

MOOROOLBARK GRAMMAR

Medical Conditions - Anaphylaxis Management Policy & Procedure



Help for non-English speakers

If you need help to understand the information in this policy, please contact the school office.

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SCHOOL STATEMENT

MOOROOLBARK GRAMMAR WILL FULLY COMPLY WITH MINISTERIAL ORDER 706.

PURPOSE

To explain to Mooroolbark Grammar's parents, teachers, 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 Mooroolbark Grammar is compliant with Ministerial Order 706.

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

DEFINITION

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 medications.

Symptoms

Signs and symptoms of mild to moderate allergic reactions can include:

- swelling of the lips, face and eyes
- hives or welts
- tingling in the mouth
- abdominal pain and/or vomiting

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

- difficult/noisy breathing
- swelling of tongue
- swelling/tightness in throat
- difficulty talking and/or hoarse voice
- wheeze or persistent cough
- persistent dizziness or collapse
- student appears pale or floppy
- abdominal pain and/or vomiting (these are signs of anaphylaxis for insect allergy)

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 auto-injector for use in an emergency. These adrenaline auto-injectors are designed so that anyone can use them in an emergency.

INDIVIDUAL ANAPHYLAXIS MANAGEMENT PLANS

All students at Mooroolbark Grammar who are diagnosed as being at risk of suffering from an anaphylactic reaction by a medical practitioner must have an Individual Anaphylaxis Management Plan. When notified of an anaphylaxis diagnosis, the **Principal of Mooroolbark Grammar 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 Mooroolbark Grammar and before the student's first day.

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POLICY IMPLEMENTATION

The Principal will ensure that an Individual Anaphylaxis Management Plan is developed, in consultation with the student's Parents, for any student who has been diagnosed by a Medical Practitioner as being at risk of anaphylaxis.

- Strategies to minimise the risk of exposure to known and notified allergens while the student is under the care of supervision of School Staff, for in-school and out-of-school settings 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 strategies;
- Information on where the student's medication will be stored;
- The student's emergency contact details; and
- An ASCIA Action Plan.

School Staff will then implement and monitor the student's Individual Anaphylaxis Management Plan.

Review and updates to Individual Anaphylaxis Plans

The student's Individual Anaphylaxis Management Plan will be reviewed/updated, in consultation with the student's Parents in all following circumstances:

- a) Annually
- b) If the student's medical condition, insofar as it relates and the potential for anaphylactic reaction, changes
- c) As soon as practicable after the student has an anaphylactic reaction at the School
- d) When the student is to participate in an off-site activity, such as camps and excursions, or at special events conducted, organised or attended by the School (e.g. class parties, elective subjects, cultural days, fetes, incursions).

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 auto-injector for the student that is not expired

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- participate in reviews of the student's Plan, a) annually, b) If the student's medical condition, insofar as it relates and the potential for anaphylactic reaction, changes c) as soon as practicable after the student has had an anaphylactic reaction at the School and d) when the student is to participate in an off-site activity.

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 the School.

Each student's Individual Anaphylaxis Management Plan must include:

- information about the student's medical condition that relates to allergy 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.

Location of plans and adrenaline auto-injectors

A copy of each student's Individual Anaphylaxis Management Plan will be located in the First Aid cupboard of their classroom, the staff room and in sick bay.

Student's adrenaline auto-injectors are stored in the First Aid cupboard of their classroom with their ASCIA Action Plan for Anaphylaxis.

Adrenaline auto-injectors are labelled with the student's name.

Adrenaline auto-injectors for general use

Mooroolbark Grammar School will maintain an adrenaline auto-injector 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.

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Adrenaline auto-injectors for general use will be stored On the First Aid Notice Board in the Red bag in Sick Bay (with a clearly labelled sign on the bag "Anaphylaxis General Auto-injectors") and each auto-injector labelled "general use".

The principal is responsible for arranging the purchase of adrenaline auto-injectors for general use, and will consider:

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

Risk Minimisation Strategies

Risk Management and Prevention Strategies the School will have 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;
- During recess and after School time; and
- Special events including incursions, sports, cultural days, fetes or class parties, excursions and camps.

