



# ST. JOSEPH'S COLLEGE

CATHOLIC EDUCATION IN THE BRIGIDINE  
TRADITION



## ANAPHYLAXIS MANAGEMENT

### Management of Students at Risk of Anaphylaxis

This policy follows the authority provided in the Victorian Anaphylaxis Guidelines: A resource for managing severe allergies in Victorian Schools published by the Victorian Department of Education, and Ministerial Order No 706: Anaphylaxis Management in Victorian Schools, and was written in collaboration with **Allergy & Anaphylaxis Australia**.

### Source of Obligation

The Education and Training Reform Act 2006 (Vic) (s 4.3.1 (6)(c)) requires all schools to develop an anaphylaxis management policy, where the school knows or ought to reasonably know, that a student enrolled at the school has been diagnosed as being at risk of anaphylaxis.

Ministerial Order No. 706: Anaphylaxis Management in Victorian Schools' prescribes specific matters that schools applying for registration and registered schools in Victoria must contain in their anaphylaxis management policy for the purposes of section 4.3.1 (6)(c) of the Act.

### The Hazard – Anaphylaxis

Anaphylaxis is the most severe form of allergic reaction. Individuals can have a mild, moderate or severe allergic reaction. Anaphylaxis is a severe, rapidly progressive allergic reaction that is potentially life-threatening. The most common allergies in school-aged children are peanuts, cow's milk, egg, tree nuts (e.g. cashews and walnuts), wheat, soy, sesame and certain insect bites and stings (particularly bees, wasps, ants and ticks).

The key to prevention of anaphylaxis in school is knowledge of students who have been diagnosed as at risk, awareness of allergies and prevention of exposure to those triggers that cause allergic reactions.

Partnerships between the College and parents/guardians are important in helping students avoid exposure as well as age-appropriate education for students.

Adrenaline given through an adrenaline (epinephrine) autoinjector (such as an EpiPen® or EpiPen® Jr) into the muscle of the outer mid-thigh is the first aid treatment for anaphylaxis. Adrenaline autoinjectors are designed for use by laypeople.

It is important to remember that minimisation strategies to help reduce the risk of anaphylaxis are everyone's responsibility, including the Principal and all College staff, parents/guardians, students and the broader College community.

### **St Joseph's College's Policy**

St. Joseph's College is committed to providing a safe learning environment for all our students and complying with Ministerial Order No. 706: Anaphylaxis Management in Victorian Schools, and the Department of Education and Training's Anaphylaxis Guidelines as amended by the Department from time to time.

The College recognises that while policies and procedures to reduce the risk of an allergic reaction can be developed and maintained, they cannot achieve a completely allergen-free environment.

It is critical that staff can recognise an allergic reaction and a potential anaphylaxis risk and treat it appropriately in an emergency.

It is our policy to:

- provide, as far as practicable, a safe and supportive environment in which students at risk of anaphylaxis can participate equally in all aspects of schooling
- raise awareness of food and insect allergy and the risk of anaphylaxis and the College's anaphylaxis management policy in the College community
- engage with parents/guardians of each student at risk of anaphylaxis when assessing risks and developing risk minimisation strategies for the student
- ensure that staff have knowledge about allergies, can recognise an allergic reaction including anaphylaxis and understand the College's policy and guidelines and emergency procedures in responding to anaphylaxis.

### **Our Duty of Care**

The College has a common law duty of care to put in place strategies to manage students at risk of anaphylaxis while they are at the College and engaged in College-related activities.

When a student is diagnosed as being at risk of anaphylaxis, the exercise of the College's duty of care requires the development of an Individual Anaphylaxis Management Plan, which includes an ASCIA Action Plan for Anaphylaxis (emergency response plan) below and risk minimisation strategies.

