

**Help for non-English speakers**

If you need help to understand the information in this policy please contact Hume Valley School.

Ph: 9309 3477

PURPOSE

To explain to Hume Valley School parents, carers, staff and students the processes and procedures in place to support students diagnosed as being at risk of suffering from anaphylaxis. This policy also ensures that Hume Valley School is compliant with Ministerial Order 706 and the Department's guidelines for anaphylaxis management.

SCOPE

This policy applies to:

- all staff, including casual relief staff and volunteers
- all students who have been diagnosed with anaphylaxis, or who may require emergency treatment for an anaphylactic reaction, and their parents and carers.

POLICY**School Statement**

Hume Valley School will fully comply with Ministerial Order 706 and the associated guidelines published by the Department of Education and Training.

Anaphylaxis

Anaphylaxis is a severe allergic reaction that occurs after exposure to an allergen. The most common allergens for school-aged children are nuts, eggs, cow's milk, fish, shellfish, wheat, soy, sesame, latex, certain insect stings and medication.

Symptoms

Signs and symptoms of a mild to moderate allergic reaction can include:

- swelling of the lips, face and eyes

- hives or welts
- tingling in the mouth

Signs and symptoms of anaphylaxis, a severe allergic reaction, can include:

- difficult/noisy breathing
- swelling of tongue
- difficulty talking and/or hoarse voice
- wheeze or persistent cough
- persistent dizziness or collapse
- student appears pale or floppy
- abdominal pain and/or vomiting.

Symptoms usually develop within ten minutes and up to two hours after exposure to an allergen, but can appear within a few minutes.

Treatment

Adrenaline given as an injection into the muscle of the outer mid-thigh is the First Aid treatment for Anaphylaxis.

Individuals diagnosed as being at risk of Anaphylaxis are prescribed an adrenaline autoinjector for use in an emergency. These adrenaline autoinjectors are designed so that anyone can use them in an emergency.

RATIONALE

Any person suffering from an Anaphylactic event is treated in an immediate and adequate manner at DET workplaces.

- To provide a safe and supportive environment in which students at risk of Anaphylaxis can equally and actively participate in all programs at Hume Valley School.
- To raise awareness about Anaphylaxis and the school's Anaphylaxis Management Policy within the school community.
- To work with parents/carers of students at risk of Anaphylaxis in assessing risks and developing risk minimization and management strategies for the student.
- To ensure that staff members have adequate knowledge of allergies, Anaphylaxis and the school's policy and procedures in responding to an anaphylactic reaction.

IMPLEMENTATION

General Principles

Hume Valley School should have in place:

- Identified Parent Responsibilities.
- Anaphylaxis Management Plans for all students deemed affected by anaphylaxis, developed in consultation with the parents/carers and student's medical practitioner.
- Prevention strategies for in-school and out-of-school settings.
- A Communication Plan to raise staff, student and school community awareness about severe allergies, Anaphylaxis and the school's policy in relation to managing Anaphylaxis.

- Regular twice-yearly training and updates for school staff in recognising and responding appropriately to an anaphylactic reaction, including competently administering an EpiPen.

Parent Responsibilities

Parents have a responsibility to inform the school if their child is at risk of an anaphylactic reaction and to inform the school if there is a change to their child's emergency treatment.

As part of the student enrolment package, an Allergy Information Sheet is included.

At the commencement of each school year, parents have a responsibility to provide an ASCIA Action Plan signed by the student's medical practitioner, with an attached current photograph of the student. Parents will also provide an EpiPen and any other medication to the classroom teacher to be stored at school.

Parents will ensure the EpiPen is replaced annually and has not expired.

Parents will participate in an annual review of the Anaphylaxis Management Plan.

Individual Anaphylaxis Management Plans

All students at Hume Valley School who are diagnosed by a medical practitioner as being at risk of suffering from an anaphylactic reaction must have an Individual Anaphylaxis Management Plan. When notified of an anaphylaxis diagnosis, the Principal of Hume Valley School is responsible for developing a plan in consultation with the student's parents/carers.

Where necessary, an Individual Anaphylaxis Management Plan will be in place as soon as practicable after a student enrolls at Hume Valley School and where possible, before the student's first day.

Parents and carers must:

- obtain an ASCIA Action Plan for Anaphylaxis from the student's medical practitioner and provide a copy to the school as soon as practicable
- immediately inform the school in writing if there is a relevant change in the student's medical condition and obtain an updated ASCIA Action Plan for Anaphylaxis
- provide an up-to-date photo of the student for the ASCIA Action Plan for Anaphylaxis when that Plan is provided to the school and each time it is reviewed
- provide the school with a current adrenaline autoinjector for the student that has not expired;
- participate in annual reviews of the student's Plan.

