

ANAPHYLAXIS MANAGEMENT POLICY

1.0 INTRODUCTION

This Anaphylaxis Management Policy applies to Diocese of Sale Catholic Education Limited (**DOSCEL**) and to all of the primary and secondary Catholic schools it manages and operates in the Diocese of Sale in the State of Victoria (**schools**).

All DOSCEL schools will fully comply with *Ministerial Order 706: Anaphylaxis Management in Victorian Schools* (MO706) and the associated Anaphylaxis Guidelines (**Guidelines**) published by the Department of Education and Training, as varied or replaced from time to time.

2.0 PURPOSE

The purpose of this policy is to explain to staff, students, parent, carers and guardians and the wider school community the processes and procedures in place to support students diagnosed as being at risk of suffering from anaphylaxis.

On 14 July 2008, the *Children's Services and Education Legislation Amendment (Anaphylaxis Management) Act 2008* (Vic.) came into effect amending the *Children's Services Act 1996* (Vic.) and the *Education and Training Reform Act 2006* (Vic.) requiring that all licensed children's services and schools have an anaphylaxis management policy in place.

Ministerial Order 706 - Anaphylaxis Management in Victorian Schools outlines points that schools need to ensure are included in their Anaphylaxis Management Policy. A revised *Ministerial Order 706* came into effect on 3 December 2015.

3.0 DEFINITIONS

Anaphylaxis is a severe and sudden allergic reaction when a person is exposed to an allergen. Common allergens include:

- eggs
- peanuts
- tree nuts such as cashews
- cow's milk
- fish and shellfish

- wheat
- soy
- sesame
- insect stings and bites
- medications.

Signs of mild to moderate allergic reaction include:

- swelling of the lips, face and eyes
- hives or welts
- tingly mouth

 abdominal pain and / or vomiting (signs of a severe allergic reaction to insects). Signs of anaphylaxis (severe allergic reaction) include any **one** of the following:

- difficult / noisy breathing
- swelling of tongue
- swelling / tightness in throat
- difficulty talking and / or a hoarse voice
- wheeze or persistent cough

4.0 **GUIDELINES**

Guidelines have been developed to assist all Victorian schools to meet their duty of care to students at risk of anaphylaxis and to support those students.

The Guidelines support schools in complying with legislation, most critically the:

- *Education and Training Reform Act 2006*, which specifies that a school must have an anaphylaxis management policy if it has enrolled a student in circumstances where the school knows (or ought reasonably to know) that the student has been diagnosed as being at risk of anaphylaxis
- *Ministerial Order 706 Anaphylaxis Management in Victorian Schools*, which provides the regulatory framework for the management of anaphylaxis in all Victorian schools and prescribes what must be included in an anaphylaxis management policy as well as prescribing the training requirements for school staff working with students who are at risk of anaphylaxis.

The Guidelines include information on anaphylaxis including:

- legal obligations of schools in relation to anaphylaxis
- School Anaphylaxis Management Policy
- staff training
- individual Anaphylaxis Management Plans
- risk minimisation and prevention strategies
- school management and emergency responses
- adrenaline autoinjectors for general use
- communication Plan
- risk Management Checklist.

5.0 TRAINING REQUIREMENTS

Principals must ensure that school staff complete one of the following options to meet the anaphylaxis training requirements of MO706 and record the dates that training has occurred.

- persistent dizziness or collapse
- pale and floppy (young children)
- abdominal pain and / or vomiting (signs of a severe allergic reaction to insects).

6.0 IMPACT AT SCHOOL

An anaphylactic reaction can be traumatic for the student and others witnessing the reaction. In the event of an anaphylactic reaction, students and staff may benefit from post-incident counselling, provided, for example, by the school nurse, guidance officer, student welfare coordinator or school psychologist.

It is important to be aware that some students with anaphylaxis may not wish to be singled out or seen to be treated differently.

