

# **Anaphylaxis Management Procedures**

#### **Purpose**

This procedure ensures that Antonine College provide, as far as practicable, a safe and supportive environment in which students at risk of anaphylaxis are provided with reasonable adjustments for their participation in school programs and activities.

The processes used at Antonine College reflect the Anaphylaxis Guidelines (the Guidelines) published by the Victorian government to support implementation of Ministerial Order 706: Anaphylaxis Management in Victorian schools and school boarding premises (Ministerial Order 706) for each student diagnosed with a medical condition that relates to allergy and the potential for anaphylactic reaction in all Victorian schools. These procedures are to be read in conjunction with the Anaphylaxis Policy.

## Scope

This procedure applies to:

- staff, including volunteers and casual relief staff.
- all students who have been diagnosed as at risk of anaphylaxis or who may require emergency treatment for anaphylactic reaction.
- parents/guardians/carers of students who have been diagnosed as at risk of anaphylaxis or who may require emergency treatment for anaphylactic reaction.

### 1. Communication with parents/guardians/carers for management information

The principal engages with the parents/carers of students at risk of anaphylaxis to develop risk minimisation strategies and management strategies. The principal will also take reasonable steps to ensure each staff member has adequate knowledge about allergies, anaphylaxis, and the school's expectations in responding to an anaphylactic reaction.

The principal requires that parents/guardians/carers provide up to date medical information and an updated Individual Action Plan (ASCIA Action Plan for Anaphylaxis (RED)) signed by the treating medical practitioner together with a recent photo of their child and any medications and autoinjectors referenced in the plan and recommended for administration. Parents/guardians/carers are requested to provide this information annually, prior to camps and excursions and if the child's medical condition changes since the information was provided. Please note the ASCIA Travel Plan for People at Risk of Anaphylaxis requires completion by a registered medical practitioner for domestic or overseas travel.

### 2. Individual Anaphylaxis Management Plan and ASCIA Action Plan

The principal is responsible for ensuring that all students who have been diagnosed by a medical practitioner as having a medical condition that relates to allergy and the potential for anaphylactic reaction have an Individual Anaphylaxis Management Plan (IAMP) developed in consultation with the student's parents/guardians/carers.

The student's IAMP is reviewed by the principal or their delegate, in consultation with the student's parents, in all the following circumstances:

- Annually.
- if the student's medical condition changes, insofar as it relates to allergy and the potential for anaphylactic
- as soon as practicable after the student has an anaphylactic reaction at School.
- When the student is to participate in an off-site activity, such as camps and excursions, or at specials events
  conducted, organised or attended by the school (e.g. Class parties, elective subjects, cultural days, fetes,
  incursions.

The principal or delegate requires the Individual Anaphylaxis Management Plan (IAMP) to be in place as soon as practicable after the student is enrolled and where possible before their first day of school. An interim management plan will be put into place for a student who is diagnosed with anaphylaxis after enrolment at the school until the IAMP is developed. The principal or delegate will develop an interim plan in consultation with parents. Training and a briefing will occur as soon as possible after the interim plan is developed.

The IAMP is to comply with Ministerial Order 706 and record:

- student's allergies.
- locally relevant risk minimisation and prevention strategies.
- names of people responsible for implementing risk minimisation and prevention strategies.
- storage of medication.
- · student emergency contact details.
- Student ASCIA Action Plans

### 3. Risk minimisation and prevention strategies

The principal ensures that risk minimisation and prevention strategies are in place for all relevant in school and out-of-school settings which include (but are not limited to) the following:

- during classroom activities (including class rotations, specialist and elective classes)
- between classes and other breaks
- in canteens
- · during recess and lunchtimes
- before and after school where supervision is provided (excluding OSHC)
- special events including incursions, sports, cultural days, fetes or class parties, excursions and camps.

The school does not ban certain types of foods (e.g., nuts) as it is not practicable to do so and is not a strategy recommended by the Department of Education (DE) or the Royal Children's Hospital. However, the school avoids the use of nut based products in all school activities, request that parents do not send those items to school if possible; that the canteen eliminate or reduce the likelihood of such allergens, and the school reinforces the rules about not sharing and not eating foods provided from home.

