MONTAGUE CONTINUING EDUCATION CENTRE 100 Montague Street South Melbourne 3205 Tel 03 9690 3535



# ANAPHYLAXIS MANAGEMENT POLICY

## Ministerial Order 706 – Anaphylaxis Management in Schools

#### **School Statement**

Montague Continuing Education Centre will fully comply with Ministerial Order 706 and the associated Guidelines published and amended by the Department from time to time.

Montague will develop and maintain an Anaphylaxis Management Policy based on the Ministerial Order 706 and the associated Guidelines

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#### **Individual Anaphylaxis Management Plans**

The Principal will ensure that an Individual Anaphylaxis Management Plan is developed, in consultation with the student's Parents, for any student who has been diagnosed by a Medical Practitioner as being at risk of anaphylaxis.

The Individual Anaphylaxis Management Plan will be in place as soon as practicable after the student enrols, and where possible before their first day of school.

The Individual Anaphylaxis Management Plan will set out the following:

- information about the student's medical condition that relates to allergy and the potential for anaphylactic reaction, including the type of allergy/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, for in-school and out-of-school settings 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 strategies;
- information on where the student's medication will be stored;
- · the student's emergency contact details; and
- an ASCIA Action Plan.

School Staff will then implement and monitor the student's Individual Anaphylaxis Management Plan.

The student's Individual Anaphylaxis Management Plan will be reviewed, in consultation with the student's Parents in all of 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 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, organised or attended by the School (eg. class parties, elective subjects, cultural days, fetes, incursions).

The Principal will advise Parents that it is their responsibility to:

· provide the ASCIA Action Plan;

- inform the School in writing 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 for the ASCIA Action Plan when that Plan is provided to the School and when it is reviewed; and
- provide the School with an Adrenaline Autoinjector that is current and not expired for their child.

#### **Prevention Strategies**

Students at Montague range in age from 15 years to 19 years of age. These strategies have been developed in the context of the broader Montague School policy of enabling the student to participate in the broader community and to take responsibility for their wellbeing in their life beyond school

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- 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; and
- special events including incursions, sports, cultural days, fetes or class parties, excursions and camps.

# **In-school settings**

Classrooms	
1.	Be sure the ASCIA Action Plan is easily accessible even if
	the Adrenaline Autoinjector is kept in another location.
2.	Liaise with Parents about food-related activities ahead of
	time.
3.	Products labelled 'may contain traces of nuts' should not
	be served to students allergic to nuts. Products labelled
	'may contain milk or egg' should not be served to
	students with milk or egg allergy and so forth.
4.	Be aware of the possibility of hidden allergens in food and
	other substances used in cooking, food technology,
	science and art classes (e.g. egg or milk cartons, empty
	peanut butter jars).
5.	Ensure all cooking utensils, preparation dishes, plates, and
	knives and forks etc are washed and cleaned thoroughly
	after preparation of food and cooking.
6.	Have regular discussions with students about the
	importance of washing hands, eating their own food and
	not sharing food.

7. A designated staff member should inform casual relief teachers, specialist teachers and volunteers of the names of any students at risk of anaphylaxis, the location of each student's Individual Anaphylaxis Management Plan and Adrenaline Autoinjector, the School's Anaphylaxis Management Policy, and each individual person's responsibility in managing an incident. ie seeking a trained staff member.

Yard	
1.	The Adrenaline Autoinjector and each student's Individual Anaphylaxis Management Plan are easily accessible from the yard, and staff should be aware of their exact location. (Remember that an anaphylactic reaction can occur in as little as a few minutes).
2.	All staff on yard duty must be aware of the School's Emergency Response Procedures and how to notify the general office/first aid team of an anaphylactic reaction in the yard.
3.	Yard duty staff must also be able to identify, by face, those students at risk of anaphylaxis.
4.	Students with anaphylactic responses to insects should be encouraged to stay away from water or flowering plants.  School Staff should liaise with Parents to encourage students to wear light or dark rather than bright colours, as well as closed shoes and long-sleeved garments when outdoors.
5.	Keep lawns and clover mowed and outdoor bins covered.
6	Students should keep drinks and food covered while outdoors.

