



Purpose

To explain to Lyndhurst Secondary College parents, carers, staff and students the processes and procedures in place to support students diagnosed as being at risk of suffering from anaphylaxis. This policy also ensures that Lyndhurst Secondary College is compliant with Ministerial Order 706 and the Department's guidelines for anaphylaxis management.

Scope

This policy applies to:

- all staff, including casual relief staff and volunteers
- all students who have been diagnosed with anaphylaxis or who may require emergency treatment for an anaphylactic reaction and their parents and carers

Policy

College Statement

- Lyndhurst Secondary College will fully comply with Ministerial Order 706 and the associated guidelines published by the Department of Education and Training.
- In the event of an anaphylactic reaction, the school's first aid and emergency response procedures and the student's Individual Anaphylaxis Management must be followed.

Anaphylaxis

Anaphylaxis is a severe allergic reaction that occurs after exposure to an allergen. The most common allergens for school aged children are nuts, eggs, cow's milk, fish, shellfish, wheat, soy, sesame, latex, certain insect stings and medication.

Symptoms

Sights and symptoms of a **mild to moderate allergic reaction**, can include:

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

Signs and symptoms of anaphylaxis, a **severe allergic reaction**, can include:

- difficult/noisy breathing
- swelling of tongue
- difficulty talking and/or hoarse voice
- wheeze or persistent cough
- persistent dizziness or collapse
- student appears pale or floppy
- abdominal pain and/or vomiting

Symptoms usually develop within five to ten minutes and up to two hours after exposure to an allergen, but can appear within a few minutes.



Treatment

Adrenaline given as an injection into the muscle of the **outer mid-thigh** is the first aid treatment for anaphylaxis.

Individuals diagnosed as being at risk of anaphylaxis are prescribed an adrenaline autoinjector for use in an emergency. These adrenaline autoinjectors are designed so that anyone can use them in an emergency.

Individual Anaphylaxis Management Plans

All students at Lyndhurst Secondary College who are diagnosed as being at risk of suffering from an anaphylactic reaction by a medical practitioner must have an 'Individual Anaphylaxis Management Plan'. When notified of an anaphylaxis diagnosis, the principal of Lyndhurst Secondary College is responsible for developing a plan in consultation with the student's parents/carers. Where necessary, this plan will be in place as soon as practicable after a student enrolls and where possible, before the student's first day.

NB: It is important to note that it is not recommended that banning of food or other products is used as a risk minimisation and prevention strategy. The reason for this is;

- It can create complacency among students and staff
- It does not eliminate the presence of hidden allergens
- It is impossible to ban all triggers of all allergens because these are not limited to nuts.

Parents and carers must:

- Obtain an ASCIA Action Plan for Anaphylaxis from the student's medical practitioner and provide a copy to the College as soon as practicable
- Immediately inform the College in writing if there is a relevant change in the student's medical condition and obtain an updated ASCIA Action Plan for Anaphylaxis
- Provide an up to date photo of the student for the ASCIA Action Plan for Anaphylaxis
- Provide the College with a current adrenaline autoinjector for the student that is not expired
- Participate in annual reviews of the student's Plan.

Please note when an adrenaline autoinjector expires a new one must be provided.

Each student's Individual Anaphylaxis Management Plan must include:

- Information about the student's medical condition that relates to allergy and the potential for anaphylactic reaction, including the type of allergies the student has
- Information about the signs or symptoms the student might exhibit in the event of an allergic reaction based on a written diagnosis from a medical practitioner
- Strategies to minimise the risk of exposure to known allergens while the student is under the care or supervision of College staff, including in the school yard, at camps, excursions, and or at special events conducted, organised or attended by the College
- The name of the person(s) responsible for implementing the risk minimisation strategies
- Information about where the student's medication will be stored
- The student's emergency contact details
- An up-to-date ASCIA Action Plan for Anaphylaxis completed by the student's medical practitioner.