Where schools have a canteen, the principal ensures that the canteen provider and its employees can demonstrate satisfactory training in food allergy and anaphylaxis and its implications for food-handling practices.

The principal regularly reviews the risk minimisation strategies outlined in Risk minimisation strategies for schools considering information provided by parents related to the risk of anaphylaxis.

Risk minimisation protocols are to be completed for all excursions, camps, special events, domestic and overseas travel. The ASCIA Travel Plan for People at Risk of Anaphylaxis requires completion by a registered medical practitioner for domestic or overseas travel. It is also recommended to refer to the ASCIA checklist for travel. Please refer to the Excursions, Camps, and Travel Policy for further information.

# 4. Location of Individual Anaphylaxis Management Plans and ASCIA plans

The location of IAMPs and ASCIA plans during on-site normal school activities and during off-site activities will be known to staff so they are accessible in an emergency.

### Register of students at risk of anaphylaxis reactions

The Principal nominates a staff member to maintain an up to date register of students at risk of anaphylaxis reaction. This information is to be shared with all staff and accessible to all staff in an emergency.



# 5. Location, storage and accessibility of autoinjectors

Copies of the ASCIA First Aid Plan for Anaphylaxis are displayed or stored with the general use autoinjectors.

It is the responsibility of the principal to purchase autoinjectors for the school for general use:

• as a back-up to autoinjectors provided for individual students by parents in case there is a need for an autoinjector for another student who has not previously been diagnosed at risk of anaphylaxis.

The principal determines the number of additional autoinjector(s) required. In doing so, the principal considers the following:

- the number of students enrolled at the school who have been diagnosed as being at risk of anaphylaxis, including those with an ASCIA Action Plan for allergic reactions (they are potentially at risk of anaphylaxis).
- the accessibility of autoinjectors (and the type) provided by parents of students who have been diagnosed as being at risk of anaphylaxis.
- the number and availability of autoinjectors for general use in specified locations at the school including the school yard, during excursions, camps and special events conducted, organised or attended by the school.
- that autoinjectors for general use have a limited life, and usually expire within 12–18 months, and will need to be replaced at the school's expense either at the time of use or expiry, whichever is first.

The principal needs to determine the type of autoinjector to purchase for general use. In doing so, it is important to note the following:

- autoinjectors available in Australia are EpiPen®, EpiPen Jr®, Anapen 500®, Anapen 300® and Anapen Jr®.
- autoinjectors are designed so that anyone can use them in an emergency.
- adrenaline autoinjectors for general use are available for purchase at any chemist; no prescription is necessary.
- schools can use either the EpiPen® or the Anapen® on any student suspected to be experiencing an anaphylactic reaction, regardless of the device prescribed in their ASCIA Action Plan.

The principal determines the storage of autoinjectors. ASCIA recommends that adrenaline autoinjector devices be stored in a cool dark place at room temperature, which they define as 15 and 25 degrees Celsius. If these temperatures cannot be maintained, ASCIA recommends storing the device in an insulated wallet.

School anaphylaxis supervisors are responsible for informing school staff of the location of general use autoinjectors available in the event of an emergency.

# When to use an Autoinjector for general use

Autoinjectors for general use are used when:

- a student's prescribed autoinjector does not work, is misplaced, out of date or has already been used.
- when instructed by a medical officer after calling 000.
- first time reaction to be treated with adrenaline before calling 000.
- A first-time reaction is to be treated with adrenaline before calling.

Note: if in doubt, give autoinjector as per ASCIA Action Plans. Please review ASCIA First Aid Plan for Anaphylaxis (ORANGE) and ASCIA Adrenaline (Epinephrine) Injectors for General Use for further information.



# 6. Emergency response to anaphylactic reaction

In an emergency anaphylaxis situation, the student's ASCIA Action Plan, the emergency response procedures in this policy and **ASCIA First Aid Plan for Anaphylaxis** must be followed.

The principal must ensure that when a student at risk of an anaphylactic reaction is under the care or supervision of the school outside normal class activities, such as in the school yard, on camps or excursions or at special events conducted, organised or attended by the school, there are sufficient staff present who have been trained in accordance with Ministerial Order 706.

All staff are to be familiar with the location and storage and accessibility of autoinjectors in the school, including those for general use.

