Rationale

What Is 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, latex, certain insect stings and medication.

Goals
To provide, as far as practical, a safe and supportive environment in which students at risk of anaphylaxis can participate equally in all aspects of the student's schooling.

To raise awareness about allergies, anaphylaxis and the school's anaphylaxis management policy in the school community.

To engage with and actively involve the parents/guardians of each student at risk of anaphylaxis in assessing risks, developing risk minimization strategies and management strategies for the student.

To ensure that all staff members have adequate knowledge of allergies, anaphylaxis, emergency procedures, and the school's policy and procedures in responding to an anaphylactic reaction.

To comply with the Order and Guidelines on anaphylaxis management as published by the Department of Education and Training, Victoria

Whole school prevention
Maryborough Education Centre believes that the safety and wellbeing of students who are at risk of anaphylaxis is a whole-of-community responsibility and is committed to minimising the risk of an anaphylactic reaction occurring while the student is in the care of the school.

The key to prevention of anaphylaxis in schools is knowledge of those students who have been diagnosed at risk, awareness of triggers (allergens), and prevention of exposure to these triggers. Partnership between schools and parents are important in ensuring that certain foods or items are kept away from the student while at school.

Staff and parents/guardians need to be made aware that it is not possible to achieve a completely allergen-free environment in any school that is open to the general community. Staff should not have a false sense of security that an allergen has been eliminated from the environment, but recognise the need to adopt a range of procedures and risk minimisation strategies to reduce the risk of a student having an anaphylactic reaction, including strategies to minimise the presence of the allergen in the centre.
Maryborough Education Centre is committed to being an “Allergy Aware School”.

**Prevention strategies**

Refer to DET Anaphylaxis Guidelines Appendix F:Minimisation Strategies for schools and specific prevention strategies below

**Classroom**
- Engage parents in discussion prior to science experiments containing foods”.
- Appropriate risk minimization strategies will be discussed and implemented where required for any classroom activities which may involve food.
- Students are asked to not share food with one another which ensures that all students are eating the food packed or ordered for them by their parents/guardians. This minimizes the risk of exposure to confirmed allergens for those students at risk of anaphylaxis to food allergens.
- Birthdays are celebrated at school with a class birthday card and another activity organized by the class teacher which does not involve food.
- Parents/guardians of children who are at risk of anaphylaxis will be informed in advance by the school of any activity which involves food and risk minimization strategies will be discussed and put in place.

**Canteen**
- Training of canteen coordinator in anaphylaxis management and food handling practices.
- ASCIA Action Plans to be displayed in canteen.
- Canteen staff / volunteers to be briefed about risks of anaphylaxis.
- No sharing recommendation is to be implemented.
- Food known to contain traces of nuts are not to be served to students who are identified as being at risk of anaphylaxis to nuts.

**In the school yard**
- Staff on grounds duty will be knowledgeable of students with anaphylaxis and will be trained in prevention, recognition and treatment of an anaphylactic reaction.
- Laminated anaphylaxis alert cards are within the first aid kit for teachers on yard duty. In the event of a child experiencing an anaphylactic reaction, the teacher on yard duty can give the laminated anaphylaxis card to a responsible student who will run to reception or the staffroom to obtain assistance.

**Foods served to members of our school community**
The school will not serve foods to any members of our school community where peanuts or tree nuts are listed in the main body of ingredients. Please note this does not mean that we are a “nut free” school. Where packaging states that there may be traces of nuts and the food being served to parents, visitors or students who do not have an allergy/anaphylaxis to peanuts or tree nuts, this is acceptable. However, foods which are labelled as may contain
traces of nuts should not be served to those who are known to have an allergy/anaphylaxis to peanuts or tree nuts.

Section 2

ASCIA Action Plan
The Australasian Society of Clinical Immunology and Allergy (ASCIA) plan is a device specific plan outlining the type of auto injector prescribed and is completed by the student’s medical practitioner.

It is the responsibility of the parent to provide the ASCIA plan prior to the students commencing at Maryborough Education Centre.

The ASCIA plan sets out:

- the emergency procedures to be taken in the event of an allergic reaction
- is signed by a medical practitioner who was treating the child on the date the practitioner signs the emergency procedures plan
- includes an up to date photograph of the student.

It is a responsibility of the parent/guardian to:

- inform the school if their child’s medical condition changes and, if relevant, provide an updated ASCIA Action Plan
- provide an up to date photo for the ASCIA Action Plan when the plan is provided to the school and when it is reviewed

Individual Anaphylaxis Management Plan (IAMP)
The principal will ensure that an individual 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.

The individual anaphylaxis management plan will be in place as soon as practicable after the student enrolls and where possible before the first day of school.

The individual anaphylaxis management plan will set out the following:

- Information about the diagnosis, including the type of allergy or allergies the student has (based on a 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 camps and excursions
- 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
The student’s individual management plan will be reviewed, in consultation with the student’s parents/carers:

- annually and as applicable
- if the student’s condition changes
- immediately after a student has an anaphylactic reaction at school.