Review and updates to Individual Anaphylaxis Plans

A student's Individual Anaphylaxis Plan will be reviewed and updated on an annual basis in consultation with the student's parents/carers. The plan will also be reviewed and, where necessary, updated in the following circumstances:

- As soon as practicable after the student has an anaphylactic reaction at College
- If the student's medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, changes
- When the student is participating in an off-site activity, including camps and excursions, or at special events including fetes and concerts.

Our College may also consider updating a student's Individual Anaphylaxis Management Plan if there is an identified and significant increase in the student's potential risk of exposure to allergens at school.

Location of plans and adrenaline autoinjectors

A copy of each student's ASCIA Action Plan is on display in the following locations.

- Reception (on the fridge)
- Staff Room (on the wall above the food prep area)
- Canteen (on the wall above the food prep area)
- Sick Bay (in the Red folder marked 'Serious Medical Conditions')

Adrenaline Autoinjectors for individual students and for general use, are stored at

- Reception in an unlocked draw labeled '**Adrenaline Autoinjector located here**' along with each student's Individual Anaphylaxis Management Plan and their Action Plan.

Risk Minimisation Strategies

1. Classroom activities (including class rotations, specialist and elective classes)
 - Each staff member to familiarise themselves with the students who are at risk within the College
 - If a student in their care is at risk keep a plan in an accessible location and familiarise themselves with the individual plans
 - Never give food from outside sources to a student who is at risk of anaphylaxis
 - Any product labeled 'may contain traces of nuts' should not be served to students allergy to nuts
 - Any product labeled 'may contain milk or egg' should not be served to students with milk or egg allergy
 - Be aware of the possibility of hidden allergens in many substances other than food
 - Ensure any cooking utensils, preparation dishes, plates and cutlery are washed and cleaned thoroughly after use
 - Staff to conduct regular discussions with students about the importance of washing their hands after eating their own food and not to share their food with any other student
 - Casual relief teachers, specialist teachers and volunteers are to be informed of the students at risk of anaphylaxis during their induction, the location of their plans, autoinjectors and the Anaphylaxis Management Policy.
 - Each individual person's responsibility in managing an incident at the LSC.
2. Yard – between classes and other breaks



- If the College has a student who is at risk of anaphylaxis, sufficient College staff on yard duty must be trained in the administration of the Adrenaline Autoinjector to be able to respond quickly to an anaphylactic reaction if needed.
- The Adrenaline Autoinjector and each student's Individual Anaphylaxis Management Plan are accessible from the yard within 3 minutes, and staff know of their exact location.
- A communication plan is to be put in place so the student's medical information and medication can be retrieved quickly if a reaction occurs in the yard.
 - i. Mobile phone
 - ii. Walkie talkie
 - iii. PA system
- All staff on yard duty must be aware of the College's Emergency Response Procedures and how to notify Reception / First Aid officer of an anaphylactic reaction in the yard.
- Keep lawns and clover mowed and outdoor bins covered.
- Encourage students to keep drinks and food covered while outdoors.

3. Canteen

- All canteen staff are 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 allergies, label reading etc.
- All canteen staff will be briefed about students at risk of anaphylaxis and where the Principal determines in accordance with clause 12.1.1 of the Ministerial Order 706, have up to date training in an Anaphylaxis Management Training Course as soon as practical after a student enrolls.
- Display the student's name and photo in the canteen as a reminder to staff.
- Products labelled 'may contain traces of nuts' should not be served to students allergic to nuts.
- The canteen should provide a range of healthy meals/products that exclude peanut or other nut products in the ingredient list or a 'may contain ...' label is clearly visible.

