# **RATIONALE**

The principal takes reasonable steps to ensure each Our Lady of Mercy College staff member has adequate knowledge and training about allergies, anaphylaxis, and the school's expectations in responding to an anaphylactic reaction. The principal is responsible for ensuring that all staff undertake and successfully complete appropriate training for anaphylaxis management in accordance with Ministerial Order 706. Our Lady of Mercy College will conduct twice yearly anaphylaxis management staff briefings including information set out by the Department of Education (DE) for use in Victorian schools, with one briefing at the commencement of the school year.

#### **DEFINITIONS**

**Anaphylaxis** – a severe, rapidly progressive allergic reaction that is potentially life threatening. Peanuts, eggs, tree nuts (e.g., cashews), cow's milk, fish and shellfish, wheat, soy, latex, certain insect stings and medication are currently the most frequent allergens for school-aged children.

**Anaphylaxis supervisors** – trained staff who provide competency checks to assess their colleagues' ability to use an auto-injector (EpiPen). At OLMC, the Anaphylaxis supervisors are the College nurses.

**Anaphylaxis risk management** – in schools, this requires knowledge of those students who have been diagnosed at risk, awareness of triggers (allergens), and the measures taken to reduce the risk of exposure of these triggers. Partnerships between the College and parents are important in ensuring a safe environment for the student.

**Emergency treatment** – first aid treatment of Anaphylaxis is adrenaline. In a community setting, adrenaline is administered via an auto injecting device (EpiPen), following the instructions on the individual's Australian Society of Clinical Immunology and Allergy (ASCIA) Anaphylaxis Action Plan).

**ASCIA** – an acronym, short for Australasian Society of Clinical Immunology and Allergy, the peak professional body of clinical immunology and allergy in Australia and New Zealand.

**ASCIA Action Plan** – the plan that is a nationally recognised action plan for anaphylaxis developed by ASCIA. These plans are device specific; that is, they list the student's prescribed adrenaline autoinjector (e.g., EpiPen® or EpiPen® Jr) and must be completed by the student's medical practitioner. Should a different adrenaline autoinjector become available in Australia, then a different ASCIA Action Plan specific to that device would be developed. This plan is one of the components of the student's Individual Anaphylaxis Management Plan.

AutoinjectnID 18(h)0.5 (la)10.6 (s)j[-)-6 ()TjEM (n1]0.005 Tc -0.005 Tw [t)6.6 (h)0.6 (e)4.4 e)4.4 (t)6.6 (is)7.5 (,.8)

#### **PROCEDURES**

### 1. Communication with parents/guardians/carers for management information

The principal or delegate engages with the parents/guardians/carers of students at risk of anaphylaxis to develop risk minimisation strategies and management strategies.

The principal or delegate requires that parents/guardians/carers provide up to date medical information and an updated Individual Action Plan (ASCIA Action Plan) signed by the treating medical practitioner together with a recent photo of their child and any medications and autoinjectors referenced in the plan and recommended for administration.

## 2. Individual Anaphylaxis Management Plans

The principal is responsible for ensuring that all students who have been diagnosed by a medical practitioner as having a medical condition that relates to allergy and the potential for anaphylactic reaction have an Individual Anaphylaxis Management Plan (IAMP) developed in consultation with the student's parents/guardians/carers.

Refer to Appendix 1: Template – Individual Anaphylaxis Management Plan

Our Lady of Mercy College requires the IAMP to be in place as soon as practicable after the student is enrolled and where possible before their first day of sc (ipa)1.2 (I i4 Tw -36.361 (e)-7(-)-p)-7.4 (h)933 consultation w22s parents3.3 (iv)4.8 (id)36 (s)7.5 ( (a)1.2 (r)4.9 (d)3.2 (ia)1.3 (n)37 (e)4.4 id)36 (s)de fro1ss6s6s(s)

- during classroom activities (including class rotations, specialist and elective classes)
- between classes and other breaks
- in canteens
- during recess and lunchtimes
- before and after school where supervision is provided (excluding OSHC)
- special events including incursions, sports, cultural days, fetes or class parties, excursions and camps.

