anaphylaxis management policy

introduction

This policy complies with the Education and Training Reform Act (2006) Ministerial Order 706: Anaphylaxis Management in Victorian Schools and school boarding premises (version incorporating amendments made by Ministerial Order 1325 as of 29 April 2021), and guidelines related to anaphylaxis management in schools and school boarding premises as published and amended by the Department of Education from time to time.

This policy is inclusive of all Clarendon campuses and boarding premises.

background

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.

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 autoinjector for use in an emergency. These adrenaline autoinjectors are designed so that anyone can use them in an emergency.

individual anaphylaxis management plan (IAMP)

All students at Clarendon 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 Clarendon is responsible for developing a plan in consultation with the student's parents/carers.

The IAMP must be in place before the student's first day of attendance. **No student, who requires an IAMP, can attend school unless a current Anaphylaxis ASCIA Action Plan, Adrenaline Auto-injector within expiry, and signed IAMP are in place.**

responsibilities

School
The Principal will ensure that all students and families upon enrolment are asked about any severe life-threatening allergies.

The IAMP must include the following information:

- Information about the medical condition that relates to allergy and the potential for anaphylactic reaction, including the type of allergy or allergies the student has, based on a written diagnosis from a Medical Practitioner.
- Strategies to minimise the risk of exposure to known and notified allergens while the student is under the care or supervision of school staff or boarding premise staff, for on campus, off campus, boarding premise

settings including in school and out of school including in the school yard, at camps and excursions, or at special school events conducted, organised or attended by the school.
- The name of the person/department who is responsible for implementing the strategies.
- Information about where the child's medication will be stored.
- The student's emergency contact details.
- An action plan for anaphylaxis in a format approved by the ASCIA (ASCIA Action Plan) provided by the parent.
- Information about the signs or symptoms the student might exhibit in the event of an allergic reaction.

Parents/Guardians
- Parents must provide the school with a current template ASCIA Action Plan in colour, signed by a Medical Practitioner, with a current photograph of the child.
- Immediately inform the school via the enrolment page on hub if their child's medical condition insofar as it relates to allergy and the potential for anaphylactic reaction changes and if relevant provide an updated ASCIA Action Plan.
- 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 an adrenaline autoinjector that is current and not expired for their child. If there is no medical need for an alternate AAI an EpiPen must be the AAI supplied to the school. Students in Years 5-12 with an IAMP are expected to carry an additional AAI with them at all times in addition to the AAI supplied to the school.
- Review their child's Anaphylaxis details annually when re enrolling their child, checking all details of the action plan, including their contact details, student photo is current and are correct.
- Parents should supply the Health Centre with any other associated medications, which are indicated on the ASCIA Action Plan. These medications must be in the original packaging and within the expiry date.
- In the event of exposure to an allergen, parents will be asked to collect the student from school in order to closely monitor for the development of an anaphylactic reaction. Students who are boarders will be supervised in the Health Centre.
- Parents of students with an IAMP should ensure that where their child travels to school by bus, they inform the bus company of the IAMP so that risks of exposure to allergens can be minimised.

Review and Updates to Individual Anaphylaxis Management Plan:
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:
- Annually
- if the student's medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, changes;
- as soon as is practicable after a student has an anaphylactic reaction at school or boarding house premises;
- when a student is to participate in an off-site activity, such as a camp or excursion, or at special events conducted or organised by the school or the school boarding premises.

location of plans and adrenaline autoinjectors

Health Centre
The Health Centre has a digital and hard copy of all students anaphylaxis action plans relevant. Student action plans are also available to all staff via the hub and are automatically updated from the school enrolment portal.

ELC
AAIs and IAMPs for students with anaphylaxis are kept in the child's classroom. Copies of IAMPs are also held with the Risk and Compliance Manager.

Junior School
AAIs and IAMP'S for students with anaphylaxis are stored in the Junior School sick bay in individualised emergency response pouches.

Sturt Street Campus
AAI's and IAMP's for students with anaphylaxis are stored in their individualized emergency response pouch located in their relevant school office. Students with anaphylaxis in Year 5-12 carry their additional AAIs with them at all times. All Sturt Street students IAMPS are kept with the Risk and Compliance Manager.

Yuulong- AAI's and IAMPS for students with anaphylaxis are stored in their individualised emergency response pouch located in the Yuulong sick bay. Students with anaphylaxis in Year 5-12 carry their additional AAIs with them at all times.