Each student's Individual Anaphylaxis Management Plan must include:

- information about the student's medical condition that relates to allergies and the potential for anaphylactic reaction, including the type of allergies the student has
- information about the signs or symptoms the student might exhibit in the event of an allergic reaction based on a written diagnosis from a medical practitioner
- strategies to minimise the risk of exposure to known allergens while the student is under the care or supervision of school staff, including in the school yard, at camps and excursions, or at special events conducted, organised or attended by the school
- the name of the person(s) responsible for implementing the risk minimisation strategies, which have been identified in the Plan
- information about where the student's medication will be stored
- the student's emergency contact details
- an up-to-date ASCIA Action Plan for Anaphylaxis completed by the student's medical practitioner.

Review and updates to Individual Anaphylaxis Management Plans

A student's Individual Anaphylaxis Management Plan will be reviewed and updated on an annual basis in consultation with the student's parents/carers. The plan will also be reviewed and, where necessary, updated in the following circumstances:

- as soon as practicable after the student has an anaphylactic reaction at school
- if the student's medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, changes
- when the student is participating in an off-site activity, including camps and excursions, or at special events including fetes and concerts.

Our school may also consider updating a student's Individual Anaphylaxis Management Plan if there is an identified and significant increase in the student's potential risk of exposure to allergens at school.

Risk Minimisation Strategies

A Risk Management Checklist will be completed annually.

At the commencement of the school year or preceding the first day of enrolment for a new student, the Assistant Principal and/or Sub School Leader will meet with the parents/carers to undertake a risk assessment. This will be based on the student's usual routine, and it will include planning for alternate situations, such as in the yard and out of the school environment (for example, on community access, excursions and camps).

The EpiPen and or other medications provided by the parents/carers will be stored in the medical cabinet in an anaphylaxis carry bag in the appropriate classroom.

A spare back-up EpiPen for each student at risk of anaphylaxis will be stored in the first aid room.

Adrenaline autoinjectors for general use

Hume Valley School will maintain a supply of adrenaline autoinjectors for general use, as a back-up to those provided by parents and carers for specific students, and also for students who may suffer from a first time reaction at school.

Adrenaline autoinjectors for general use will be stored at the First Aid Room within the Administration Office and labelled "general use".

The Principal is responsible for arranging the purchase of adrenaline autoinjectors for general use, and will consider:

- the number of students enrolled at Example School at risk of anaphylaxis
- the accessibility of adrenaline autoinjectors supplied by parents
- the availability of a sufficient supply of autoinjectors for general use in different locations at the school, as well as at camps, excursions and events
- the limited life span of adrenaline autoinjectors, and the need for general use adrenaline autoinjectors to be replaced when used or prior to expiry.

In-school Setting

ASCA Action Plans are to be kept in the:

- ✓ classroom office space, on a pinboard near the medication cabinet.
- ✓ on the pinboard within the child's classroom.
- ✓ on the Compass reporting system
- ✓ on pinboards in the Administration Office and Staffroom.
- ✓ in the student's individual file

- ✓ in the individual student's anaphylaxis carry bag that they carry with them to programs and activities outside their classrooms

The classroom teacher must liaise with parents/carers about food-related activities ahead of time.

Never give food from outside sources to a student who is at risk of anaphylaxis, including actively discouraging the sharing of food at lunch and morning tea times.

Prepare for Homecraft activities by identifying possible allergens in all ingredients and avoid using products accordingly.

Class teachers will include information about anaphylactic at-risk students in their class in their CRT folder.

ES staff in the classroom should inform CRT staff of students at risk of anaphylaxis and direct the CRT to the Individual Anaphylaxis Management Plan and the Action Plan.

The EpiPen and other preventative medication (such as Phenergan) should be easily accessible in the classroom and the yard.

Out of School Settings

The student's EpiPen, school back-up EpiPen and other preventative medication (e.g. Phenergan), as per the ASCIA Action Plan, and a mobile phone must be taken on all excursions and camps and community access and swimming visits.

A staff member who has been trained in the recognition of anaphylaxis and the administration of the EpiPen must accompany the student on any trips outside of the school environment.

Emergency Response

In the event of an anaphylactic reaction, the emergency response procedures in this policy must be followed, together with the school's general first aid procedures, emergency response procedures and the student's Individual Anaphylaxis Management Plan.

A complete and up-to-date list of students identified as being at risk of anaphylaxis is maintained by First Aid Officer, Gale Cunningham and stored at the Classroom, Administration Office and the Staffroom. For camps, excursions and special events, a designated staff member will be responsible for maintaining a list of students at risk of anaphylaxis attending the special event, together with their Individual Anaphylaxis Management Plans and adrenaline autoinjectors, where appropriate.