The details of these minimisation and prevention strategies are outlined in **Appendix 5**.

The College will <u>not</u> ban certain types of foods (e.g., nuts) as it is not practicable to do so, and is not a strategy recommended by the Department of Education or the Royal Children's Hospital. However, the College will:

- avoid the use of nut-based products in all school activities,
- request that parents do not send those items to school if at all possible;
- require the canteen eliminate or reduce the likelihood of such allergens;
- reinforce rules about not sharing and not eating foods provided from home.

The College will regularly review the risk minimisation and prevention strategies outlined in Risk minimisation strategies for schools in light of information provided by parents/guardians/caregivers related to the risk of anaphylaxis.

## Register of Students at Risk of Anaphylactic reactions, location, storage and accessibility of Autoinjectors

Students are responsible for carrying their own EpiPen at all times while at the College and at sport, special occasions and on excursions. A second back-up EpiPen supplied by the parents is stored in the Medical Centre in an individual bag which is labelled and has a photograph of the student attached. Each individual bag also contains the student's ASCIA Anaphylaxis Action Plan.

This bag must be collected from the Medical Centre before a student with Anaphylaxis leaves the Campus. A student with Anaphylaxis must also have their own epipen before leaving the Campus.

General use/unassigned EpiPens are also located in several areas of the campus:

- Outside the Physical Education Office, Nalleijerring Centre in the AED Cabinet (2)
- DAT Centre Level 1 in the AED Cabinet ground floor (2)
- Medical Centre (2).

#### Autoinjector for general use

Autoinjectors for general use will be used when:

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

#### 5. Emergency Management Procedures

The College's first aid and emergency management procedures plan will be followed in responding to a student's anaphylactic reaction. The procedures are derived from ASCIA Action Plans. (refer **Appendix 4**).

<u>Appendix 3,</u> titled 'Responding to An Anaphylaxis Reaction in Different College Settings', presents details of the College's emergency management procedures as these apply for different campus areas and for offsite activities.

#### 6. Staff Training

In compliance with Ministerial Order 706, it is recommended that all Victorian school staff undertake one of two accredited training options.

#### Option 1. All school staff complete the online

and have their competency in using an autoinjector tested by the school Anaphylaxis Supervisor in person within 30 days of completing the course. Staff are required to complete the ACSIA online training every two years.

The College nurses are the delegated School Anaphylaxis Supervisors. A key role they undertake is competency checks on all staff who have successfully completed the ASCIA online training course.

The school Anaphylaxis Supervisor will have completed Course in Verifying the Correct Use of Adrenaline Injector Devices 22579VIC – at no cost for Victorian Catholic schools from HERO HQ.

At all times while the student is under the care or supervision of the College, including on excursions and special event days, the principal will ensure that there is a sufficient number of staff present who have up-to-date training in anaphylaxis management.

## Twice Yearly Staff Briefing

The principal ensures that twice-yearly anaphylaxis management briefings are conducted, with one briefing held at the start of the year. The briefing is conducted by the College's Anaphylaxis Supervisor(s) and draws on the template presentation provided by the Department of Education for use in Victorian schools. It includes information about:

- legal requirements as outlined in Ministerial Order 706;
- OLMC's anaphylaxis management policy;
- causes, signs and symptoms of anaphylaxis;
- pictures of students at risk of anaphylaxis, details of their year level, allergens, medical condition and risk management plans, including the location of their medication;
- the ASCIA Action Plan for Anaphylaxis and how to use an auto injector;
- general first aid and emergency responses at OLMC;
- the location of and access to auto injectors that have been provided by parents or purchased by the College for general use

#### 7. Anaphylaxis Communication Plan

The principal is responsible for ensuring that a communication plan is developed and observed that provides:

- information to all staff, students and parents about anaphylaxis and the College's Anaphylaxis Management Policy;
- strategies for advising staff, students and parents about how to respond to an anaphylactic reaction occurring during normal school activities, including in a classroom, in the school yard, on school excursions, on school camhool cishe cTD(7.)Tj0 Tc 0 (e)4.4 (s)9.4 (o)9.4 (l c)1.ex a

This Student Individual Anaphylaxis Management Plan has been developed with my knowledge and input.

