



ANAPHYLAXIS MANAGEMENT POLICY

Rationale:

Fountain Gate Secondary College will fully comply with Ministerial Order 706 and the associated Guidelines published and amended by the Department from time to time. The school will provide a safe and healthy school environment that takes into consideration the needs of all students, including those who may suffer from anaphylaxis.

Individual Anaphylaxis Management Plans:

The College 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.

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).

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 Autoinjector that is current and not expired for their child.

Prevention Strategies:

The school will implement the following risk minimisation and prevention strategies:

- Inform the school community about anaphylaxis via the newsletter and social media
- Not allow food sharing and restricting food to that approved by parents
- Ensure staff are provided with regular professional development on the identification and response to anaphylaxis and the proper use of the EpiPen.
- The school will request parents do not send items (containing certain types of food, eg nuts) to school if at all possible and the canteen eliminate or reduce the likelihood of such allergens. This information will also be made available to staff when special events including incursions, sports, cultural days, fetes or class parties, excursions and camps.

School Management And Emergency Response:

For emergency response to anaphylactic reactions, the procedures 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. These are located in the General Office, Sick Bay and Staff Centre. An electronic copy had been forwarded to all staff.

The Individual Anaphylaxis Management Plans and ASCIA Action Plans and are located:

- in the General Office and the Sick Bay;
- in all Sub-School Offices;
- a copy will be sent with each student on school excursions and school camps;
- at special events conducted, organised or attended by the school.

The storage and accessibility of Adrenaline Autoinjectors are located at the General Office and Home Economics Room H4

The School Staff will be regularly informed and the students in the class will be educated about anaphylaxis. The parents will be contacted each.

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. Two Adrenaline Autoinjectors(s) are required. They are located in the General Office and the Home Economics Building. An additional Autoinjector will be sent on excursions, camps and special events conducted or organised by the School.

The Adrenaline Autoinjectors for General Use have a limited life so they will be replaced every 12 months.

Communication Plan:

A copy of the list of students and their Anaphylaxis Plan will be distributed each year to the following:

- All Staff
- Daily Organiser to distribute to casual relief staff
- The students in the relevant Home Group will be briefed each year
- A copy of the Anaphylaxis Plans will be placed in the First Aid kit for each excursion/camp the student attends.

The school will ensure that relevant School Staff are trained, and briefed, at least twice per calendar year.

Staff Training:

The following School Staff will be appropriately trained:

- School Staff who conduct classes that students with a medical condition that relates to allergy and the potential for anaphylactic reaction; and
- Any further School Staff that are determined by the Principal.

The identified 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 Autoinjector, including hands on practise with a trainer Adrenaline Autoinjector device;
 - 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.

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.

Note: A template of the Risk Management Checklist can be found at Appendix 4 of the Anaphylaxis Guidelines for Victorian Schools or the Department's website:

<http://www.education.vic.gov.au/school/teachers/health/Pages/anaphylaxisschl.aspx>

Evaluation:

Reviewed September 2018.

Due for review in September 2020.