**ascia**  
www.allergy.org.au

**ACTION PLAN FOR Anaphylaxis**  
For use with EpiPen® adrenaline (epinephrine) autoinjectors

Name: \_\_\_\_\_  
Date of birth: \_\_\_\_\_

Confirmed allergens: \_\_\_\_\_

Family/emergency contact name(s): \_\_\_\_\_  
Work Pt: \_\_\_\_\_  
Home Pt: \_\_\_\_\_  
Mobile Pt: \_\_\_\_\_  
Prepared by doctor or nurse practitioner (date): \_\_\_\_\_

The treating doctor or eg family authorities:  
• Medications specified on this plan to be administered according to the plan.  
• Prescription of 2 adrenaline autoinjectors.  
• Review of this plan is due by the date below.  
Date: \_\_\_\_\_  
Signed: \_\_\_\_\_

**How to give EpiPen® adrenaline (epinephrine) autoinjectors**

1. Flick the top of the EpiPen and PULL OFF BLUE SAFETY RELEASE
2. Hold leg with one hand and PLACE ORANGE END against outer thigh (with or without clothing)
3. Push DOWN HARD until a click is heard or feel and hold in place for 3 seconds. REMOVE EpiPen®

EpiPen® is prescribed for children over 20kg and adults. EpiPen® Jr is prescribed for children 15-20kg.

**SIGNS OF MILD TO MODERATE ALLERGIC REACTION**

- Swelling of lips, face, eyes
- Hives or welts
- Tingling mouth
- Abdominal pain, vomiting (these are signs of anaphylaxis for insect allergy)

**ACTION FOR MILD TO MODERATE ALLERGIC REACTION**

- For insect allergy - flick out stinging if visible
- For tick allergy  seek medical help or  freeze tick and let it drop off
- Stay with person and call for help
- Locate adrenaline autoinjector
- Give other medications (if prescribed)
- Phone family/emergency contact

Mild to moderate allergic reactions (such as hives or swelling) may not always occur before anaphylaxis

**WATCH FOR ANY ONE OF THE FOLLOWING SIGNS OF ANAPHYLAXIS (SEVERE ALLERGIC REACTION)**

- Difficult/noisy breathing
- Swelling of tongue
- Swelling/tightness in throat
- Wheeze or persistent cough
- Difficulty talking and/or hoarse voice
- Persistent dizziness or collapse
- Pale and floppy (young children)

**ACTION FOR ANAPHYLAXIS**

1. Lay person flat - do NOT allow them to stand or walk
  - If unconscious, place in recovery position
  - If breathing is difficult allow them to sit
2. Give adrenaline autoinjector
3. Phone ambulance - 000 (AU) or 111 (NZ)
4. Phone family/emergency contact
5. Further adrenaline doses may be given if no response after 5 minutes
6. Transfer person to hospital for at least 4 hours of observation

**If in doubt give adrenaline autoinjector**  
Commence CPR at any time if person is unresponsive and not breathing normally

**ALWAYS give adrenaline autoinjector FIRST, and then asthma reliever puffer** if someone with known asthma and allergy to food, insects or medication has **SUDDEN BREATHING DIFFICULTY** (including wheeze, persistent cough or hoarse voice) even if there are no skin symptoms.

Asthma reliever medication prescribed:  Y  N

• If adrenaline is accidentally injected (e.g. into a thumb) phone your local poisons information centre.  
• Continue to follow this action plan for the person with the allergic reaction.

Students at risk of allergic reactions, including anaphylaxis, could also be singled out or subjected to bullying behaviour within the wider College community. As part of our **Bullying Prevention and Intervention** policy, the College maintains an atmosphere of respectful relationships and actively develops and implements programs for bullying prevention, provides support for any student who is at risk of being bullied and empowers the whole College community to recognise and respond appropriately to bullying and behave as responsible bystanders.