This Student Individual Anaphylaxis Management Plan and the Anaphylaxis Action Plan will be reviewed on any of the following occurrences (whichever happen earlier):

- annually;
- if the student's medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, changes;
- as soon as practicable after the student has an anaphylactic reaction at School; and
- when the student is to participate in an off-site activity, such as camps and excursions, or at special events conducted or attended by the College (e.g., class parties, elective subjects, cultural days, fetes, incursions).

I have been consulted in the development of this Individual Anarchylaxis M (all)-ctpmv k

n

# **OLMC Anaphylaxis Communication Plan**

# **Raising Staff Awareness**

All staff complete ASCIA online e-training for Victorian schools which is valid for 2 years. On completion of the online module, staff are required to be assessed by the OLMC Anaphylaxis Supervisors to determine competency in administering an adrenaline auto injector.

Two College nurses have completed 22303VIC training to act as the College Anaphylaxis Supervisors.

In addition to the training outlined above, staff briefings will be held twice yearly and will include information on:

- The College Anaphylaxis Management Policy and the legal requirements as outlined in Ministerial Order No 706;
- Any changes made to departmental guidelines or ASCIA Action Plans;
- Causes, symptoms and first aid management of Anaphylaxis;
- The identity of students at risk of Anaphylaxis by using photographs in slideshow and by

## Raising Awareness in the College Community

Information regarding Anaphylaxis and allergies, any changes to guidelines or ASCIA action plans, and general news such as important allergy alerts is published in the College e-newsletter.

# **Working with Parents**

On commencement at the College, at Year 7 admission or when newly diagnosed, parents of students at risk of Anaphylaxis receive a package containing:

- The College Anaphylaxis Management Policy
- The template for an Individual Anaphylaxis Plan
- A colour copy of a current ASCIA Anaphylaxis Action Plan.

#### Parents are required to:

- provide the College with an ASCIA Action Plan signed and dated by their daughter's treating Doctor and that includes an current colour photograph;
- supply an auto injector to be carried at all times by the student;
- supply a second adrenaline auto injector that is stored in the medical centre as a backup;
- work with the College to develop an Individual Anaphylaxis Management Plan, to be reviewed annually or when required;
- give permission for their daughter's photograph to be displayed on SIMON for staff education purposes.

# Responding to an Anaphylaxis Reaction in Different College Settings

In the event of an anaphylactic reaction, staff members must follow the instructions on the ASCIA Action Plan for Anaphylaxis.

#### **College Grounds and Classrooms**

- Student is not to stand or walk. If breathing is difficult, allow student to sit. If possible, lie flat and elevate legs.
- For insect allergy, flick out the sting if visible.
- Stay with the student and call other staff for help. Do not send or walk the student to the Medical Centre. Even if a nurse is available, it is your responsibility to initiate an emergency.
- Send someone to the closest phone to call the Medical Centre (2205) or Student Reception (3369), stating the student's name and that it is an anaphylaxis emergency. Also, alert a general response at Reception (2222) and give the location and details of the anaphylaxis emergency. A First Aid trained staff member will respond.
- Medical Centre or Student Reception staff will locate the student's EpiPen and Action plan from the Medical Centre, along with a spare generic EpiPen, and take to the student.
- Following the instructions on the student's Action Plan and assessing the student for signs of anaphylaxis, the EpiPen, if required, should be delivered without delay (noting the time delivered).
- An ambulance will 003e called, 11 re.6 (\$756 re.6 (\$756 fe.6 (1) 70 Tw 3.956 3373 re.) 44.4 (r) 45 (() 0.5 04 (a) put red ld-3 r 10.6 (

- Staff in charge of the students at risk of anaphylaxis are to carry the student spare EpiPen and Anaphylaxis Action plan obtained from the Medical Centre, as well as a charged mobile phone.
- Where the event is a whole College event, such as a Swimming or Athletics Carnival, the spare EpiPen for all students at risk of anaphylaxis is to be kept in a central location, such as the First Aid station.
- At events' locations where first aid may be limited, a college spare generic EpiPen/s must be taken as back up.