Boarding Houses- AAI's and IAMPS for students with anaphylaxis are stored in the student's room and Boarding house tutor room.

adrenaline auto-injectors (AAIs) for general use

The Principal is responsible for arranging for the purchase of 'additional adrenaline autoinjectors for general use and as a back-up to those supplied by parents. This includes all campuses and Boarding services. The Principal will determine the number and type of AAI for general use to purchase an in doing so will consider all of the following:

- The number of students enrolled at the school and boarding premise that have been diagnosed with a medical condition that relates to allergy and the potential for anaphylactic reaction.
- the accessibility of the AAI that has been provided by parents.
- the availability of sufficient supply of adrenaline autoinjectors for general use in specified locations at the school and boarding premise, including in the school yard, and at excursions, camps and special events conducted, organised or attended by the school.
- that adrenaline autoinjectors 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.

Clarendon will ensure that there are AAIs for general use stored in the Health Centre; Middle School office; Senior School office; Performing Arts Centre office; Café College; Yuulong first aid room; Girls Boarding House; Boys Boarding House; Junior School sick bay; Junior School art room; Front Reception; Sewell Pavilion; Fitness Centre; Rowing sheds; and each of the ELC classrooms.

AAIs for general use will also be included in first aid kits for excursions, camps, and co-curricular activities according to the risk assessment completed by the Risk and Compliance manager. New AAIs will be purchased as necessary to ensure that there is at least one AAI within expiry date in each location and excursion. AAIs will be stored in unlocked, easily accessible places away from direct light and heat. They will be labelled for 'general use' and allocated by the Health Centre who will log their whereabouts.

When to Use Adrenaline Auto-injectors (AAIs) for General Use
AAIs for general use should be used when:

- a student's prescribed AAI does not work, is misplaced, out of date or has already been used; or
- when instructed by a medical officer after calling 000.

Off-site Activities
All portable first aid kits contain an AAI for General use and are taken on all off-site activities.
ELC and Junior school: The students' own AAIs are taken and carried by the supervising staff member in the First aid kit as well as General use AAI.
Sturt street campus, Boarding houses and Yuulong activities: Students in Years 5-12 carry their own AAIs as stated in the policy. Where this is not the case, the student's AAI is included in the first aid kit carried by the supervising staff member, together with an AAI for general use.

school management of anaphylaxis

Risk Minimisation Strategies
Clarendon recognises 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 allergens. However, as it is not possible to achieve a completely allergen-free environment in any service that is open to the general community, Clarendon does not claim to be an allergen-free environment.

Clarendon requires that all students and staff do not bring nuts or nut products on to the campuses or to any associated College activities, excursions or camps. Any food containing nuts or nut products that is brought on to the campuses will be confiscated.

In addition, the following apply in order to minimise the exposure of students with anaphylaxis to allergens:

1. **Identification of Students with IAMPs**
   - Before commencing teaching a particular class, teachers are required to ensure that they are aware of any medical conditions relating to students in their classes, including those with IAMPs.
   - Students with IAMPs are 'flagged' in Synergetic and on the Hub (student information portal) so that they can be clearly identified.
   - Photographs of each student with an IAMP are displayed in the relevant staffroom on each campus, in the relevant School Office the school kitchen and on HUB.

2. When a student with a medical condition that relates to allergy and the potential for anaphylaxis reaction is under the care or supervision of school boarding premises staff outside of normal activities of the school boarding premises, including camps and excursions, or at special events conducted, organised or attended by the school boarding premises, the provider must ensure that there is a sufficient number of staff present who have been training in accordance with clause 12.

3. Risk Management for Excursions, Camps or Special Events Conducted, Organised or Attended by the School

As part of the planning process for an excursion or camp, the member of staff organising the activity will be required by the Risk and Compliance Manager to generate a list of participating students with an IAMP. They will then be required to liaise with the listed parties as stated on the IAMP, if necessary, to ensure that the IAMP reflects the specific circumstances that will occur on the excursion, camp or event. Medical emergency response flow charts are included in the Student Medical summary books which are taken to the event by the staff member responsible, these are discussed in the Risk management meeting prior to the event.

Students in Years 5-12 carry their own AAIs as stated in the policy. Where this is not the case, the student's AAI is included in the first aid kit carried by the supervising staff member, together with an AAI for general use.

Around the School Campus

- Students with IAMP relating to insect bites should wear shoes at all times.
- School staff on yard duty at the Junior School are responsible for carrying a stocked first aid kit together with a charged mobile phone for prompt response to any exposure to an allergen.
- At the Sturt Street campus, staff who are trained in anaphylaxis will respond to any exposure to an allergen using our anaphylaxis emergency response pouches, Health Centre staff will attend within Health Centre hours.
- Lawns are mowed regularly to remove clover. Shrubs that attract bees are trimmed regularly.

