the Annual Risk Management Checklist as published by the Department of Education and Early Childhood Development. The Checklist must be completed in February of each year.

## **9. RESPONSIBILITIES**

The **Principal** is responsible for the following:

- Review, update and endorse the school's Anaphylaxis Management Policy as and when required
- Ensures that the Policy is relayed to staff, parents and students and that it is implemented effectively
- Ensures that the school has a sufficient supply of Auto-injectors taking into account the number of students at risk and the onsite and off-site activities
- Ensures that professional and accredited training is provided to staff on a three-year interval basis
- Ensures that bi-annual briefing sessions are conducted by the school nurses or a staff member who has received training within the last twelve months
- Completes the Annual Risk Management Checklist

The **Heads of School** are responsible for the following:

- Ensure that the Individual Management Plans are submitted by parents and reviewed on an annual basis and/or after an anaphylactic reaction
- Ensure that Action Plans and Management Plans are provided to teachers and relevant staff
- Ensure that the teacher in-charge of an excursion or the coordinator are well acquainted with the needs of students at risk and that their Management Plans and Auto-injectors accompany the student



- Ensure that staff know the locations of the Auto-injectors
- Ensure that students with anaphylaxis are not unlawfully discriminated against
- Ensure that the Daily Organisers provide the Casual Relief Teachers with all the relevant information as outlined in this Policy
- Ensure that the Risk Management Checklist for any excursion, extra-curricular activity or camp accounts for students at risk
- Ensure that a reasonable number of trained staff accompany students at risk on excursions, camps and sporting events
- Ensure that a reasonable number of trained staff are rostered for yard duties
- Maintain & update a database of staff members who have completed the accredited Anaphylaxis training course based on a three-year interval
- Maintain & update a database of staff members who attended the bi-annual briefings
- Report and consult with the Principal on all areas requiring attention

The **School Nurses** are responsible for the following:

- Contact parents to obtain the student's Action Plan on an annual basis, reviewed and dated by the medical practitioner in a timely manner (Beginning of school year)
- Contact parents for the review of the Individual Management Plan on an annual basis (Beginning of school year)
- Replace any used or nearly expired Auto-injectors for general use in a timely manner
- Seek a replacement Auto-injector from parents upon usage or if Auto-injector close to expiry date
- Conduct bi-annual staff meetings and provide staff with relevant information
- Distribute the Individual Management Plans and Action Plans to relevant personnel as outlined in this Policy
- Report to the relevant Head of School any foreseeable concerns

The **Events Coordinator** is responsible for the following:

- Ensures that s/he are well acquainted with the students' specific triggers and treatment
- Prepares and submit a Risk Management Assessment Checklist to the relevant Head of School prior to any camp
- Informs the camp service provider of any conditions and provide them with a copy of the Individual Management Plan
- Ensures that the student's specific Auto-injector, Management Plan and Action plan accompany the student to the camp site
- Ensures that an additional Auto-injector for general use is also taken as a precautionary measure
- Ensures the first-aid kit and all necessary medication is taken by the teacher in-charge
- Ensures that accompanying teachers / staff are informed of any conditions

**Teachers** are responsible for the following:

- Acquainting themselves with the school's Anaphylaxis Management Policy, First Aid Policy and Duty of Care Policy
- Attend the bi-annual school briefing on anaphylaxis
- Complete an anaphylaxis management training course every three years as and when provided by the school
- Have basic knowledge in administering an Auto-injector
- Be mindful and aware of the specific locations for the Auto-injectors
- Carefully read and follow instructions outlined in the Individual Management Plan and Action Plan
- Contact the ambulance in cases where a Management Plan or an Action Plan are not available
- Remind students about the seriousness of allergens and the school's policy pertaining to not sharing food
- Frequently remind students about the importance of maintaining personal hygiene by washing hands before and after food
- Employ precautionary measures to mitigate any foreseeable risks

**Parents** are responsible for the following:

- Update the school in a timely manner with all medical information and requirements of a student in written format
- Provide the school with the Action Plan completed by a medical practitioner on an annual basis or when required
- Provide the school with an Auto-injector when used and/or just before the expiry date
- Avail themselves to discuss and review the Individual Management Plans on an annual basis or when required
- Provide their child with all food items and snacks during school days

**Students** are responsible for the following:

- Avoid purchasing food from the canteen or from other outlets during off-site events
- Avoid accepting food provided by anyone or during school activities unless written parental consent is given
- Inform the first available staff member of any symptoms

Date of Review	Next Review
Term 2, 2020	Term 2, 2022
Principal's Endorsement: 	