## Safe Work Practices

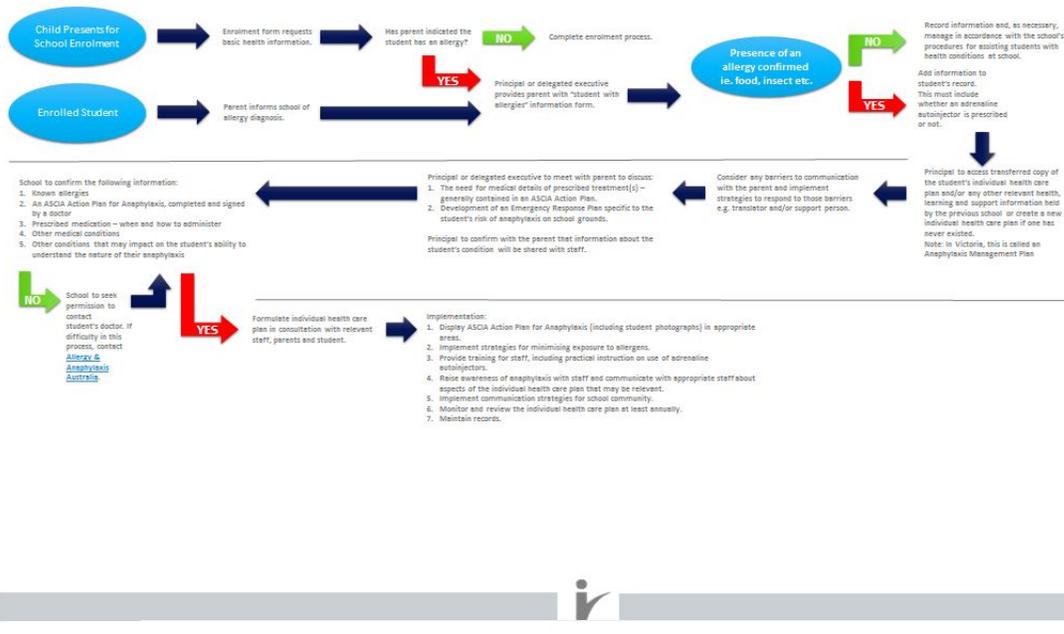
College has developed the following work practices and procedures for managing the risk of anaphylaxis:

### Individual Anaphylaxis Management Plans

(This plan includes Risk Minimisation Strategies)

- **Adrenaline Autoinjectors – Purchase, Storage and Use**
- **Communication Plan**
- **Emergency Response Procedures**
- **Staff Training**
- **Risk Management Checklist.**

St. Joseph's College has also developed a **flowchart (below)** which outlines our practices for enrolled students or students presenting for enrolment.



## Risk Management Checklist

The Principal or College Anaphylaxis Supervisor completes an annual **Risk Management Checklist** included in the **Anaphylaxis Guidelines for Victorian Schools**, to monitor our obligations.

We regularly check the Department of Education and Training's **Anaphylaxis Management in Schools** page to ensure the latest version of the **Risk Management Checklist** is used.

## Roles and Responsibilities: Principal

The Principal is responsible for:

- ensuring that the College develops, implements and annually reviews this policy in accordance with the Order and the Guidelines
- actively seeking information to identify students with allergies to food and insects for example, that have not been prescribed an adrenaline autoinjector and those who have been diagnosed as being at risk of anaphylaxis and been prescribed an adrenaline autoinjector, either at enrolment or at the time of diagnosis (whichever is earlier)
- ensuring that parents/guardians provide an ASCIA Action Plan which has been completed and signed by the student's medical practitioner and contains an up-to-date photograph of the student
- ensuring that an Individual Anaphylaxis Management Plan is developed in consultation with the student's parents/guardians for any student that has been diagnosed by a medical practitioner with

a medical condition relating to allergy and the potential for an anaphylaxis, where the College has been notified of that diagnosis