Bringing Food to School

- Parents should not supply food to school for individual birthday celebrations or food to be handed out (for example, Easter eggs, Christmas foods, etc.).
- Drink bottles and lunch boxes provided by the parents of a student with an IAMP should be clearly labeled with the student's name.
- Students bringing their own lunch to school should not share it with others.
- Parents/guardians should not send nuts or nut products to school.
- Parents may be asked to refrain from sending specific food if it is deemed necessary to minimise the risk for an anaphylactic child in the homeroom.

Café College

- Café College staff have training in food allergen management and its implications on food-handling practices, including knowledge of the major food allergens triggering anaphylaxis, cross-contamination issues specific to food allergy and label reading.
- Tables and surfaces in dining areas are wiped down with warm soapy water regularly.

Boarding

- Boarding food prepared by school does not contain allergens.
- Café staff provided with list of boarding student allergens and food prepared without known allergens.
- Boarding student educated regarding allergen foods with are not to be in boarding premises.
- Anaphylaxis Action Plans located in boarding premises and known to boarding staff.

Food in Classrooms

- 'Treats' should be non-food related where possible; however, if food treats are used in class, parents of students with a food allergy (and IAMP) should be asked to provide alternative treats. Food for other students in the class should not contain a substance to which the student is allergic.
- Treat boxes should be clearly labelled and only handled by the student.
- Regular discussions should be conducted with relevant classes about the importance of students eating their own food and not sharing.
- Have regular discussions with students about the importance of hand washing.

Planned Class Events

ELC-Year 4: Parents of students with IAMPs will be advised ahead of time so that they can provide suitable foods and request that risk foods are avoided. Parents of students with allergies will be required to organise specific food for their child.

Years 5-12: The staff member organising the activity will ensure that any trigger foods for students in the class are excluded from the event and notify parents as is necessary.

school management and 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.

An up-to-date list of all students enrolled with anaphylaxis is monitored and maintained by the Health Centre.

School Activities and Events

- Application forms for activities on- or off-campus are mandatory for any special activity or event to occur. These forms require identification of students attending with an IAMP and details of how the risks of exposure to allergens will be minimised.
- It may be requested that parents/guardians of students with an allergy accompany their child to the school activity or fair.
- Where a coordinating group, such as an auxiliary, or student fundraising body is organising an event involving food, an ingredients list is required to be posted at the stall.
- Where events involving regular transport are involved (for example, travel to VET classes), the VET or work experience coordinator will provide copies of the IAMP to the course providers/experience supervisors.
- Students and staff are not permitted to sell fundraising confectionery unless approved by the Head of School.
- Staff planning craft-related activities should ensure that items such as egg cartons, milk containers, peanut butter jars, cereal boxes are not used.
- Parents should not supply food to be handed out without prior consent of the Risk and Compliance Manager.

Excursions and Camps

The planning of risk management for any off-campus excursion must include the following measures. Heads of School and Risk and Compliance Manager may not give approval for the excursion unless these measures are in place:

- Students with an IAMP attending the excursion must be specifically identified and specific planning must be in place to ensure that their exposure to allergens is minimised.
- The camp facility will be notified about any students with allergies.
- Any required clarification regarding camp menus must be discussed directly between camp staff, parents and organising Clarendon staff.
- Camps should avoid stocking peanut or tree nut products, including nut spreads. Products that 'may contain' traces of nuts, eggs or milk, for example, may be served, but not to students who are known to be allergic to that trigger.
- Ensure separate storage of foods containing allergens.
- The cook and staff observe food handling, preparation and serving practices to minimise the risk of cross contamination. This includes hygiene of surfaces in kitchen and children's eating area, food utensils and containers.
- There is a system in place to ensure the at-risk child is served only the food prepared for them.
- An at-risk child is served and consumes their food at a place considered to pose a low risk of contamination from allergens from another child's food. This place is not separate from all children and allows social inclusion at mealtimes.
- Children are supervised during eating.
- The first aid kit with the AAI will remain close to the student and school staff at all times.
- School will provide a general use AAI to go to camp in the first aid kit, even if there is no student at risk of anaphylaxis, as a back-up device in the event of an emergency.

Overseas Travel

Where the excursion involves overseas travel:

- Potential risks of all stages of travel, including transport, accommodation and flights should be investigated.
- Parents must ensure that the IAMP is translated, where appropriate.

