



DANDENONG HIGH SCHOOL

ANAPHYLAXIS MANAGEMENT POLICY

PURPOSE

To explain to Dandenong High School 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 Dandenong High School 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

Dandenong High School will fully comply with Ministerial Order 706 and the associated guidelines published by the Department of Education and Training.

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.

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 Plans

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

It is also required that all staff members, who are diagnosed by a medical practitioner as being at risk of suffering from an anaphylactic reaction, provide an Anaphylaxis Plan to the school.

Where necessary, an Individual Anaphylaxis Management Plan will be in place as soon as practicable after a student enrolls at Dandenong High School and where possible, before the student's first day.

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 autoinjector 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 autoinjectors

A copy of each student's Individual Anaphylaxis Management Plan will be stored with their ASCIA Action Plan for Anaphylaxis in the following locations:

- With personal adrenaline autoinjector located in the General Office of the school
- In each staff office at the school
- With each general use adrenaline autoinjector located at the school

Whilst some students keep their adrenaline autoinjector on their person, medication for those that do not will be stored and labelled with their name in the General Office of the school.

General use adrenaline autoinjectors are located in the following places:

- At the General Office of the school (10)
- One in each of the 7 House offices (with first aid kit in labelled filing cabinet) (7)
- At the Canteen (1)
- Food Tech pantry (1)
- At Melaleuca building. In the storage cupboard behind theatre counter (1)
- In the LRC. Staff room (1)

- In Jacaranda building. In the Careers Office (1)
- In the Product Design Centre. In the Teacher's Resource Hub above the sink (1)

Risk Minimisation Strategies

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

- students are discouraged from sharing food
- external garbage bins at school are to remain covered with lids to reduce the risk of attracting insects
- gloves must be worn when picking up papers or rubbish in any external area;
- school canteen staff are trained in appropriate food handling to reduce the risk of cross-contamination
- general use adrenaline autoinjectors are stored in a variety of locations for ease of access (see location of General use adrenaline autoinjectors for details)
- 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
- The school has 4 trained Anaphylaxis Supervisors
- Regular training and competency checks are conducted at the school
- Teachers of students who are anaphylactic are identified and given priority for training
- On excursions a staff member trained in the administration of an adrenaline autoinjector is included. A consultation with the student or parent and student is conducted prior to the excursion. The student must bring their own adrenaline autoinjector on the excursion. Staff carry 1 or more General use adrenaline autoinjectors
- If a student who is at risk of an anaphylactic reaction attends camp a copy of their individual Anaphylaxis Management Plan, ASCIA Action Plan, personal adrenaline autoinjector and sufficient General use adrenaline autoinjectors should be taken
- All food allergies are identified and communicated to campsites and external providers of food
- A risk management strategy should be developed for each student at risk of an anaphylactic reaction who is attending any excursion or camp
- Casual Relief Teachers should be supplied a folder containing the Anaphylaxis Management Plan and ASCIA Action plan of each student who is at risk of an anaphylactic reaction

Adrenaline autoinjectors for general use

Dandenong High School will maintain a supply of adrenaline autoinjector(s) 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 autoinjectors for general use will be stored in the following locations and labelled "general use".

- At the General Office of the school (10)
- One in each of the 7 House offices (with first aid kit in labelled filing cabinet) (7)
- At the Canteen (1)
- Food Tech pantry (1)
- At Melaleuca building. In the storage cupboard behind theatre counter (1)
- In the LRC. Staff room (1)
- In Jacaranda building. In the Careers Office (1)
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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'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 School PA and stored at School PA's Office located at the General Office. 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.

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 autoinjector or the school's general use autoinjector, and the student's Individual Anaphylaxis Management Plan, stored at the various locations with personal or General use adrenaline autoinjectors (see location of General Use adrenaline 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 (if the student is under 20kg) <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
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.

Communication Plan

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

The Principal is responsible for ensuring that all relevant staff, including casual relief staff, canteen staff and volunteers are aware of this policy and Dandenong High School's procedures for anaphylaxis management. All Casual relief staff and volunteers will receive an initial verbal briefing on this policy, their role in responding to an anaphylactic reaction and where required, the identity of students at risk. They will also be provided the documentation that contains, the Anaphylaxis Management Plan and ASCIA Action Plan for each student on each occasion they attend.

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:

- Four staff will be trained as Anaphylaxis Supervisors
- All school staff will complete the ASCIA online training and be passed as competent by one of the school Anaphylaxis Supervisors after completing the approved Competency Checking Process.
- Priority for training will be extended to staff trained as First Aide officers and to teaching staff who teach a student who is at risk of Anaphylaxis.

Staff who are required to undertake training must have completed:

Anaphylaxis Supervisors -

- an approved face-to-face anaphylaxis management training course in the last three years

Dandenong High School uses the following training course: School Anaphylaxis Supervisors complete 22579VIC through Hero HQ or 22578VIC and 10710NAT through an accredited training organisation.

General Staff -

- an approved online anaphylaxis management training course in the last two years and been approved as competent to administer an adrenaline autoinjector

These staff complete the ASCIA eTraining course and complete a competency check by one of the Anaphylaxis Supervisors.

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.

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
- the location of, and access to, adrenaline autoinjectors that have been provided by parents or purchased by the school for general use.

When a new student enrolls at Dandenong High School 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.

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.

FURTHER INFORMATION AND RESOURCES

- 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](#)
- For related policies please see Health Care Needs Policy and Administration of Medication Policy

REVIEW CYCLE AND EVALUATION

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.

POLICY REVIEW AND APPROVAL

Policy last reviewed	June 2023
Consultation	School Council, Newsletter and Compass Notification
Approved by	Principal
Next scheduled review date	June 2024