- ensuring that an Interim Individual Anaphylaxis Management Plan is developed for a student where:
  - the College has not been notified of a student's potential for anaphylaxis, but there is reason to believe that the student is at risk (e.g. where the parents/guardians have not told the school about any allergies, but the student mentions it in class), or
  - a student's adrenaline autoinjector has been used or lost and not yet replaced, or
  - a student's adrenaline autoinjector is identified as out of date or cloudy/discooured, or
  - relevant training has not occurred for a member of staff who has a child in their class at risk of anaphylaxis.
- ensuring students' Individual Anaphylaxis Management Plans are appropriately communicated to all relevant staff
- ensuring that the canteen provider and all of its employees can demonstrate satisfactory training in the area of food allergy and anaphylaxis and its implications for food-handling practices. See **free online training for food service staff**
- ensuring that parents/guardians provide the College with an adrenaline autoinjector for their child that is not out-of-date and a replacement adrenaline autoinjector when requested to do so
- ensuring that an appropriate **Communication Plan** is developed to provide information to all College staff, students and parents/guardians about anaphylaxis and this policy
- ensuring there are procedures in place for providing information to College volunteers and casual relief staff about students who are at risk of anaphylaxis and their role in recognising an allergic reaction and responding to an allergic reaction, including anaphylaxis, of a student in their care
- ensuring that relevant College staff have successfully completed an approved anaphylaxis management training course and that their accreditation is current
- ensuring that College staff who are appointed as College Anaphylaxis Supervisors are appropriately trained in conducting autoinjector competency checks and that their accreditation is current

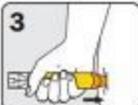
- ensuring that all College staff are briefed at least twice a year by a College Anaphylaxis Supervisor (or other appropriately trained member of the College staff), with the first briefing to occur at the start of each year
- allocating time, such as during staff meetings, to discuss, practise and review this policy
- encouraging regular and ongoing communication between parents/guardians and College staff about the current status of the student's allergies, the College's policies and their implementation
- ensuring that the student's Individual Anaphylaxis Management Plan is reviewed in consultation with parents/guardians annually at the beginning of each school year, when the student's medical condition changes, as soon as practicable after a student has an anaphylaxis at the College, and whenever a student is to participate in an off-site activity such as camps or excursions or at special events conducted, organised or attended by the College
- ensuring the **Risk Management Checklist** for anaphylaxis is completed and reviewed annually
- arranging to purchase and maintain an appropriate number of adrenaline autoinjectors for general use to be part of the College's first aid kit, stored with a copy of the **ASCIA Action Plan for Anaphylaxis** (Orange) for general use.

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## FIRST AID PLAN FOR Anaphylaxis

For use with **EpiPen®** adrenaline (epinephrine) autoinjectors

### How to give EpiPen® adrenaline (epinephrine) autoinjectors

-   
Form fist around EpiPen® and PULL OFF BLUE SAFETY RELEASE
-   
Hold leg still and PLACE ORANGE END against outer mid-thigh (with or without clothing)
-   
PUSH ORANGE END until a click is heard or felt and hold in place for 3 seconds  
REMOVE EpiPen®

EpiPen® is prescribed for children over 20kg and adults. EpiPen® Jr is prescribed for children 7.5-20kg.

### SIGNS OF MILD TO MODERATE ALLERGIC REACTION

- Swelling of lips, face, eyes
- Hives or welts
- Tingling mouth
- Abdominal pain, vomiting (these are signs of anaphylaxis for insect allergy)

### ACTION FOR MILD TO MODERATE ALLERGIC REACTION

- For insect allergy - flick out sting if visible
- For tick allergy seek medical help or freeze tick and let it drop off
- Stay with person and call for help
- Locate adrenaline autoinjector
- Phone family/emergency contact

Mild to moderate allergic reactions (such as hives or swelling) may not always occur before anaphylaxis.