4. Excursions, Sporting Activities

- If the College has a student at risk of anaphylaxis, sufficient College staff supervising the excursion/sporting activity must be trained in the administration of an Adrenaline Autoinjector and be able to respond quickly to an anaphylactic reaction if required.
- The Adrenaline Autoinjector and a copy of the Individual Anaphylaxis Management Plan for each student at risk should be easily accessible and staff must be aware of their exact location.
- Each excursion/sporting event a risk assessment should be undertaken for each individual student attending who is a risk of anaphylaxis.
- The risk may vary according to;
 - i. the number of anaphylactic students attending
 - ii. the size of the venue
 - iii. nature of the excursion/sporting event
 - iv. distance from medical assistance
 - v. structure of the event
 - vi. staff/student ratio
- All staff members present during the excursion/sporting activity need to be aware of the identity of any student attending who is at risk and be able to identify them by face
- Prior to the excursion/sporting activity taking place staff should consult with the student's Parent/Carer 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/sporting activity.



5. Camps and remote settings

- Staff should consult with Parents/Carers 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 (if these procedures are deemed to be inadequate, further discussions, planning and implementation will need to be undertaken).
- The students 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, eg a satellite phone.
- 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 a third party.
- College staff participating in the camp should be clear about their roles and responsibilities in the event of an anaphylactic reaction. Check the emergency response procedures that the camp provider has in place. Ensure that these are sufficient in the event of an anaphylactic reaction and ensure all College staff participating in the camp are clear about their roles and responsibilities.
- The Adrenaline Autoinjector should be carried in the College first aid kit, however, staff can consider allowing students to carry their own Autoinjector.
- The Adrenaline Autoinjector should remain close to the student and College staff should know where it is located at all times.
- Consider the potential exposure to allergens when consuming food on buses and in cabins.

6. Special Events (class parties, elective subjects, cultural days, fetes, concerts)

- If LSC has a student at risk of anaphylaxis, sufficient 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.
- College staff should avoid using food in activities or games, including as rewards.
- For special occasions, staff should consult Parents/Carers in advance to either develop an alternative food menu or request the Parents/Carers to send a meal for the student.
- Party balloons should not be used if any student is allergic to latex.



Adrenaline autoinjectors for general use

Lyndhurst Secondary College will maintain a supply of adrenaline autoinjector(s) for general use, as a back-up to those provided by parents and carers for specific students, and also for students who may suffer from a first time reaction at College.

Adrenaline autoinjectors for general use will be stored at Reception and labelled “general use”.

The principal is responsible for arranging the purchase of adrenaline auto-injectors for general use, and will consider:

- the number of students enrolled at Lyndhurst Secondary College at risk of anaphylaxis
- the accessibility of adrenaline auto-injectors supplied by parents
- the availability of a sufficient supply of auto-adrenaline injectors for general use in different locations at the College, as well as at camps, excursions and events
- the limited life span of adrenaline auto-injectors, and the need for general use adrenaline auto-injectors to be replaced when used or prior to expiry.



Emergency Response

In the event of an anaphylactic reaction, the emergency response procedures in this policy must be followed, together with the College’s general first aid procedures, emergency response procedures and the student’s Individual Anaphylaxis Management Plan.

A complete and up to date list of students identified as being at risk of anaphylaxis is maintained by Danielle Cornelio First Aid Manager and stored at;

- | | |
|------------|-----------|
| Staff Room | Sick Bay |
| Canteen | Reception |

For camps, excursions and special events, a designated staff member will be responsible for maintaining a list of students at risk of anaphylaxis attending the special event, together with their Individual Anaphylaxis Management Plans and adrenaline autoinjectors, where appropriate.