7.0 STRATEGIES

Strategy	Description
School Anaphylaxis Policy	This is a school-based policy that is required to be developed under s 4.3.1(6) of the <i>Education Training and Reform Act 2006</i> because the school has at least one enrolled student who has been diagnosed as being at risk of anaphylaxis.
	This policy describes the school's management of the risk of anaphylaxis. MO706 prescribes the matters which the policy must contain.
Prevention Strategies	Under MO706, a School's Policy must include prevention strategies used by the school to minimise the risk of an anaphylactic reaction.
Communication Plan	A plan developed by the school which provides information to all school staff, students and parents about anaphylaxis and the School's Anaphylaxis Management Policy.
Emergency Response	Procedures which each school develops for emergency response to anaphylactic reactions for all in-school and out-of-school activities.
	The procedures, which are included in the School's Anaphylaxis Management Policy, differ from the instructions listed on the ASCIA Action Plan of 'how to administer the Adrenaline Autoinjector'.
ASCIA Action Plans	An ASCIA Action Plan should be completed by the student's parents/guardians in consultation with the student's medical practitioner and a copy provided to the school.
	The plan must outline the student's known severe allergies and the emergency procedures to be taken in the event of an allergic reaction.
Individual Management Plans	An individual plan for each student at risk of anaphylaxis, developed in consultation with the student's parents. These plans include the ASCIA Action Plan which describes the student's allergies, symptoms and the emergency response to administer the student's Adrenaline Autoinjector should the student display symptoms of an anaphylactic reaction.

This table describes how schools manage students with anaphylaxis.

Strategy	Description
Annual Risk Management Checklist	Principals need to complete an annual Anaphylaxis Risk Management Checklist to monitor their compliance with their legal obligations and the Guidelines.
Purchase additional adrenaline auto- injection devices	Schools with students at risk of anaphylaxis must purchase a spare or 'backup' adrenaline auto-injection device(s) as part of school first aid kit(s), for general use. Schools can purchase an adrenaline auto-injection device at local chemists. (Schools must regularly check the expiry date of the backup device). Schools must determine the number of backup adrenaline autoinjector devices to be purchased for general use, considering the number of diagnosed students attending the school and the likely availability of a backup device in various settings, including school excursions and camps.
Training	All school staff with a duty of care responsibility for the wellbeing of students at risk of anaphylaxis should receive training in how to recognise and respond to an anaphylactic reaction including administering an adrenaline autoinjector (i.e. EpiPen®).
Encouraging camps and special event participation	 Schools should ask the parents/guardians to complete the school's Medical Information Form Note: Consideration should be given to the food provided. See: Related policies for: Health Care Needs
Communicating with parents	Regularly communicate with the student's parents about the student's successes, development, changes and any health and education concerns.

8.0 RELATED POLICIES AND RESOURCES

- DOSCEL Duty of Care Policy
- DOSCEL First Aid Policy
- DOSCEL Health Care Needs Policy
- DOSCEL Off-Site Supervision of Students Policy
- DOSCEL On-Site Supervision of Students Policy
- DOSCEL Responding to Anaphylaxis Policy
- DOSCEL Anaphylaxis Annual Risk Management Checklist
- Individual Anaphylaxis Management Plan Template

9.0 **REFERENCES**

- Children's Services and Education Legislation Amendment (Anaphylaxis Management) Act 2008
- <u>Ministerial Order 90 (repealed on 22 April 2014)</u>
- <u>Ministerial Order 706 (updated on 3 December 2015)</u>
- Department of Education and Training <u>Anaphylaxis Guidelines</u>

10.0 OTHER RESOURCES

- <u>Allergies & Anaphylaxis Australia</u> about living with anaphylaxis
- <u>ASCIA Guidelines</u> for prevention of food related <u>anaphylactic</u> reactions in schools, preschools and childcare
- Royal Children's Hospital: Allergy and Immunology
- <u>Royal Children's Hospital Anaphylaxis Support Advisory Line</u> for all school anaphylaxis management enquires, (including the implementation of Ministerial Order 706). The <u>advisory</u> line is available between the hours of 8.30 am to 5.00 pm, Monday to Friday via phone 1300 725 911 or (03) 9345 4235.

11.0 REVIEW

Implementation Date: December 2020

Review Date: December 2022