### WATCH FOR ANY ONE OF THE FOLLOWING SIGNS OF ANAPHYLAXIS (SEVERE ALLERGIC REACTION)

- Difficult/raucy breathing
- Swelling of tongue
- Swelling/tightness in throat
- Wheezes or persistent cough
- Difficulty talking and/or hoarse voice
- Persistent dizziness or collapse
- Pale and floppy (young children)

### ACTION FOR ANAPHYLAXIS

- Lay person flat - do NOT allow them to stand or walk.
  - If unconscious, place in recovery position
  - If breathing is difficult allow them to sit
- Give adrenaline autoinjector
- Phone ambulance - 000 (AU) or 111 (NZ)
- Phone family/emergency contact
- Further adrenaline doses may be given if no response after 5 minutes
- Transfer person to hospital for at least 4 hours of observation

**If in doubt give adrenaline autoinjector**

Commence CPR at any time if person is unresponsive and not breathing normally

**ALWAYS give adrenaline autoinjector FIRST, if someone has SEVERE AND SUDDEN BREATHING DIFFICULTY (including wheezes, persistent cough or hoarse voice), even if there are no skin symptoms. THEN SEEK MEDICAL HELP.**

If adrenaline is accidentally injected (e.g. into a thumb) phone your local poison information centre.  
Continue to follow this plan for the person with the allergic reaction.

© 2014 ASCIA. This document has been developed for use as a poster, or to be used with general use adrenaline autoinjectors.

## **Roles and Responsibilities:**

### **College Anaphylaxis Supervisor**

The College appoints appropriate College staff for the role of College Anaphylaxis Supervisor ('the Supervisor') (two are recommended).

These staff may include:

- a College-employed nurse
- a first aid coordinator
- a health and wellbeing coordinator or other health and wellbeing staff, and/or
- a senior/leading teacher.

A person should complete the College **Anaphylaxis Supervisors course** before being nominated the College Anaphylaxis Supervisor. The College Anaphylaxis Supervisor must complete the College Anaphylaxis Supervisor Observation Checklist, in conjunction with the Principal and other College staff to ensure that responsibilities, training requirements and tasks relating to anaphylaxis are being met by the College.

St. Joseph's College has appointed the following staff members as its Anaphylaxis Supervisors:

**Jenna Laughlin**

**Tracey Pearson**

Responsibilities of the College Anaphylaxis Supervisor/s include:

- working with the Principal to develop, implement and regularly review this policy
- obtaining regular training on how to recognise and respond to anaphylaxis, including administering an adrenaline autoinjector
- verifying the correct use of adrenaline autoinjector (trainer) devices by other College staff undertaking online anaphylaxis training through completion of the College **Supervisors' Observation Checklist**
- providing access to the adrenaline autoinjector (trainer) device for practice by College staff
- sending reminders to staff or information to new staff about anaphylaxis training requirements and liaising with the Principal to maintain records of training undertaken by staff at the College
- leading the twice-yearly anaphylaxis College briefing
- developing College-specific scenarios to be discussed at the twice-yearly briefing to familiarise staff with responding to an emergency situation requiring anaphylaxis treatment, for example a bee

sting occurs on College grounds and the student with bee allergy is conscious, or an allergic reaction where the student has collapsed on College grounds and the student is not conscious

- organising anaphylaxis drills (not unlike a fire drill) in the College to practise getting an adrenaline autoinjector to a student requiring it quickly in an emergency
- keeping an up-to-date register of students at risk of anaphylaxis
- keeping a register of adrenaline autoinjectors, including a record of when they are 'in' and 'out' from the central storage point. For instance, when they have been taken on excursions, camps etc.
- working with parents/guardians (and students) to develop, implement and review each Individual Anaphylaxis and Allergic Reactions Management Plan in accordance with this policy
- providing advice and guidance to College staff about anaphylaxis management in the College and undertaking regular risk identification and implement appropriate minimisation strategies
- working with College staff to develop strategies to raise their own, students' and College community awareness about severe allergies
- providing or arranging post-incident support (e.g. counselling) to students and College staff, if appropriate.