If a student experiences an anaphylactic reaction at school or during a school activity, school staff must:

Step	Action
1.	<ul style="list-style-type: none">▪ Lay the person flat▪ Do not allow them to stand or walk▪ If breathing is difficult, allow them to sit▪ Be calm and reassuring▪ Do not leave them alone▪ Seek assistance from another staff member or reliable student to locate the student's adrenaline autoinjector or the school's general use autoinjector, and the student's Individual Anaphylaxis Management Plan, stored at Classroom, Administration Office and the Staffroom.▪ If the student's plan is not immediately available, or they appear to be experiencing a first time reaction, follow steps 2 to 5

2.	<p>Administer an EpiPen or EpiPen Jr (if the student is under 20kg)</p> <ul style="list-style-type: none"> ▪ Remove from plastic container ▪ Form a fist around the EpiPen and pull off the blue safety release (cap) ▪ Place orange end against the student's outer mid-thigh (with or without clothing) ▪ Push down hard until a click is heard or felt and hold in place for 3 seconds ▪ Remove EpiPen ▪ Note the time the EpiPen is administered ▪ Retain the used EpiPen to be handed to ambulance paramedics along with the time of administration <p>OR</p> <p>Administer an Anapen® 500, Anapen® 300, or Anapen® Jr.</p> <ul style="list-style-type: none"> · Pull off the black needle shield · Pull off grey safety cap (from the red button) · Place needle end firmly against the student's outer mid-thigh at 90 degrees (with or without clothing) · Press red button so it clicks and hold for 10 seconds · Remove Anapen® · Note the time the Anapen is administered <p>Retain the used Anapen to be handed to ambulance paramedics along with the time of administration</p>
3.	Call an ambulance (000)
4.	If there is no improvement or severe symptoms progress (as described in the ASCIA Action Plan for Anaphylaxis), further adrenaline doses may be administered every five minutes, if other adrenaline autoinjectors are available.
5.	Contact the student's emergency contacts.

If a student appears to be having a severe allergic reaction, but has not been previously diagnosed with an allergy or being at risk of anaphylaxis, school staff should follow steps 2 – 5 as above.

Communication Plan

This policy will be available on Hume Valley School website so that parents and other members of the school community can easily access information about the schools anaphylaxis management procedures. The parents and carers of students who are enrolled at the school and are identified as being at risk of anaphylaxis will also be provided with a copy of this policy.

The principal is responsible for ensuring that all relevant staff, including casual relief staff, canteen staff and volunteers are aware of this policy and Hume Valley School's procedures for anaphylaxis management. Casual relief staff and volunteers who are responsible for the care and/or supervision of

students who are identified as being at risk of anaphylaxis will also receive a verbal briefing on this policy, their role in responding to an anaphylactic reaction and where required, the identity of students at risk.

The principal is also responsible for ensuring relevant staff are trained and briefed in anaphylaxis management, consistent with the Department's *Anaphylaxis Guidelines*.

Staff training

The principal will ensure that the following school staff are appropriately trained in anaphylaxis management:

- School staff who conduct classes attended by students who are at risk of anaphylaxis
- School staff who conduct specialist classes, all canteen staff, admin staff, first aiders and any other member of school staff as required by the principal based on a risk assessment.

Staff who are required to undertake training must have completed:

- an approved face-to-face anaphylaxis management training course in the last three years, or
- an approved online anaphylaxis management training course in the last two years.

Staff are also required to attend a briefing on anaphylaxis management and this policy at least twice per year (with the first briefing to be held at the beginning of the school year), facilitated by a staff member who has successfully completed an anaphylaxis management course within the last 2 years. Each briefing will address:

- this policy
- the causes, symptoms and treatment of anaphylaxis
- the identities of students with a medical condition that relates to allergies and the potential for anaphylactic reaction, and where their medication is located
- how to use an adrenaline autoinjector, including hands on practice with a trainer adrenaline autoinjector
- the school's general first aid and emergency response procedures
- the location of, and access to, adrenaline autoinjectors that have been provided by parents or purchased by the school for general use.

When a new student enrolls at Hume Valley School who is at risk of anaphylaxis, the principal will develop an interim plan in consultation with the student's parents and ensure that appropriate staff are trained and briefed as soon as possible.

The principal will ensure that while students at risk of anaphylaxis are under the care or supervision of the school outside of normal class activities, including in the school yard, at camps and excursions, or at special event days, there is a sufficient number of school staff present who have been trained in anaphylaxis management.

REFERENCES

- School Policy and Advisory Guide:
 - o [Anaphylaxis](#)
 - o [Anaphylaxis management in schools](#)
- Allergy & Anaphylaxis Australia: [Risk minimisation strategies](#)
- ASCIA Guidelines: [Schooling and childcare](#)
- Royal Children's Hospital: [Allergy and immunology](#)
- Hume Valley School Health Care Needs Policy.

The Principal will complete the Department's Annual Risk Management Checklist for anaphylaxis management to assist with the evaluation and review of this policy and the support provided to students at risk of anaphylaxis.

COMMUNICATION

This policy will be communicated to our school community in the following ways:

- Available publicly on our school's website
- Made available in hard copy from school administration upon request

REVIEW CYCLE

This policy will be reviewed as part of the school's annual year review cycle.

Policy last reviewed	Term 4, 2021
Consultation	Student Wellbeing Team, SSL, School Council
Approved by	Principal
Next scheduled review date	Term 4, 2022