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

1. If the School has a student at risk of anaphylaxis, sufficient School Staff supervising the special event must be trained in the administration of an Adrenaline Autoinjector to be able to respond quickly to an anaphylactic reaction if required.

For special occasions, School Staff should consult Parents in advance to either develop an alternative food menu or request the Parents to send a meal for the student.
 Parents of other students should be informed in advance about foods that may cause allergic reactions in students at risk of anaphylaxis and request that they avoid providing students with treats whilst they are at School or at a special School event.
 Party balloons should not be used if any student is allergic to latex.

#### **Out-of-school settings**

Field trips/excursions/sporting events			
1.	If the School has a student at risk of anaphylaxis, sufficient		
	School Staff supervising the special event must be trained in the		
	administration of an Adrenaline Autoinjector and be able to		
	respond quickly to an anaphylactic reaction if required.		
2.	A School Staff member or team of School Staff trained in the		
	recognition of anaphylaxis and the administration of the		
	Adrenaline Autoinjector must accompany any student at risk of		
	anaphylaxis on field trips or excursions.		
3.	School Staff should avoid using food in activities or games,		
	including as rewards.		
4.	For each field trip, excursion etc, a risk assessment should be		
	undertaken for each individual student attending who is at risk		
	of anaphylaxis. The risks may vary according to the number of		
	anaphylactic students attending, the nature of the		
	excursion/sporting event, size of venue, distance from medical		
	assistance, the structure of excursion and corresponding staff-		
	student ratio.		
	All School Staff members present during the field trip or		
	excursion need to be aware of the identity of any students		
	attending who are at risk of anaphylaxis and be able to identify		
	them by face.		
5.	The School should consult Parents of anaphylactic students in		
	advance to discuss issues that may arise; to develop an		
	alternative food menu; or request the Parents provide a meal (if required).		
	requireaj.		

7.	Parents may wish to accompany their child on field trips and/or
	excursions. This should be discussed with Parents as another
	strategy for supporting the student who is at risk of anaphylaxis.

Prior to the excursion taking place School Staff should consult with the student's Parents and Medical Practitioner (if necessary) to review the student's Individual Anaphylaxis Management Plan to ensure that it is up to date and relevant to the particular excursion activity.

# Camps and remote settings

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Prior to engaging a camp owner/operator's services the School should make enquiries as to whether it can provide food that is safe for anaphylactic students. If a camp owner/operator cannot provide this confirmation to the School, then the School should consider using an alternative service provider.

The camp cook should be able to demonstrate satisfactory 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, label reading, etc.

Schools must not sign any written disclaimer or statement from a camp owner/operator that indicates that the owner/operator is unable to provide food which is safe for students at risk of anaphylaxis. Schools have a duty of care to protect students in their care from reasonably foreseeable injury and this duty cannot be delegated to any third party.

Schools should conduct a risk assessment and develop a risk management strategy for students at risk of anaphylaxis. This should be developed in consultation with Parents of students at risk of anaphylaxis and camp owners/operators prior to the camp dates.

School Staff should consult with Parents of students at risk of anaphylaxis and the camp owner/operator to ensure that appropriate risk minimisation and prevention strategies and processes are in place to address an anaphylactic reaction should it occur. If these procedures are deemed to be inadequate, further discussions, planning and implementation will need to be undertaken.

If the School has concerns about whether the food provided on a camp will be safe for students at risk of anaphylaxis, it should also consider alternative means for providing food for those students.

Use of substances containing allergens should be avoided where possible.

Camps should avoid stocking peanut or tree nut products, including nut spreads. Products that 'may contain' traces of nuts may be served, but not to students who are known to be allergic to nuts.

The student's Adrenaline Autoinjector, Individual Anaphylaxis Management Plan, including the ASCIA Action Plan for Anaphylaxis and a mobile phone must be taken on camp. If

mobile phone access is not available, an alternative method of communication in an emergency must be considered, e.g. a

#### **School Management and Emergency Response**

satellite phone.

Montague's First Aid policy requires all staff to have current and up to date First Aid training and certificates. This training includes Anaphylaxis and Asthma recognition and First Aid training.