### **Roles and Responsibilities: Staff**

The responsibilities of College staff include:

- knowing and understanding the requirements of this policy
- knowing the identity of students who are at risk of anaphylaxis and knowing their face if possible
- understanding the causes, signs and symptoms, and treatment of anaphylaxis
- obtaining regular training on how to recognise and respond to an allergic reaction (including anaphylaxis), including administration of an adrenaline autoinjector
- knowing where to find a copy of each student's ASCIA Action Plan quickly and following it in the event of an allergic reaction
- knowing the College's general first aid and emergency response procedures and understanding their role in relation to responding to anaphylaxis
- knowing where students' adrenaline autoinjectors and the adrenaline autoinjectors for general use are kept
- knowing and following the individual risk minimisation strategies in the student's Individual Anaphylaxis or Allergic Reactions Management Plan

- planning ahead for special class activities (e.g. cooking, art and science classes), or special occasions (e.g. excursions, incursions, sport days, camp, cultural days, fetes and parties), either at school, or away from school
- working with parents/guardians to provide appropriate food for their child if the food the College/class is providing may present an allergy risk for them
- avoiding the use of food treats in class or as rewards, as these may contain allergens. If food treats are used, however, work with parents/guardians to provide appropriate treats for students at risk of anaphylaxis
- being aware of the possibility of hidden allergens in foods and of traces of allergens when using items such as egg or milk cartons in art or cooking classes
- being aware of the risk of cross-contamination when preparing, handling and displaying food
- making sure that tables and surfaces are wiped down regularly and that students wash their hands before and after handling food
- raising student awareness about allergies and anaphylaxis, and the importance of each student's role in fostering a College environment that is safe and supportive for their peers.

### **Roles and Responsibilities: Parents/Guardians**

The responsibilities of parents/guardians of students at risk of anaphylaxis include:

- informing the College in writing, either at enrolment or diagnosis, of the student's allergies, and whether the student has been prescribed an adrenaline autoinjector or not
- providing the College with an ASCIA Action Plan from the student's medical practitioner that details their condition, any medications to be administered, and any other relevant emergency procedures
- immediately informing College staff in writing of any changes to the student's medical condition and if necessary, providing an updated ASCIA Action Plan
- providing the College with an up to date photo for the student's ASCIA Action Plan when the plan is reviewed
- meeting with and assisting the College to develop the student's Individual Anaphylaxis or Allergic Reactions Management Plan, including risk minimisation strategies
- providing the College with an adrenaline autoinjector and any other medications that are current and not expired
- replacing the student's adrenaline autoinjector and any other medication as needed before their expiry date or when used

- assisting College staff in planning and preparation for the student prior to camps, field trips, incursions, excursions or special events (e.g. class parties, cultural days, fetes or sport days)
- if requested by College staff, assisting in identifying and/or providing alternative food options for the student when needed
- informing College staff in writing of any changes to the student's emergency contact details
- participating in reviews of the student's Individual Anaphylaxis or Allergic Reactions Management Plan.

### **Staff Responsibilities**

All staff must follow the anaphylaxis management guidelines set out in this policy.

### **Signage**

Copies of the ASCIA Action Plans are posted in the staff room and are located with first aid procedures as well as being in each student's medical kit with their adrenaline autoinjector/s.

With permission from parents/guardians (and older students), it may be appropriate to have a student's name, photo and the food/insect they are allergic to, displayed in other locations around the College.

### **Implementation**

This policy is implemented through a combination of:

- college premises inspections (to identify wasp and bee hives)
- staff training and supervision
- maintenance of student medical records
- effective incident notification procedures
- effective communication with the student at risk and their parent/guardian
- completion of annual risk management checklist
- effective communication procedures with the school community including all students' parents/guardians
- initiation of corrective actions where necessary.

### **Discipline for Breach of Policy**

Where a staff member breaches this policy, St. Joseph's College may take disciplinary action.

