



## **Anaphylaxis Policy**

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### **Purpose:**

Alphington Grammar School is committed to providing a safe learning environment for all our students, complying with Ministerial Order 706 and the Department's guidelines for anaphylaxis management.

### **1. Scope:**

1.1. This policy applies to:

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

### **2. School Statement:**

2.1. The School recognises that while policies and procedures to reduce the risk of an allergic reaction can be developed and maintained, they cannot achieve a completely allergen-free environment.

2.2. It is our policy 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 schooling;
- raise awareness of food and insect allergy and the risk of anaphylaxis and the School's anaphylaxis management policy in the School community;
- engage with parents/parent liaison of each student at risk of anaphylaxis when assessing risks and developing risk minimisation strategies for the student; and
- ensure that staff have knowledge about allergies, can recognise an allergic reaction including anaphylaxis and understand the School's policy and guidelines and emergency procedures in responding to anaphylaxis.

### **3. Anaphylaxis:**

3.1. 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.

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

- swelling of the lips, face and eyes;
- hives or welts; and
- tingling in the mouth.

3.3. 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; and
- abdominal pain and/or vomiting.

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

3.5. Adrenaline given as an injection into the muscle of the outer mid-thigh is the first aid treatment for anaphylaxis.



- 3.6. 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.

#### **4. Individual Anaphylaxis Management Plans:**

- 4.1. All students at Alphington Grammar 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 or nominee (i.e. School Nurse) of Alphington Grammar School is responsible for developing a plan in consultation with the student's parents/parent liaison.
- 4.2. Where necessary, an Individual Anaphylaxis Management Plan will be in place as soon as practicable after a student enrolls at Alphington Grammar School and where possible, before the student's first day.
- 4.3. Parents/parent liaisons 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; and
  - participate in annual reviews of the student's Plan.
- 4.4. 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; and
  - an up-to-date ASCIA Action Plan for Anaphylaxis completed by the student's medical practitioner.
- 4.5. A student's Individual Anaphylaxis Management Plan will be reviewed and updated on an annual basis in consultation with the student's parents/parent liaison. 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, as much as it relates to allergy and the potential for anaphylactic reaction, changes; and
  - when the student is participating in an off-site activity, including camps and excursions, or at special events including fetes and concerts.



- 4.6. Alphington Grammar 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.

**5. Location of plans and adrenaline autoinjectors:**

- 5.1. All adrenaline autoinjectors and other medications must be stored with a student's ASCIA Action Plan for Anaphylaxis and checked regularly to ensure that they have not expired, become discoloured or sediment is visible.
- 5.2. For all students, adrenaline autoinjectors must be stored in locations at the School which are easily accessible and unlocked. This includes:
- primary student's medical kit (including their adrenaline autoinjector and ASCIA Action Plan for Anaphylaxis) must be stored in their classroom;
  - secondary students must always have their adrenaline autoinjector and ASCIA Action Plan for Anaphylaxis with them as they move from class to class, are at activities off the School grounds and during travel to and from the School without parental/adult supervision; and
  - for all students, a second adrenaline autoinjector and ASCIA Action Plan for Anaphylaxis that has been supplied by parents/parent liaison is located in the School Nurse Office.
- 5.3. For all students diagnosed as being at risk of anaphylaxis, a copy of the ASCIA Action Plan for Anaphylaxis will be uploaded to Schoolbox and Sentral.

**6. Adrenaline autoinjectors for General Use:**

- 6.1. The School Nurse purchases adrenaline autoinjectors for general use, which are additional to the prescribed adrenaline autoinjectors for individual's provided by parents/parent liaison. These adrenaline autoinjectors are not a substitute for individuals at high risk of anaphylaxis having their own prescribed autoinjectors.
- 6.2. General use adrenaline autoinjectors are used when:
- a student's prescribed autoinjector cannot be administered, is misplaced, has been misfired, is out of date or has already been used, or the individual needs further doses;
  - a student is having a suspected first-time anaphylaxis;
  - instructed by a medical officer after calling 000.
- 6.3. Alphington Grammar School maintains general adrenaline autoinjectors in the following locations:
- School Nurse Office;
  - Physical Education Department;
  - Early Learning Centre (EpiPen Junior);
  - Library;
  - School Canteen; and
  - Administration.

