



Kew High School Action Plan

Kew High School Anaphylaxis Management and Action Plan

Related Policy: Health and Safety Policy

1. AIMS & OUTLINE

This action plan explains to Kew High School parents, carers, staff and students the processes and procedures in place to support students diagnosed as being at risk of suffering from anaphylaxis. This action plan also ensures that Kew High School is compliant with Ministerial Order 706 and the Department's guidelines for anaphylaxis management.

This action plan 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.

This action plan includes the following components:

- **Definition**
- **Possible signs and symptoms**
- **Treatment**
- **Individual Anaphylaxis Management Plans**
- **Emergency procedure if a reaction occurs**
- **Epipen management**
- **Preventative/risk management measures**
- **Communication**
- **Staff training**
- **First Aid information**

2. IMPLEMENTATION PLAN

The implementation / action plan consist of the following information

2.1 Definition

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, medication and exercise.

2.2 Possible signs and symptoms

2.2.1 Possible signs and symptoms may include:

- Hives/rash
- Facial swelling
- Tingling in or around the mouth

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Date for review: February 2020*



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- Abdominal pain/vomiting/diarrhoea
- Cough or wheeze
- Difficulty breathing or swallowing
- Breathing stops
- Loss of consciousness or collapse

2.3 Treatment

- 2.3.1 Adrenaline given as an injection into the muscle of the outer mid-thigh is the first aid treatment for anaphylaxis.
- 2.3.2 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.
- 2.3.3 **If unsure if asthma or anaphylaxis then give the EpiPen**

2.4 Individual Anaphylaxis Management Plans

- 2.4.1 All students at Kew High School who are diagnosed by a medical practitioner as being at risk of suffering from an anaphylactic reaction must have an Individual Anaphylaxis Management Plan.
- 2.4.2 When notified of an anaphylaxis diagnosis, the principal/principal's delegate of Kew High School is responsible for developing a plan in consultation with the student's parents/carers.
- 2.4.3 Where necessary, an Individual Anaphylaxis Management Plan will be in place as soon as practicable after a student enrolls at Kew High School and where possible, before the student's first day.
- 2.4.4 Parents and carers must:
- obtain an ASCIA Action Plan for Anaphylaxis from the student's medical practitioner and provide a copy to the school as soon as practicable
 - immediately inform the school in writing if there is a relevant change in the student's medical condition and obtain an updated ASCIA Action Plan for Anaphylaxis
 - provide the school with a current adrenaline autoinjector for the student that has not expired;
 - participate in annual reviews of the student's Plan.
- 2.4.5 Each student's Individual Anaphylaxis Management Plan must include:
- information about the student's medical condition that relates to allergies 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 school staff, 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 risk minimisation strategies, which have been identified in the Plan
 - information about where the student's medication will be stored



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- the student's emergency contact details
- an up-to-date ASCIA Action Plan for Anaphylaxis completed by the student's medical practitioner.

2.4.6 A student's Individual Anaphylaxis Management 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:

- 2.4.6.1 as soon as practicable after the student has an anaphylactic reaction at school
- 2.4.6.2 if the student's medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, changes
- 2.4.6.3 when the student is participating in an off-site activity, including camps and excursions, or at special events including fetes and concerts.
- 2.4.6.4 When the school has identified a significant increase in the student's potential risk of exposure to allergens at school.

2.5 Emergency procedure if a reaction occurs

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 • Two students to be urgently sent by the yard duty / class teacher to inform the office that the EpiPen is needed for a certain student, specifying the name of the child and their location. • At least one trained person (ideally two) are to take the student's EpiPen from medications box in the General Office along with a spare pen to the student's location as quickly as possible. • Ensure that their anaphylaxis management plan is with the EpiPen. • Staff members should also bring the defibrillator. • 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 EpiPen</p> <ul style="list-style-type: none"> • Remove from plastic container • Form a fist around the EpiPen and pull off 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 EpiPen • Note the time the EpiPen is administered • Retain the used EpiPen to be handed to ambulance paramedics along with the time of administration
3.	<ul style="list-style-type: none"> • Call an ambulance (000).