Storage of auto-injectors
All students’ prescribed auto-injectors will be stored in the staffroom closest to the student’s main classroom. The student’s emergency contact details will be stored and kept up-to-date on the school’s database. These details are also on the ASCIA plan and the IAMP.

Back up auto-injectors
The Principal will ensure that there are an adequate number of auto-injectors available for general use. These will be stored in the following locations:

- sick bay
- staffroom-Moonlight, Bet Bet, Beckworth buildings
- food technology room
- gymnasium
- sports field, near netball courts
- library
- canteen
- MEC FLO campus staffroom

Roles and Responsibilities

Responsibility of School Principal
The Principal will be responsible for ensuring that a communication plan is developed to provide information to all staff, students and parents about anaphylaxis and the school’s anaphylaxis management policy.

The Maryborough Education Centre will purchase back-up injector pens. When purchasing these, the Principal will take into account the following relevant considerations:

- The number of students enrolled at risk of anaphylaxis.
- The accessibility of adrenaline auto-injectors supplied by parents.
- The availability of a sufficient supply of adrenaline auto-injectors for general use in specified locations at the school, including the school yard, at excursions, camps and special events conducted, organised or attended by the school.
- That adrenaline auto-injectors have a limited life, 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 comes first.
The Principal is responsible for ensuring that all school staff are briefed at least twice a year (the first one to be held at the beginning of the year) by a staff member who has up to date anaphylaxis management training, on:

- The school’s anaphylaxis management policy
- The causes, symptoms and treatment of anaphylaxis
- The identities of students diagnosed at risk of anaphylaxis and where their medication is located
- How to use an adrenaline auto-injecting device, including hands on practice with a training auto-injector.
- The school’s first aid and emergency response procedures.

The Principal must ensure that there is a sufficient number of staff present who have up to date training in an anaphylaxis management training course during excursions, yard duty, camps and special event days.

*Responsibilities for School Staff*

As a part of the duty of care owed to students, teachers are required to administer first aid when necessary and within the limits of their skill, expertise and training. In the case of Anaphylaxis, this includes following the student’s Action Plan and administering an auto-injector if necessary. It should be noted that a teacher’s duty of care is greater than that of an ordinary citizen in that a teacher is obliged to assist an injured student, while an ordinary citizen may choose to do nothing.

School Staff taking students at risk of anaphylaxis on school excursions/camps/special events are required to take a first aid kit at all times which will contain a “back up” auto-injector. A student’s auto-injector will be kept in their designated pouch which will also contain a copy of their ASCIA Plan and antihistamine if prescribed.

CRTs must identify students in their class at the beginning of the day who are at risk of anaphylaxis, and take note of these children as marked on the school roll.

CRTs are to pick up Junior/ Senior CRT folder and laptop from the front office before they commence the day, which has a list of all students who are anaphylactic.

All staff must:

- Follow the roles and responsibilities outlined for staff in the communication plan (addendum to this policy) including:
- Know the identity of students who are at risk of anaphylaxis
- Understand the cause, symptoms and treatment of anaphylaxis.
- Know the school’s first aid emergency procedures and their role in relation to responding to an anaphylactic reaction.
- Procedures for Administrative Staff/
- Follow the roles and responsibilities outlined for staff in the communication plan (addendum to this policy).
The Administrative staff will seek information to identify students with severe life threatening allergies at enrolment and keep up to date register of students at risk of anaphylaxis.

The Administrative staff will ensure the students emergency contact details are up to date.

**Procedures for First Aid staff**
Follow the roles and responsibilities outlined for staff in the communication plan (addendum to this policy) including:

- In conjunction with parent/carer, check or request that an anaphylaxis management plan has been developed and signed by their GP and to make arrangements in regard to the provision of Epipens by the parents.
- Ensure all Epipens are accessible, stored and managed appropriately. That there are logs and associated communication sheets available for use.
- Provide information to ALL staff so they are aware of students at risk of anaphylaxis and the anaphylaxis management plan.

**Procedures for School Nurse**
Follow the roles and responsibilities outlined for all staff in the communication plan (addendum to this policy).

Including:

- Assisting discussion between parents/carers and school staff regarding particular medical concerns and/or management of anaphylaxis in the school
- Conduct twice yearly staff briefings to staff where the first one is held at the beginning of the school year. This briefing will include:
  - the school’s anaphylaxis management policy
  - the causes, symptoms and treatment of anaphylaxis
  - the identities of students at risk of anaphylaxis and location of their medication
  - how to use an adrenaline auto-injector which includes hands on practice with a trainer auto-injector
  - Maryborough Education Centre’s first aid and emergency response procedures and the location of and access to adrenaline auto-injector provided to the school by parents/guardians as well as the adrenaline auto-injector which have been purchased by the school as “back up” or for general use.

