



VSC Anaphylaxis policy

@ 17 September 2020

PURPOSE

To explain to Vermont Secondary College 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 VSC 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

VSC will fully comply with Ministerial Order 706 and the associated guidelines published by the Department of Education and Training (DET).

NB 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.

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.
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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 VSC 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 VSC 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 VSC and where possible, before the student's first day.

In the case of current students, an Individual Anaphylaxis Management Plan will be in place as soon as practicable after diagnosis.

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 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.

Location of plans and adrenaline auto-injectors

Depending on the age of the students who are at risk of anaphylaxis, the severity of their allergies and the content of their plan, some students may keep an additional adrenaline auto-injector on their person, rather than in the First Aid Centre (unlocked metal cabinet on the right-hand side as you enter).

All students will also be encouraged to keep an additional adrenaline auto-injector on their person. Copies of the plans will be kept in various locations around the school so that the plan is easily accessible by school staff in the event of an incident. These include the relevant Student Management office, the First Aid Centre, the Staff Lounge, the Canteen and the Food Studies Preparation Room.

A soft copy of each student's plan will be available on Compass also.

A copy of each student's Individual Anaphylaxis Management Plan will be stored with their ASCIA Action Plan for Anaphylaxis and an adrenaline auto-injector in the First Aid Centre (unlocked metal cabinet on the right-hand side as you enter).

Whilst some students may choose to keep an additional adrenaline auto-injector on their person, medication for these students, and also for those that do not, will be stored and labelled with their name in the First Aid Centre (unlocked metal cabinet on the right-hand side as you enter), together with adrenaline auto-injectors for general use.

Risk Minimisation Strategies

VSC is not a declared 'nut free' school, as this can never be guaranteed. However, VSC will put risk minimisation strategies in place to reduce the possibility of a student suffering from an anaphylactic reaction at school and for all school activities, including:

- during classroom activities (including class rotations, specialist and elective classes)
- between classes and other breaks
- at the canteen
- during recess and lunchtimes
- before and after school
- on camps and excursions, or at special events conducted, organised or attended by the school (e.g. class activities, elective subjects and work experience, cultural days, concerts, events at other schools, competitions or incursions).

These strategies will be influenced by the nature of the allergy of the student.

Appendix F of the Department's [Anaphylaxis Guidelines](#) includes detailed risk mitigation strategies that you may choose to adopt.

To reduce the risk of a student suffering from an anaphylactic reaction at VSC, we have put in place the following strategies:

- key staff (Sickbay Attendant/s, Assistant Principal, Student Manager, Program Manager) meet with the student and parents on enrolment or diagnosis. Together, they review the student's Plan, the VSC policy and Response Procedure, the Student Health Support Plan and likely camps and programs;
- replicate the above meeting before camps and especially tours and overseas trips;
- the student is informed of all relevant college processes, and is also reminded how to take effective responsibility for own wellbeing and safety;
- the student is reminded to raise immediately any concerns around bullying by other students;
- ensure that anaphylaxis awareness is part of all program planning processes, and that all programs involving foods require approval from the Local Consultative Committee;
- inform all key staff and students (friends, classes etc.) of the student's condition and allergen/s;
- conduct staff training annually and staff briefing every semester;
- staff and students are regularly reminded to wash their hands after eating;
- students are discouraged from sharing food;
- gloves must be worn when picking up papers or rubbish in the playground;

- school canteen staff are trained in appropriate food handling to reduce the risk of cross-contamination
- a general use EpiPen will be stored at several locations around the school;
- the policy and response procedure will be included in all staff and pre-service teacher inductions, and also as part of Canteen volunteers induction.

Planning for off-site activities will include risk minimisation strategies for students at risk of anaphylaxis including supervision requirements, appropriate number of trained staff, emergency response procedures and other risk controls appropriate to the activity and students attending.

Adrenaline auto-injectors for general use

VSC will maintain a supply of adrenaline auto-injectors 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 auto-injectors for general use will be labelled “general use” and will be stored in:

- the First Aid centre;
- all Student Management offices (7, 8, 9, Senior)
- the Library;
- the Music Centre;
- the Food Studies preparation room.

