

Anaphylaxis Policy and Procedure Document

Mazenod College

5 Kernot Ave Mulgrave 3170

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School Contact Person: Fr Michael Twigg (Rector)

Mr T Coghlan (Student Welfare Officer) Mrs S Luxmoore and Mrs M Trigg (School Nurses).

This document is reviewed annually to consider the number of students at risk of anaphylaxis, the type and frequency of allergic/anaphylactic reactions at school including the administration of medications and risk management.

Mazenod College will comply with State Government legislation Ministerial Order 706.

Anaphylaxis is a severe, rapidly progressing allergic reaction. It is a life threatening medical emergency. In the event of an anaphylactic reaction the student's Anaphylaxis Action plan must be followed together with school's general first aid and emergency response procedures.

Students who have been diagnosed as at risk of anaphylaxis have an individual anaphylaxis management plan.

The College conducts a medical survey of all students annually and prior to enrolment. The survey includes specific questions relating to allergies, asthma and anaphylaxis. It is the responsibility of the parents of students and staff diagnosed as at risk of anaphylaxis to have an individual anaphylaxis action plan written for them by their doctor.

An anaphylaxis management plan will be prepared for each student at risk of anaphylaxis by College health centre staff.

The student's anaphylaxis management plan sets out:

Type of allergy or allergies.

Students and staff should be correctly screened by a medical doctor. The causes of allergies need to be listed. Certain foods and insect stings are the most common causes of anaphylaxis.

Eight foods cause 90% of food allergic reactions in Australia and can be common causes of anaphylaxis. These are: peanuts, tree nuts, egg, cow's milk, wheat, soybean, fish & shellfish. Allergies to insect venom such as bee, wasp, tick or jack jumper ants are possible.

Co-existing medical conditions should also be noted, for example asthma.

Strategies to minimise risk of exposure to allergen.

The name of the person/s implementing the strategies.

Where student's medication is stored.

The student's emergency contact details.

Includes an ascia action plan.

The student's anaphylaxis management plan and anaphylaxis action plan need to have current contact details for parents/guardians. These details should include the home address of the student, the telephone number, mobile phone contact and work phone numbers of parents/guardians and an additional emergency contact.

1. Mazenod will use practical strategies to minimise the risk of exposure to allergens for in-school and out of class setting.

Risk assessment will be undertaken for each student at risk of anaphylaxis. When considering appropriate prevention strategies, the College will take into account factors such as the allergen involved, the age of the student and the severity of the allergy. (Based on information provided by the student's parent/carers from their child's medical practitioner)

2. Staff at risk of anaphylaxis.

Staff members at risk of anaphylaxis should consult with the Principal and school nurse to inform the College of their individual needs. Staff should carry their ASCIA action plan (including contact details of person to be notified) and medications with them at all times.

3. Volunteers and visiting students.

Volunteers and students who are at risk of anaphylaxis and who are visiting the College must carry their own ASCIA action plan and medications with them at all times. They should notify and consult with the person in charge of their visit and/or the school nurse to inform the College of their individual needs.

4. Assessing the potential for accidental exposure to allergens:

Staff will undertake a risk assessment based on the student's usual routine, as well as plan for special circumstances such as class parties, sports days, camps, incursions or excursions.

- During classroom activities the action plan and relevant medications of each student at risk of anaphylaxis will be kept at the health centre
- Students should carry their "home kit" containing action plan and medications to and from school and may carry this with him at school
- Staff will liaise with parents/carers about food related activities ahead of time.
- Students who are at risk of anaphylaxis may be apprehensive about attending school. Parents may also experience various levels of anxiety. Staff will encourage open dialogue with the families and their doctors
- When staff members provide food for students it must not contain the substance to which the student is allergic
- The home science teacher will be alert for allergens (including hidden allergens such as pureed nuts in pesto for example) in cooking
- Homeroom teachers will discuss the importance of washing hands and not sharing or swapping food
- The teacher in charge of extra replacement classes should ensure that relief teachers are advised of students at risk of anaphylaxis, preventive strategies in place and the school's emergency procedures. The relief teachers will be directed to the list of students at risk of anaphylaxis which appears on the College website under "Medical Alerts College Wide"

5. In canteens or during lunch or snack times.

- Mazenod will not ban foods at school. Students will be educated about not sharing or swapping food and the correct use of handling food utensils
- Food tables and surfaces are wiped down regularly before and after school, in the yard and during breaks

6. Excursions, sporting days and camps.

- Students will bring from home their second “home” anaphylaxis kit when attending excursions, sporting days and camps. This kit contains their anaphylaxis action plan and their medications such as antihistamine tablet and adrenalin auto-injector. This expectation will be clearly communicated to parents/guardians as part of the annual review of the student’s individual anaphylaxis management plan. The student should carry his kit with him as far as practicable. For example, hand kit to staff when swimming.
- Staff will consult the parents in advance of such activities and use food free of allergen for the student at risk. Parents will be informed that they can provide suitable safe food for their child from home.
- Staff will not use latex balloons where latex is an allergen to a student.
- Physical education staff and coaches will not supply latex swimming caps.
- Staff will inform themselves of the location of the student’s anaphylaxis kit on all excursions and sporting days.

7. Communication strategy

The Principal will ensure that a communication strategy informs school staff, students and parents about anaphylaxis management at Mazenod.