## Related Documents

Individual Anaphylaxis Management Plan Template

Facilitator Guide for Anaphylaxis Management

Anaphylaxis Management Briefing Presentation

Risk Management Checklist

College Anaphylaxis Supervisor Checklist

College Supervisors' Observation Checklist

Risk Minimisation strategies for schools Template

## Communication Plan

### Plan Contents

The Principal is responsible for developing a Communication Plan to provide information to all staff, students and parents/guardians about anaphylaxis and the College's **Management of Students at Risk of Anaphylaxis** policy.

The Communication Plan includes the following information:

- the College's policy/guidelines which includes information on strategies to reduce the risk of an allergic reaction
- information on who needs to be trained, how often they are trained and what training to access/complete
- strategies for advising staff, students and parents/guardians about how to respond to anaphylaxis during normal College activities
- strategies for advising staff, students and parents/guardians about how to respond to anaphylaxis during off-site or out-of-College activities
- procedures to inform casual relief staff on arrival at the College if they are caring for a student at risk of anaphylaxis and their role in recognising an allergic reaction and responding to instructions on the ASCIA Action Plan
- the responsibility of the Principal or College Anaphylaxis Supervisor for ensuring that all College staff are trained and briefed at least twice per calendar year. Refer to **Staff Training**.

This section sets out a Communication Plan for all School Staff, students and Parents about Anaphylaxis and the schools Anaphylaxis Management Policy, how to respond to an anaphylactic reaction by a student during both normal and off site activities, and the informing of part time, casual or volunteer staff about students with an anaphylactic condition, and how to respond.

### **Raising Staff Awareness**

The Communication Plan must include arrangements for all College staff to be briefed at least twice per year by the College Anaphylaxis Supervisor or a staff member who has current anaphylaxis management training (within the last 2 years).

College Anaphylaxis Supervisor(s) or other designated staff member(s) should ensure all casual relief staff, and new College staff (including administration and office staff, canteen staff, sessional teachers, and specialist teachers) are trained on the above information and their role in responding to a mild to moderate allergic reaction experienced by a student in their care. Students at risk of anaphylaxis must not be left in the care of a volunteer unless the volunteer is related to the student at risk of anaphylaxis.

Communication with School Staff, parents and Students re Anaphylaxis and the Schools Policy.

- Staff will undertake discrete discrete familiarisation with the schools Anaphylaxis Management Policy in Term 1 each year, including an annual test of competent policy knowledge through the Complispace platform. This will include the process for responding to an anaphylactic reaction by a student during both normal and off site activities.
  
- Staff will have a biannual briefing on the students in our care with Anaphylaxis, and undertake a focused professional learning session where student plans are reviewed and a risk assessment process undertaken.
  
- Once per term an article highlighting Anaphylaxis presentation and treatment, and the schools Anaphylaxis Management Policy will appear both on PAM and in the school newsletter. This will include the process for responding to an anaphylactic reaction by a student during both normal and off site activities.

All part time, casual or volunteer staff about students with an anaphylactic condition will undertake the student briefing and online training component through Complispace as part of the induction process. This indication will be refreshed on an annual basis.

Staff at St Joseph's College Echuca undertake the following training programs to maintain currency:

- Annual first aid training (HLTAID004)
- or
- Online Anaphylaxis training every two years
- Biannual Briefing in Term 1 and Term 3

## **Raising Student Awareness**

The College will promote student awareness of allergy (including food and insect allergy) and the risk of anaphylaxis. The following methods may be used as appropriate:

- Displaying fact sheets or posters in hallways, canteens and classrooms.
- Discussion by class teachers (such as use of the Be a MATE resources and national school curriculum resource at **Allergy & Anaphylaxis Australia**).
- Acknowledging that a student at risk of anaphylaxis may not want to be singled out or be seen to be treated differently.
- Dealing with any bullying or attempt to harm a student in accordance with the College's **Student Discipline Policy**.

## **Location of Plan**

The College's Communication Plan **is kept in the policy and procedures documents**.