[Note: for guidance on the appropriate number of general use adrenaline auto-injectors for your school, refer to page 34 of the Department’s [Anaphylaxis Guidelines](#)]

The Sickbay Attendants, as delegates of the principal, are responsible for arranging the purchase of adrenaline auto-injectors for general use, and will consider:

- the number of students enrolled at VSC at risk of anaphylaxis;
- the accessibility of adrenaline auto-injectors supplied by parents
- the availability of a sufficient supply of auto-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.

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 the Sickbay Attendants and displayed in:

- the First Aid Centre;
- the General Office;
- the Staff Lounge;
- the Daily Organisation Office (for CRT reference);
- the relevant Student Management office;
- the Canteen;
- the Food Studies preparation room;
- on Compass.

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 auto-injectors, where appropriate.

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

Step	Action
1	<p>Call or Send for Sickbay Attendant – 0419 328 267</p> <p>If severe - Call an ambulance (000) immediately</p> <ul style="list-style-type: none"> • take instructions from the operator
2	<p>DRSABCD:</p> <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's general use auto-injector, and the student's Individual Anaphylaxis Management Plan, stored in the First Aid Centre (unlocked metal cabinet on the right-hand side as you enter) • If the student's plan is not immediately available, or they appear to be experiencing a first time reaction, treat as for anaphylaxis (Step 3 onwards)
3	<p>Administer an EpiPen:</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
4	Call an ambulance (000) – if not already done.
5	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.
6	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 1 – 6 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.

Refer to page 41 of the [Anaphylaxis Guidelines](#).

Communication Plan

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

The principal is responsible for ensuring that all relevant staff, including casual relief staff, canteen staff and volunteers are aware of this policy and VSC'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:

- All teaching staff and ES staff will be required to maintain relevant training at least every three years;
- School staff who act as verifiers for the eTraining module.

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.

VSC engages St John Ambulance to deliver the following training course during the December professional learning program [insert detail, e.g. ASCIA eTraining course (with 22303VIC, or 22300VIC or 10313NAT)].

To ensure staff skills and confidence are maintained, or to train new staff employed during the year, the college will make use of the eTraining, course and VSC staff verifiers (AP, First Aid Attendants).

[Note, for details about approved staff training modules, see page 13 of the [Anaphylaxis Guidelines](#)]

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 (Assistant Principal supported by the First Aid Attendants). 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 auto-injector, including hands on practice with a trainer adrenaline auto-injector;
- the school's 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;
- awareness raising around bullying relating to anaphylaxis.

When a new student who is at risk of anaphylaxis enrolls at VSC, the First Aid Attendants, as delegates of 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 schoolyard, 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.

Date Implemented	September 2020
Author	Harry Ruff, Maia Tilley & Tammany Kelly
Approved By	Principal (for information of School Council)
Approval Authority (Signature & Date)	
Date Reviewed	September 2020
Responsible for Review	Assistant Principal & First Aid Attendant/s 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.
Review Date	September 2021
References/ Links	<p>School Policy and Advisory Guide: Anaphylaxis Anaphylaxis management in schools Allergy & Anaphylaxis Australia: Risk minimisation strategies ASCIA Guidelines: Schooling and childcare Royal Children's Hospital: Allergy and immunology</p> <p>Related policies: Health Care Needs Health Support Planning Forms</p> <p>Resources: School Policy and Advisory Guide: Anaphylaxis School Policy and Advisory Guide: Anaphylaxis management in schools Allergy & Anaphylaxis Australia: Risk minimisation strategies ASCIA Guidelines: Schooling and childcare Royal Children's Hospital: Allergy and immunology Anaphylaxis - Policy Template (October 2018).docx Anaphylaxis - Annual Risk Management Checklist (June 2018).doc Anaphylaxis - Facilitator notes for twice annual briefings (June 2018).docx Anaphylaxis - Individual Management Plan.docx Anaphylaxis - Twice yearly briefing presentation.pptx</p> <p>VSC Ambulance protocol (TBC)</p>