To reduce the risk of a student suffering from an anaphylactic reaction at

Mooroolbark Grammar School, we have put in place the following strategies:

- the anaphylaxis supervisor completes an annual risk management checklist
- staff and students are regularly reminded to wash their hands after eating
- students are not permitted to share food
- Mooroolbark Grammar School is not a nut/egg free school and follows Education Department guidelines which do not recommend the banning of foods or other products in schools but rather that risk awareness and practical strategies be implemented
- Staff are educated in appropriate food handling to reduce the risk of cross-Contamination
- year groups will be informed of allergens that must be avoided in advance of class parties, events or birthdays
- a general use EpiPen will be stored on the Sick Bay First Aid Notice Board in the Red bag.

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Emergency Response

In the event of an anaphylactic reaction, the emergency response procedures in this policy must be followed, together with the School 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 the Anaphylaxis supervisors (Andrea Parsons and Dot Ainsworth) and stored beside the staffroom door entrance and in Sick Bay.

For outside of normal class activities such as camps, excursions and special events, an Anaphylaxis trained staff member, designated by the Principal, will be responsible for maintaining a list of students at risk of anaphylaxis attending the activity, together with their Individual Anaphylaxis Management Plans and adrenaline auto-injectors, where appropriate.

The principal is to ensure that there are sufficient numbers of trained staff available to supervise students at risk of Anaphylaxis outside of normal class activities.

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 auto-injector or the School general use auto-injector, and the student's ASCIA Action Plan, stored in the Sick Bay • 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.	<ul style="list-style-type: none"> • Administer an EpiPen or EpiPen Jr (if the student is under 20kg) • Remove from plastic container • Check date on auto-injector and liquid (through viewing window) • 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 the ambulance paramedics along with the time of administration

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3.	<ul style="list-style-type: none">• Call an ambulance (000) – Responder calls or designates person to call
4.	<ul style="list-style-type: none">• 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 auto-injectors are available.
5.	<ul style="list-style-type: none">• Contact the Principal• 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.

Note: If in doubt, it is better to use an adrenaline auto-injector 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.

COMMUNICATION

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

- Available publicly on our school’s website and through the communication platform
- Included in staff induction processes
- 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.

STAFF TRAINING

The principal is responsible to ensure that staff at Mooroolbark Grammar School receive appropriate training in anaphylaxis management consistent with Ministerial Order 706.

Staff who are responsible for conducting classes that students who are at risk of anaphylaxis attend, and any further staff that the principal identifies, MUST have completed an approved face-to-face anaphylaxis management training course in the last three years.

Mooroolbark Grammar School uses the following training course - 22578VIC Course in First Aid Management of Anaphylaxis.

The principal is responsible to ensure that staff are also required to attend a briefing on anaphylaxis management and this policy at least twice per year (once in Semester One and once in Semester Two), facilitated by a staff member who has successfully completed an anaphylaxis management course within the last 12 months, including School Anaphylaxis Supervisors. Each briefing will address:

- this policy
- the causes, symptoms and treatment of anaphylaxis

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- the identities of students with medical conditions that relate to allergies and the potential for anaphylactic reaction, and where their medication is located
- how to use an adrenaline auto-injector, including hands on practice with a trainer adrenaline auto-injector
- the School general first aid and emergency response procedures
- the location of, and access to, adrenaline auto-injectors that have been provided by parents or purchased by the School for general use.

FURTHER INFORMATION AND RESOURCES

- Anaphylaxis management in school

<http://www.education.vic.gov.au/school/teachers/health/pages/anaphylaxisschl.aspx>

- ASCIA Guidelines: Schooling and childcare

<https://allergyfacts.org.au/allergy-management/schooling-childcare>

- Royal Children's Hospital: Allergy and immunology

https://www.rch.org.au/allergy/about_us/Allergy_and_Immunology/

POLICY REVIEW AND APPROVAL

This policy is to be reviewed annually.

Policy last reviewed	October 2024
Approved by	Principal
Approved by	School Governing Board October 2024
Next scheduled review date	October 2025