The principal must determine how appropriate communication with school staff, students and parents is to occur in event of an emergency about anaphylaxis.

Copies of the emergency procedures **ASCIA First Aid Plan for Anaphylaxis (General or Pictorial)** are prominently displayed in the relevant places in the school, for example, first aid room, classrooms and in/around other school facilities, including the canteen.

### 7. Staff training

In compliance with Ministerial Order 706, it is recommended that all Victorian school staff undertake one of three accredited training options.

### **Completion of Anaphylaxis Training**

The principal requires all staff to participate in training to manage an anaphylaxis incident. T The training should take place as soon as practicable after a student at risk of anaphylaxis enrols and, where possible, before the student's first day at school.

Staff undertakes training to manage an anaphylaxis incident if they:

- conduct classes attended by students with a medical condition related to allergy and the potential for anaphylactic reaction.
- are specifically identified and requested to do so by the principal based on the principal's assessment of the risk of an anaphylactic reaction occurring while a student is under that staff member's care, authority or supervision.

The principal considers where appropriate whether casual relief teachers and volunteers should also undertake training.

Antonine College staff are to:

- successfully complete an approved anaphylaxis management training course in compliance with Ministerial Order 706.
- participate in the school's twice yearly briefings conducted by the school's anaphylaxis supervisor or another person nominated by the principal, who has successfully completed an approved anaphylaxis management training program in the past two years.

A range of training programs are available, and the principal determines an appropriate anaphylaxis training strategy and implement this for staff. The principal ensures that staff are adequately trained and that a sufficient number of staff are trained in the management of anaphylaxis noting that this may change from time to time dependant on the number of students with ASCIA plans.



The principal is to identify two staff per school or campus to become school anaphylaxis supervisors.

A key role undertakes competency checks on all staff who have successfully completed the ASCIA online training course. To qualify as a school anaphylaxis supervisor, the nominated staff members will need to complete an accredited short course that teaches them how to conduct a competency check on those who have completed the online training course e.g., Course in Verifying the Correct Use of Adrenaline Injector Devices 22579VIC. At the end of the online training course, participants who have passed the assessment module will be issued a certificate which needs to be signed by the school anaphylaxis supervisor to indicate that the participant has demonstrated their competency in using an adrenaline autoinjector device.

School staff who complete the online training course are required to repeat that training and the adrenaline autoinjector competency assessment every two years.

Course in First Aid Management of Anaphylaxis 22578VIC is a face-to-face course that complies with the training requirements outlined in Ministerial Order 706 and enables graduates to identify and provide a first aid response to anaphylaxis, develop strategies to prevent exposure to known allergens and minimise risks related to anaphylaxis. School staff who have completed this course will have met the anaphylaxis training requirements for the documented period.

# **Options for staff training**

**Option 1.** All school staff complete the online ASCIA Anaphylaxis e-training for Victorian Schools and have their competency in using an autoinjector tested by the school Anaphylaxis Supervisor in person within 30 days of completing the course. The school Anaphylaxis Supervisor will have completed Course in Verifying the Correct Use of Adrenaline Injector Devices 22579VIC – at no cost for Victorian Catholic schools from HERO HQ. Staff are required to complete the ACSIA online training every two years.

**Option 2.** School staff undertake face-to-face training Course in First Aid Management of Anaphylaxis 22578VIC. Accredited for three years.

### Twice yearly staff briefing

The principal ensures that twice yearly anaphylaxis management briefings are conducted, with one briefing held at the start of the year. The briefing is to be conducted by the school anaphylaxis supervisor or another staff member who has successfully completed an Anaphylaxis Management Course in the previous two years. The school use the Anaphylaxis Management Briefing Template provided by the Department of Education for use in Victorian schools. A facilitator guide and presentation for briefings created by Department of Education is available in the resources section of the procedures.

The briefing includes information about the following:

- The school's legal requirements as outlined in Ministerial Order 706.
- The school's anaphylaxis management policy.
- Causes, signs and symptoms of anaphylaxis and its treatment.
- Names and pictures of students at risk of anaphylaxis, details of their year level, allergens, medical condition and risk management plans including location of their medication.
- · Relevant anaphylaxis training.
- ASCIA Action Plan for Anaphylaxis and how to use an autoinjector, including practising with a trainer autoinjector.
- The school's general first aid and emergency responses.