**7. Review of adrenaline autoinjectors:**

- 7.1. If the School Nurse or other designated staff member identifies any adrenaline autoinjectors which are out of date or cloudy/discoloured, they should:
- immediately call the parent/parent liaison and send a reminder to the student's parent/parent liaison to replace the adrenaline autoinjector as soon as possible (and follow this up with Principal if no response is received from the parent/parent liaison or if no replacement adrenaline autoinjector is provided); and
  - order and replace the School's general use adrenaline autoinjector supply as soon as possible.



**8. Emergency Response Procedures for Students at Risk of Anaphylaxis:**

- 8.1. In the event of an anaphylactic reaction, the emergency response procedures in this policy must be followed, together with Alphington Grammar School's general first aid procedures, emergency response procedures and the student's Individual Anaphylaxis Management Plan.
- 8.2. A complete and up-to-date list of students identified as being at risk of anaphylaxis is maintained by the School Nurse. 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.
- 8.3. If a student experiences an anaphylactic reaction at school or during a school activity, school staff must:

Step	Action
<b>1</b>	<ul style="list-style-type: none"><li>• Lay the student flat.</li><li>• Do not allow them to stand or walk.</li><li>• If breathing is difficult, allow the student to sit.</li><li>• The student must not stand or be moved unless they are in danger (i.e. from bees in a nearby hive).</li><li>• Be calm and reassuring.</li><li>• Do not leave them alone.</li><li>• 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.</li><li>• If the student's plan is not immediately available, or they appear to be experiencing a first time reaction, follow steps 2 to 5.</li></ul>
<b>2</b>	Administer an EpiPen or EpiPen Junior (if the student is under 20kg) <ul style="list-style-type: none"><li>• Remove from plastic container.</li><li>• Form a fist around the EpiPen and pull off the blue safety release (cap).</li><li>• Place orange end against the student's outer mid-thigh (with or without clothing).</li><li>• Push down hard until a click is heard or felt and hold in place for 3 seconds.</li><li>• Remove EpiPen.</li><li>• Note the time the EpiPen is administered.</li><li>• Retain the used EpiPen to be handed to ambulance paramedics along with the time of administration.</li></ul>
<b>3</b>	Call an ambulance on Triple Zero "000"
<b>4</b>	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 (5) minutes, if other adrenaline autoinjectors are available.
<b>5</b>	Contact the student's parents/parent liaison.

- 8.4. 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.
- 8.5. If someone with known asthma and allergy to food, insects or medication has sudden severe breathing difficulty (including wheeze, persistent cough or hoarse voice) even if there are no skin symptoms, always give the adrenaline autoinjector first, and then the asthma reliever puffer.



- 8.6. If in doubt, it is better to use an adrenaline autoinjector than not use it, even if in hindsight the reaction is not anaphylaxis. Under-treatment of anaphylaxis is more harmful and potentially life threatening than over-treatment of a mild to moderate allergic reaction.

**9. Communication Plan:**

- 9.1. This policy will be available on Alphington Grammar School's website so that parents and other members of the School community can easily access information about Alphington Grammar School's anaphylaxis management procedures.
- 9.2. The Principal, or nominee, is responsible for ensuring that all relevant staff, including casual relief staff, canteen staff and volunteers are aware of this policy and Alphington Grammar 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.
- 9.3. The School Nurse is responsible for ensuring relevant staff are trained and briefed in anaphylaxis management.

**10. Staff training:**

- 10.1. 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, administration staff, and any other member of school staff as required by the Principal based on a risk assessment.
- 10.2. 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.
- 10.3. Alphington Grammar School uses the following training course: 22300VIC Course in First Aid Management of Anaphylaxis, ASCIA Anaphylaxis eTraining course (with Course in Verifying the Correct Use of Adrenaline Autoinjector Devices 22303VIC).
- 10.4. 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 (i.e. Principal, Assistant Principal/s, or School Nurse). 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; and
  - the location of, and access to, adrenaline autoinjectors that have been provided by parents/parent liaison or purchased by the School for general use.
- 10.5. When a new student enrolls at Alphington Grammar School who is at risk of anaphylaxis, the School Nurse will develop an interim plan in consultation with the student's parents/parent liaison and ensure that appropriate staff are trained and briefed as soon as possible.



- 10.6. 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.