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

Step	Action
1.	• 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 autoinjector or the school's general use autoinjector, and the student's Individual Anaphylaxis Management Plan, stored in Resk rescue response pouch in students relevant administration office. General use ASCIA anaphylaxis plans are wrapped around all Clarendon General use autoinjectors • 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.	Administer an EpiPen or EpiPen Jr • 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 **OR** Administer an Anapen® 500, Anapen® 300, or Anapen® Jr. • Pull off the black needle shield • Pull off grey safety cap (from the red button) • Place needle end firmly against the student's outer mid-thigh at 90 degrees (with or without clothing) • Press red button so it clicks and hold for 3 seconds • Remove Anapen® • Note the time the Anapen is administered • Retain the used Anapen to be handed to ambulance paramedics along with the time of administration
3.	Call an ambulance (000)
4.	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 autoinjectors are available.
5.	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.

Schools can use either the EpiPen® **and Anapen® on any student** suspected to be experiencing an anaphylactic reaction, regardless of the device prescribed in their ASCIA Action Plan.

Where possible, schools should consider using the correct dose of adrenaline autoinjector depending on the weight of the student. However, in an emergency if there is no other option available, any device should be administered to the student.

students with allergies to medication

- Students should not bring unauthorised medicines to school.
- When medication is given to students, appropriate procedures will be undertaken to ensure that exposure to allergens is minimised.
- Students are educated about medication allergies and the importance of taking medication prescribed only for them.

Students who ordinarily self-administer their AAI may not physically be able to do so. Under these circumstances, Clarendon staff must administer the AAI. Call 000 from the nearest phone.

In the event of an evacuation, the Health Centre, Junior School Office staff and Yuulong staff will follow the

Campus Emergency Management Plan taking with them first aid kits. Every effort will be made to retrieve student emergency response pouches. These are stored appropriately in these locations ready for this eventuality.

communication plan

This communication plan extends to boarding services with Clarendon as outlined below.

The Principal is responsible for ensuring that all relevant staff, including casual relief staff, canteen staff and volunteers, are aware of this policy and Clarendon's procedures for anaphylaxis management. This policy will be available via the Clarendon website so that parents and other members of the school community can easily access information about Clarendon's anaphylaxis management procedures including how to respond to an anaphylactic reaction. The parents and carers of students who are enrolled at Clarendon and are identified as being at risk of anaphylaxis will also be provided with a copy of this policy.

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.

staff training

The Principal ensures that school staff and boarding premise staff that are identified as requiring training under clause 12.1 and 12.4.1 respectively of ministerial order 706 are:

- Trained in accordance with clause 12: 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 **and** participate in a briefing at least twice per calendar year in accordance with clause 12.

The Principal will ensure that the following school staff are appropriately trained in anaphylaxis management:

- School staff who conduct classes that students who are at risk of anaphylaxis attend, including boarding premise staff that care or supervise students, must be trained in accordance with clause 12.
- School staff that the Principal identifies, based on an assessment of risk of an anaphylactic reaction occurring while the student is under the care or supervision of the school.
- Any further staff the provider of school boarding services identifies based on an assessment of the risk of an anaphylactic reaction occurring while a student is under the care or supervision of the provider of school boarding services.

anaphylaxis briefing

All Clarendon staff including boarding staff will participate in a briefing on anaphylaxis management and this policy occurring twice per calendar year, once at the beginning of the year and again at the beginning of term 3. The briefing is conducted by a staff member who has successfully completed an anaphylaxis management course in the last two years referred to in clause 12.2.1 and 12.4.1

The briefing will include:

- an overview of the school's anaphylaxis policy which is read by all staff as part of their competency readings.
- the causes, symptoms and treatment of anaphylaxis;
- the identities of students including photo who are at risk of anaphylaxis and where their medication is located.
- ASCIA Action plans include general use, individualized plans and ASCIA allergy plans.
- How to use an Autoinjector, including hands on practice with a trainer autoinjector
- The school's general first aid and emergency response procedures and where to find this information.
- The location of, access to, autoinjectors that have been provided by parents and purchased by clarendon for general use purposes.
- Online and face to face training courses in Anaphylaxis

When a new student enrolls at Clarendon who is at risk of anaphylaxis, 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.

A record of staff training courses and briefings will be maintained in Synergetic.

responsibilities of school staff

All Clarendon staff should:

- know and understand the School Anaphylaxis Management Policy;
- know the identity of students who are at risk of anaphylaxis;
- understand the causes, symptoms, and treatment of anaphylaxis;
- receive regular training in how to recognise and respond to an anaphylactic reaction, including administering an AAI;
- know where to find a copy of each student's IAMP quickly and follow the ASCIA Action Plan in the event of an allergic reaction;
- know where students' AAI and the AAI for general use are kept;
- make use of the training devices located in the staff room; and
- follow the general first aid and emergency response procedures.

annual risk management checklist

The Principal will ensure an annual risk management checklist is completed as published by DET to monitor compliance.