• Location of and access to autoinjectors that have been provided by parents or purchased by the school for general use. All school staff are to be briefed on a regular basis about anaphylaxis and the school's anaphylaxis management policy.

# 8. Anaphylaxis communication plan

The principal is responsible for ensuring that a communication plan is developed to provide information to all school staff, students and parents/guardians/carers about anaphylaxis and the school's anaphylaxis management policy.

This communication plan includes strategies for advising school staff, students and parents/guardians/carers about how to respond to an anaphylaxis reaction of a student in various environments:

- during normal school activities, including in a classroom, in the school yard, in all school buildings and sites including gymnasiums and halls
- during off-site or out of school activities, including on excursions, school camps and at special events conducted, organised or attended by the school.

The Communication Plan is to include procedures to inform volunteers and casual relief staff of students who are at risk of anaphylaxis and of their role in responding to an anaphylactic reaction experienced by a student in their care. The principal will ensure that the school staff are adequately trained by completing an approved training course:

- ASCIA e-training every 2 years together with associated competency checks by suitably trained Anaphylaxis
   Supervisor that has completed Course in Verifying the Correct Use of Adrenaline Injector Devices
   22579VIC, or
- Course in First Aid Management of Anaphylaxis 22578VIC every 3 years.

AND provision of an in-house briefing for school staff at least twice per calendar year in accordance with Ministerial Order 706. The principal is responsible for making the Anaphylaxis Policy publicly available, which includes publishing the policy on the school's website, and that any updates are communicated to school parents as per the school's communication processes.

### **Definitions**

# **Anaphylaxis**

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, lupin and certain insect stings (particularly bee stings).

# **Anaphylaxis Guidelines (Guidelines)**

A resource for managing severe allergies in Victorian schools, published by the Department of Education (DE) for use by all schools in Victoria and updated from time to time.

# Australasian Society of Clinical Immunology and Allergy (ASCIA)

The peak professional body of clinical immunology and allergy in Australia and New Zealand.

### Autoinjector

An adrenaline autoinjector device, approved for use by the Australian Government Therapeutic Goods Administration, which can be used to administer a single pre-measured dose of adrenaline to those experiencing a severe allergic reaction (anaphylaxis).



# Melbourne Archdiocese Catholic Schools Ltd (MACS) MACS

is a reference to Melbourne Archdiocese Catholic Schools Ltd, and/or its subsidiary, MACSS.

#### **Ministerial Order 706**

Ministerial Order 706: Anaphylaxis Management in Victorian Schools which outlines legislate requirements for schools and key inclusions for their Anaphylaxis Management Policy.

# Registered medical/health practitioner

A person registered under Australian Health Practitioner Registration Agency (AHPRA) and relevant state/national board for their health profession, whether the registration of that person is general, specific, provisional, interim or non-practising but does not include a registered student.

# **School approved activities**

Any academic, sporting, social or other activities for which students' attendance or participation is authorised or organised by the school.

#### School environment

Means any of the following physical, online or virtual places used during or outside school hours:

- · a campus of the school
- online or virtual school environments made available or authorised by MACS or a MACS school for use by a child or student (including email, intranet systems, software, applications, collaboration tools and online services)
- other locations provided by the school or through a third-party provider for a child or student to use
  including, but not limited to, locations used for camps, approved homestay accommodation, delivery of
  education and training, sporting events, excursions, competitions and other events (Ministerial Order No.
  1359).

# Related policies and documents

### Supporting documents

Anaphylaxis Policy
Individual Anaphylaxis Management Plan
Risk Minimisation Strategies for Schools
Emergency Response to Anaphylactic Reaction
Off-site Risk Management Checklist for Schools
Annual Anaphylaxis Risk Management Checklist for Schools

# Resources

https://www2.education.vic.gov.au/pal/anaphylaxis/guidance

https://www.allergy.org.au/hp/anaphylaxis/first-aid-for-anaphylaxis

https://etrainingvic.allergy.org.au/

https://www.allergy.org.au/hp/anaphylaxis/adrenaline-injectors-for-general-use

https://www.education.vic.gov.au/PAL/anaphylaxis-management-briefing-presentation.pptx