- Provide assistance with the annual reviews of action plans, prevention and management strategies and the Communication Plan.
- Ensuring that the students diagnosed at risk of anaphylaxis have their ASCIA plan displayed in the classroom, staff room, library and a copy is kept at the canteen.
- Replace back-up auto-injectors prior to expiry
- Conduct staff training in an accredited anaphylaxis management training course that meet the requirements of Ministerial Order 706. These are:
1. ASCIA Anaphylaxis e-training for Victorian Schools followed by a competency check by the School Anaphylaxis Supervisor AND 2 staff completing Course in Verifying the Correct Use of Adrenaline Auto Injector Devices 22303VIC. These staff are the School Anaphylaxis Supervisors

2. 22300VIC Course in First Aid Management of Anaphylaxis

3. 10313NAT Course in Anaphylaxis Awareness

- Conduct an annual risk management checklist in conjunction with review of the Maryborough Education Centre’s Anaphylaxis Management Policy and Procedures in April of every year or as required in response to any legislative requirements

Parents/Carers responsibilities

It is the responsibility of the parent/carer of a student with anaphylaxis to:

- Inform the school either at enrolment or diagnosis of the student’s allergies and whether the student has been diagnosed as being at risk of anaphylaxis.
- Ensure that the following tasks are completed so that the student can be managed safely within the school environment:
  - Obtain information from the student’s medical practitioner about their condition and any medications to be administered. Inform school staff of all relevant information and concerns relating to the health of the child.
  - Meet with the school to develop the student’s anaphylaxis management plan.
  - Provide a copy of an Action Plan for anaphylaxis that is signed by the general practitioner to the school.
  - Provide an auto-injector and any other medications to the school with an insulated bag to store the auto-injector in. As well as replacing the auto-injector before it expires.
  - Assist staff in planning and preparation for the student prior to school camps, field trips, excursions or special events like class parties or sporting events; such as supplying alternative food options for the student when needed.
  - Inform staff of any changes to the students Anaphylaxis Management Plan when there is a change in the student’s condition.
  - Review and return the school’s permission form regarding the display of action plans in designated areas.
Section 3

Staff training
All school staff who conduct classes where a student has a medical condition that relates to allergy and the potential for an anaphylactic reaction will have up to date training in an anaphylaxis management training course which complies with Ministerial Order 706 and includes a competency check in the administration of an adrenaline auto-injector. These courses which are approved by the Secretary, Department of Education and Training are:

- **ASCIA Anaphylaxis e-training for Victorian Schools** followed by a competency check by the School Anaphylaxis Supervisor AND 2 staff per school. Course in Verifying the Correct Use of Adrenaline Auto-injector Devices 22303VIC. These staff are the School Anaphylaxis Supervisors

- **22300VIC Course in First Aid Management of Anaphylaxis**

- **10313NAT Course in Anaphylaxis Awareness.**

In addition, the School Nurse or a School Anaphylaxis Supervisor will provide the staff briefings to all staff twice a year. The first session will occur at the beginning of the school year.

Information will also be regularly disseminated to staff throughout the course of the year reflecting any changes where this occurs. All staff will undertake the online training course every two years.

At other times while the student is under the care or supervision of the school, including sporting activities, excursions, yard duty, camps and special event days, the school will ensure that the staff present, have up to date training in an anaphylaxis management training course including how to administer an auto-injector.

Staff will also be made aware of preventative measures including use of food; possible hidden allergens such as in milk or egg cartons; food handling; cleaning and raising student awareness. All staff will be made aware of students with anaphylaxis during the training course and via regular updates from the school nurse.

Emergency response
The school's first aid procedures and the student's Anaphylaxis Action Plan must be followed in the event a student experiences an Anaphylactic episode in school grounds.

1. Always follow the student's ASCIA Plan which outlines the emergency response required as well as the relevant first aid for an anaphylactic reaction.
2. Person 1 must remain with the student.
3. Person 2 obtains student's kit which contains the student's auto-injector, ASCIA plan, IAMP and antihistamine if prescribed. They must also obtain a back-up auto-injector which is the same dose of the student's prescribed auto-injector. These are located next to the student's kits.
4. Person 2 returns to the student and the ASCIA plan is followed.
5. Person 1 is to remain with the student at all times and wait for an ambulance
6. Person 2 Is to notify the school nurse, Principal, Deputy Principal and the other members of the leadership team as relevant
7. The Principal to notify the relevant Head of Campus
8. Parents/guardians are to be contacted.
9. The incident is to be recorded in SEQTA and also RISKMAN.
10. Follow up and counselling/debrief to be offered to relevant parties.
11. Update of the student's IAMP as soon as is practicable.

**Communication Plan**

The principal will be responsible for ensuring that a communication plan is developed to provide information to all staff, students and parents about anaphylaxis and the school's Anaphylaxis Management Policy. This plan is being followed as per the DET Anaphylaxis Guidelines.

The communication plan will include information about what steps will be taken to:

- respond to an anaphylactic reaction by a student in a classroom, in the school yard, on school excursions, on school camps and special event days.
- Volunteers and casual relief staff of students at risk of anaphylaxis will be informed of students at risk of anaphylaxis and their role in responding to an anaphylactic reaction by a student in their care by the Deputy Principal of Administration or his delegate.

The communication plan clearly outlines Procedures for First Aid management within and outside school grounds. It is important to be familiar with this document and to ensure that it is clearly understood in case of an emergency.

This policy will be reviewed yearly.

![Policy Last Edited Stamp]

Signed:

Paul Rumpff  
School Council President