



ANAPHYLAXIS MANAGEMENT POLICY

Ministerial Order 706 – Anaphylaxis Management in Schools

SCHOOL STATEMENT

Berendale School will fully comply with Ministerial Order 706 and the associated Guidelines published and amended by the Department from time to time. The school will be responsible in developing and maintaining its Anaphylaxis Management Policy.

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 enrolls, 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.

Note: The red and blue 'ASCIA Action Plan for Anaphylaxis' is the recognised form for emergency procedure plans that is provided by Medical Practitioners to Parents when a child is diagnosed as being at risk of anaphylaxis

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 (e.g. class parties, elective subjects, cultural days, fetes, incursions).

The School's Anaphylaxis Management Policy states that it is the responsibility of the Parents 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 Auto injector that is current and not expired for their child.

PREVENTION STRATEGIES

Risk Minimisation and Prevention Strategies that Berendale will put in place for all relevant in-school and out-of-school settings which include (but are not limited to) the following:

- 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.

Risk Minimisation and Prevention Strategies:

- Show the **staff** photos of all the children with ASCIA Action Plans.
- Name the children in our school who have been diagnosed as at risk of anaphylaxis.
- Ensure all the students' teachers are aware of his/her condition, where their medication is located and how to administer the adrenaline.
- List known allergies.
- Know who has responsibility for this child when class, playground or out of school.
- List risks are they exposed to at school.
- Identify risks are they exposed to on special days at school E.g. swimming, sports days, special days, excursions.
- Brainstorm what we as a staff team do to support these children?

- Have whole school discussions about the risks this child is exposed to whilst at school and the ways to minimise the risks.
- All staff to be made aware of the location of autoinjectors for general use and the guidelines for using them

SCHOOL MANAGEMENT AND EMERGENCY RESPONSE

The School's Anaphylaxis Management Policy must include procedures for emergency response to anaphylactic reactions. The procedures should include the following:

- 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;
- details of Individual Anaphylaxis Management Plans and ASCIA Action Plans and where these can be located:
 - in a classroom;
 - in the school yard;
 - 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 accordance with a communications plan.

ADRENALINE AUTOINJECTORS FOR GENERAL USE

The Principal will purchase Adrenaline Auto injector(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 Auto injector(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 Auto injectors 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 Auto injectors 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 Auto injectors 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.

Note: Adrenaline Auto injectors for General Use are available for purchase at any chemist. No prescriptions are necessary.

COMMUNICATION PLAN

This section sets out a Communication Plan to provide information to all School Staff, students and Parents about anaphylaxis and the School's Anaphylaxis Management Policy.

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.

It is the responsibility of the Principal of the School to ensure that relevant School Staff are:

- trained; and
- briefed at least twice per calendar year.

STAFF TRAINING

The all School Staff will be appropriately trained.

The Berendale School Staff 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;
 - the causes, symptoms and treatment of anaphylaxis;
 - 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 Auto injector, including hands on practise with a trainer Adrenaline Auto injector device;
 - the School's general first aid and emergency response procedures; and
 - the location of, and access to, Adrenaline Auto injector 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.

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 enrolls, 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.

EVALUATION

This policy will be reviewed annually or more often if necessary due to changes in regulations or circumstances.

Approved By	Kon Peltekis, School Council President
Approval Authority	
Date Implemented	September 2017