Staff will be briefed regularly on anaphylaxis awareness. The details and photographs of students at risk of anaphylaxis are available online via the school website under “Student Medical Alerts College wide”.

Parents of students at risk of anaphylaxis communicate with the school nurse at enrolment and at the start of each year. The health centre will notify parents of the requirements of a student at risk of anaphylaxis:

- Parents must provide student’s College medical form, anaphylaxis action plan including a recent photograph of student and anaphylaxis response kit containing medications such as adrenalin auto injector prior to the student attending the school.
- It is the responsibility of parents to provide medications and to ensure these are within the expiry date.

The College will communicate awareness of anaphylaxis within the school community through staff and student briefings, training sessions and intranet documentation.

8. Location of ASCIA action plan

A copy of the student's ASCIA action plan will be kept in the health centre with the student's anaphylaxis kit and also with the student's medical record. The plan will be reviewed:

- annually
- after any incident of allergic/anaphylactic reaction
- after any changes to student's allergy or treatment

9. Storage and accessibility of adrenalin auto-injectors (EpiPen or Anapen)

Adrenalin auto-injectors will be kept in a suitable container labelled as "Anaphylaxis Response kit" in the College health centre. If a student has been prescribed an adrenalin auto-injector, it must be provided by the student's parent/carers to the school.

Adrenalin auto-injectors will be clearly labelled with the student's name and a copy of the student's ASCIA action plan in the yellow "Anaphylaxis Response kit" storage containers. When a student requires another medication it must be kept in the anaphylaxis kit.

10. General use adrenalin auto-injectors (College EpiPen)

Adrenalin auto-injectors are available at the College for 'general use' in the event of an incidence of anaphylaxis, usually following a first dose of adrenalin on the direction of a paramedic or medical practitioner.

11. Training and Emergency Response

All teachers and other staff who supervise students at risk of anaphylaxis will be trained in how to recognise and respond to an anaphylactic reaction. This training will include successfully completing an anaphylaxis management course in the three years prior and biannual briefings. Training will include: the school's anaphylaxis policy, the identities of students at risk of anaphylaxis and the school's general first aid and emergency response. They will also be trained how to administer an adrenalin auto-injector correctly and the location of the school's general use adrenalin auto-injectors. If a student is not able to administer the adrenalin auto injector, staff will undertake to do so.

For first time allergy sufferers having an anaphylactic reaction, staff will immediately call 000. They will follow any instructions given by emergency services, contact the student's emergency contact (parents) and notify the school nurse. Staff will record details of the incident.

12. Administering adrenalin via auto injector.

There are currently two types of auto injector, EPIPEN and ANAPEN. Both deliver the same potentially life-saving medication, adrenalin.

EpiPen Senior and Anapen Senior are for people weighing more than 20kg.

EpiPen Junior and Anapen Junior are for those weighing between 10 and 20kg.

How to administer the EpiPen

- a. Make sure the EpiPen® is not cloudy and check use-by date
- b. Remove from plastic container
- c. Form a fist around EpiPen® and pull off blue cap
- d. Place orange end against outer mid-thigh
- e. Push down hard until a click is heard or felt and hold in place for 10 seconds
- f. Remove EpiPen®
- g. Note the time you gave the EpiPen®
- h. Always call an ambulance as soon as possible 000
- i. Call the student's emergency contacts/parents

How to administer the Anapen

- Make sure Anapen is in date
- Remove from packaging
- Form a fist around Anapen and remove black needle cap
- Remove black safety cap from firing button
- Hold Anapen against the outer thigh and PRESS RED FIRING BUTTON
- Hold Anapen in place for 10 seconds
- Remove Anapen and be careful not to touch the needle
- Note the time you gave Anapen
- Return Anapen to packaging
- Always call an ambulance on 000
- Call the student's emergency contacts/parents

13. Post-incident support

A post-incident debrief meeting will be arranged. An incident of anaphylaxis can be intense and potentially distressing. The College will offer support to all stakeholders through pastoral care in consultation with school counsellors and school nurses. Counselling is available to students and staff.

14. Review management processes

A review of the incident will be undertaken and include all stakeholders.

The anaphylaxis management plan will be reviewed by health centre staff and changes made as appropriate. Improvements will be included if necessary.

Parents must notify the school of any changes to the student's action plan or medication following the incident. Parents must also replace used medications such as adrenalin auto injector before the student returns to school.

The Principal will ensure an annual Risk Management Checklist is completed to monitor the school's compliance with Department of Education and legislative requirements.

Glossary of terms:

Allergy: an immune system response to an allergen (something that the body has identified as a trigger, for example, nuts).

Allergen: a trigger for allergy in people who have developed antibodies to a particular substance, eg peanuts in peanut allergy

Anaphylaxis action kit: kit containing action plan and medications.

Anaphylaxis management plan: a plan containing student and emergency contact details and a risk assessment including strategies to avoid allergen.

Anaphylaxis management training: a course that is Victorian Registration and Qualifications Authority (VRQA), VET accredited or any course approved by the secretary to the Department for the purpose of this Order as published by the Department (DEECD). Course will include competency checks in administration of an adrenalin auto injector.

ASCIA anaphylaxis action plan: a medical plan prepared and signed by a doctor providing the student's name, photograph, allergies and instruction on how to treat an allergic reaction.