If a student experiences an anaphylactic reaction at school or during a school activity, school staff must:

| Step | Action |
|------|---|
| 1. | <ul style="list-style-type: none"> • Lay the person flat • Do not allow them to stand or walk • If breathing is difficult, allow them to sit • Be calm and reassuring • Do not leave them alone • Seek assistance from another staff member or reliable student to locate the student’s adrenaline autoinjector or the school’s general use autoinjector, and the student’s Individual Anaphylaxis Management Plan, stored at Reception • If the student’s plan is not immediately available, or they appear to be experiencing a first time reaction, follow steps 2 to 5 |
| 2. | <p>Administer an Adrenaline Autoinjector</p> <ul style="list-style-type: none"> • Remove from plastic container • Form a fist around the Adrenaline Autoinjector and pull of the blue safety release (cap) • Place orange end against the student’s outer mid-thigh (with or without clothing) • Push down hard until a click is heard or felt and hold in place for 3 seconds • Remove Adrenaline Autoinjector • Note the time the Adrenaline Autoinjector is administered • Retain the used Adrenaline Autoinjector to be handed to ambulance paramedics along with the time of administration |
| 3. | Call an ambulance (000) |
| 4. | If there is no improvement or severe symptoms progress (as described in the ASCIA Action Plan for Anaphylaxis), further adrenaline doses may be administered every five minutes, if other adrenaline autoinjectors are available. |
| 5. | Contact the student’s emergency contacts. |

If a student appears to be having a severe allergic reaction, but has not been previously diagnosed with an allergy or being at risk of anaphylaxis, College staff should follow steps 2 – 5 as above.

[Note: If in doubt, it is better to use an adrenaline autoinjector than not use it, even if in hindsight the reaction is not anaphylaxis. Under-treatment of anaphylaxis is more harmful and potentially life threatening than over treatment of a mild to moderate allergic reaction.]



Communication Plan

This policy will be available on Lyndhurst Secondary College's website so that parents and other members of the College community can easily access information about Lyndhurst Secondary College's Anaphylaxis Management Policy. The parents and carers of students who are enrolled at Lyndhurst Secondary College and are identified as being at risk of anaphylaxis will also be provided with a copy of this policy.

The Principal is responsible for ensuring that all relevant staff, including casual relief staff and volunteers are aware of this policy and Lyndhurst Secondary College's procedures for anaphylaxis management. Casual relief staff and volunteers who are responsible for the care and/or supervision of students who are identified as being at risk of anaphylaxis will also receive a verbal briefing on this policy.

Staff training

Staff at Lyndhurst Secondary College will receive appropriate training in anaphylaxis management, consistent with the DET Anaphylaxis Guidelines.

Staff who are responsible for conducting classes that students who are at risk of anaphylaxis attend, and any further staff that the principal identifies, must have completed:

- an approved face-to-face anaphylaxis management training course in the last three years, or
- an approved online anaphylaxis management training course in the last two years.

Lyndhurst Secondary College uses the ASCIA eTraining course (with 22303VIC, or 22300VIC or 10313NAT

Staff are also required to attend a briefing on anaphylaxis management and this policy at least twice per year, facilitated by a staff member who has successfully completed an anaphylaxis management course within the last 12 months. Each briefing will address:

- this policy
- the causes, symptoms and treatment of anaphylaxis
- the identification of students with a medical condition that relates to allergy and the potential for anaphylactic reaction
- how to use an adrenaline autoinjector, including hands on practice with a trainer adrenaline autoinjector
- the College's general first aid and emergency response procedure
- the location of, and access to, adrenaline autoinjectors that have been provided by parents or purchased by the College for general use.

When a new student enrolls at Lyndhurst Secondary College who is at risk of anaphylaxis, the principal will develop an interim plan in consultation with the student's parents and ensure that appropriate staff are trained and briefed as soon as possible.



Further information and resources

- School Policy and Advisory Guide:
 - [Anaphylaxis](#)
 - [Anaphylaxis management in schools](#)
- Allergy & Anaphylaxis Australia: [Risk minimisation strategies](#)
- ASCIA Guidelines: [Schooling and childcare](#)
- Royal Children's Hospital: [Allergy and immunology](#)

Review Cycle and evaluation

This policy was last updated on October 9, 2019 and is scheduled for review in February 2019

The principal will complete the Department's Annual Risk Management Checklist for anaphylaxis management to assist with the evaluation and review of this policy and the support provided to students at risk of anaphylaxis.