- a complete and up to date list of students identified as having a medical condition that relates to allergy and the potential for anaphylactic reaction is kept in the office
- details of Individual Anaphylaxis Management Plans and ASCIA Action Plans and where these can be located:
  - o in a classroom;
  - in the school yard;
  - o in all school buildings and sites including gymnasiums and halls;
  - on school excursions:
  - on school camps; and
  - at special events conducted, organised or attended by the school.
- Information about the storage and accessibility of Adrenaline Autoinjectors;
- how communication with School Staff, students and Parents is to occur in in accordance with a communications plan.

When a student with a medical condition that relates to allergy and the potential for anaphylactic reaction is under the care or supervision of the school outside of normal class activities, including the school yard, at camps and excursions, or at special events conducted, organise or attended by the school, the Principal must ensure that there is a sufficient number of school staff present who have been trained.

In the event of an anaphylactic reaction, the emergency response procedures in this policy must be followed, together with the general first aid and emergency response procedures and the student's ASCIA Action Plan.

#### **Adrenaline Autoinjectors for General Use**

The Principal will purchase Adrenaline Autoinjector(s) for General Use (purchased by the School) and as a back up to those supplied by Parents.

The Principal will determine the number of additional Adrenaline Autoinjector(s) required. In doing so, the Principal will take into account the following relevant considerations:

- the number of students enrolled at the School who have been diagnosed as being at risk of anaphylaxis;
- the accessibility of Adrenaline Autoinjectors that have been provided by Parents of students who have been diagnosed as being at risk of anaphylaxis;
- the availability and sufficient supply of Adrenaline Autoinjectors for General Use in specified locations at the School, including
- in the school yard, and at excursions, camps and special events conducted or organised by the School; and
- the Adrenaline Autoinjectors for General Use have a limited life, usually expiring 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.

#### **Communication Plan**

The Communication Plan includes strategies for advising School Staff, students and Parents about how to respond to an anaphylactic reaction by a student in various environments including:

- during normal school activities including in the classroom, in the school yard, in all school buildings and sites including gymnasiums and halls; and
- during off-site or out of school activities, including on excursions, school camps and at special events conducted or organised by the School.

The Communication Plan includes procedures to inform volunteers and casual relief staff of students with a medical condition that relates to allergy and the potential for anaphylactic reaction and their role in responding to an anaphylactic reaction by a student in their care.

Principal will ensure that School Staff are:

- · trained: and
- briefed at least twice per calendar year.

#### **Staff Training**

All School Staff will be appropriately trained:

- Any non-Staff members as determined by the Principal.

The School Staff and identified Non-Staff members will undertake the following training:

- an Anaphylaxis Management Training Course in the three years prior; and
- participate in a briefing, to occur twice per calendar year (with the first briefing to be held at the beginning of the school year) on:
  - the School's Anaphylaxis Management Policy;
  - o the causes, symptoms and treatment of anaphylaxis;
  - o the identities of the students with a medical condition that relates to an allergy and the potential for anaphylactic reaction, and where their medication is located;
  - how to use an Adrenaline Autoinjector, including hands on practise with a trainer Adrenaline Autoinjector device;
  - o the School's general first aid and emergency response procedures; and
  - the location of, and access to, Adrenaline Autoinjector that have been provided by Parents or purchased by the School for general use.

The briefing must be conducted by a member of School Staff who has successfully completed an Anaphylaxis Management Training Course in the last 12 months.

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In the event that the relevant training and briefing has not occurred, the Principal will develop an interim Individual Anaphylaxis Management Plan in consultation with the Parents of any affected student with a medical condition that relates to allergy and the potential for anaphylactic reaction. Training will be provided to relevant School Staff as soon as practicable after the student enrols, and preferably before the student's first day at School.

The Principal will ensure that while the student is under the care or supervision of the School, including excursions, yard duty, camps and special event days, there is a sufficient number of School Staff present who have successfully completed an Anaphylaxis Management Training Course in the three years prior.

#### **Annual Risk Management Checklist**

The Principal will complete an annual Risk Management Checklist as published by the Department of Education and Early Childhood Development to monitor compliance with their obligations.

This policy was last ratified by School Council in....

2016