# **ASCIA**

# Risk Management and prevention Strategies in Different College Settings

# 1. Learning Areas / Classrooms

• A copy of each student's Individual Anaphylaxis Management Plan is located in the Medical Centre.

•

#### 3. School Grounds

- When a student enrols at OLMC, her Individual Anaphylaxis Management Plan is developed, triggers are noted and where possible the risk is minimised.
- All staff are trained to respond to an Anaphylactic emergency by completing ASCIA Anaphylaxis E-training for Victorian schools every 2 years.
- All students with Anaphylaxis have their ASCIA Anaphylaxis Action Plan uploaded to SIMON.
- Students required to carry EpiPen at all times.
- The College regularly reviews plans to ensure that sufficient school staff trained in the administration of the adrenaline autoinjector (i.e., EpiPen®) are on yard duty and are able to access and autoinjector and respond quickly to an allergic reaction if needed.
- The College ensures that EpiPens and individual Anaphylaxis Plans are easily accessible from the school grounds

# 4. Special Events (e.g., sporting events, incursions, class parties)

- The College ensures that sufficient staff who have been trained in the administration of an autoinjector are supervising students and are be able to respond quickly to an anaphylactic reaction if required.
- Staff avoid using food as rewards.
- College staff consult with parents in advance of planned special events to either develop an
  alternative food menu or request the parent send a meal for the student/s at risk.
- Party balloons are not used if a student has an allergy to latex.

# 5. Out of School Settings/Excursions/Camps/Tours

## Travel to and from school by bus

• The adrenaline autoinjector and ASCIA Action Plan for Anaphylaxis must be with the student on the bus.

## Field Trips/excursion/sporting events

- A Risk Assessment is undertaken for each individual student attending. If a student/s at risk of anaphylaxis is attending, sufficient school staff supervising the special event are trained in the administration of an adrenaline autoinjector and are able to respond quickly to an anaphylactic reaction if required.
- The adrenaline autoinjector and a copy of the individual ASCIA Action Plan for Anaphylaxis for each student at risk of anaphylaxis is easily accessible and school staff are aware of their exact location.
- Prior to the excursion taking place, staff consult with the student's parents and medical practitioner (if necessary) to review the student's Individual Anaphylaxis Management Plan and to ensure that it is up to date and relevant to the particular excursion activity.
- If the field trip, excursion or special event is being held at another school, then that school is notified ahead of time that a student at risk of anaphylaxis is attending. Appropriate risk minimisation strategies are discussed ahead of time so that the roles and responsibilities of the host and visiting school are clear.
- Students at risk of anaphylaxis take their own adrenaline autoinjector with them to events being held at other schools.

#### **Camps or Remote Settings**

- Prior to engaging a camp owner/operator's services, the College makes enquiries as to whether
  the operator can provide food that is safe for any anaphylactic students that may be attending.
- Prior to the camp taking place, staff consult with the student's parents to review the Individual Anaphylaxis Management Plan/s to ensure that it is up to date and relevant to the circumstances of the particular camp. Schools seek support from parents to advise students with allergies to insects to wear closed shoes and long-sleeved garments when outdoors, also, to stay away from water or flowering plants.
- College staff conduct a risk assessment and develop a risk management strategy for any student/s at risk of anaphylaxis while they are on camp. It is developed in consultation with

parents of students at risk of anaphylaxis and with camp owners/operators prior to the camp's commencement.

• The camp owner/operator is expected to ensupe eprior ted cam