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	<ul style="list-style-type: none"> • Ask for Mica Unit, stating Epipen was given. • Individual making the call must state which gate the ambulance is to enter through. Example: Burke Road, pedestrian crossing entrance. • Principal / Assistant / Nominee to wait at nominated gate to guide ambulance • Staff member should not hang up but take mobile phone to where the affected student is to relay to ambulance the student's present condition.
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.	Principal / Assistant / Nominee is to notify parent.
6.	Ambulance officers to be provided with CASES 21 report (ST21003) containing all medical details and emergency contacts
7.	Principal / Assistant / Nominee to travel to the hospital with the student.
8.	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, school staff should follow steps 2 – 5 as above.

2.6 Epipen management

2.6.1 At school

- 2.6.1.1 Parent supplies Epipen to school at the beginning of every year.
- 2.6.1.2 Epipen and accompanying anaphylaxis management plan (signed by a doctor) is to be stored in office Student's Medications Box next to mail trays the office (labelled).
- 2.6.1.3 Epipen is to be collected by Teacher and accompany student on any outside the school excursion or camp. Staff should also take a general use pen if available.
- 2.6.1.4 When attending a camp or excursion the coordinating staff should complete a risk assessment and inform the parents about the logistics of the camp, proposed management and the number of Epipens to be taken

2.6.2 On excursions/camps

- 2.6.2.1 Students to bring their own Epipen with them on all camps and excursions
- 2.6.2.2 The organising teacher will bring the student Epipen that is normally located at school along with a general use epipen if available.
- 2.6.2.3 Prior to the event the coordinating staff should complete a risk assessment and inform the parents about the logistics of the camp, proposed management and the number of Epipens to be taken
- 2.6.2.4 If an incident does occur during an excursion camp do not move the student
- 2.6.2.5 Apply Epipen if required (as per above procedure).
- 2.6.2.6 Call 000 or 112 for emergency – ask for MICA unit



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- 2.6.2.7 Inform parents and school that an incident has occurred
- 2.6.2.8 If practical in terms of student ratios a supervising staff member should travel with the student to the hospital in the ambulance.

2.7 Preventative/risk minimisation measures

- 2.7.1 School will hold a twice yearly briefing to all staff who have face to face contact with students
- 2.7.2 Training of school staff in accordance with clause 12 of the ministerial order
- 2.7.3 Purchase of adrenaline autoinjectors for general use and in accordance with clause 10 of the ministerial order
- 2.7.4 The provision of individual management plans for students at risk
- 2.7.5 A complete and up to date list of students who are at risk of anaphylaxis is appended to this action plan.
- 2.7.6 A risk review procedure specific to anaphylaxis is undertaken on a yearly basis school wide
- 2.7.7 A risk review procedure specific to anaphylaxis and the teaching of curriculum based subjects such as Food Technology to be undertaken on a yearly basis.

2.8 Communication

- 2.8.1 This Action Plan will be available on the school website so that parents and other members of the school community can easily access information about Kew High School's anaphylaxis management procedures.
- 2.8.2 The parents and carers of students who are enrolled at Kew High School and are identified as being at risk of anaphylaxis will also be provided with a copy of this Action Plan.
- 2.8.3 The principal is responsible for ensuring that all relevant staff, including casual relief staff, canteen staff and volunteers are aware of this policy and Example School's procedures for anaphylaxis management.
- 2.8.4 This Action plan will be included in all staff and student handbooks including the whole staff handbook, CRT handbook and volunteer handbook.
- 2.8.5 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, their role in responding to an anaphylactic reaction and where required, the identity of students at risk.

2.9 Staff training

- 2.9.1 All staff are required to undertake training and must have completed:
 - 2.9.1.1 an approved face-to-face anaphylaxis management training course in the last three years, or
 - 2.9.1.2 an approved online anaphylaxis management training course in the last two years.



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2.9.2 Staff are also required to attend a briefing on anaphylaxis management and this Action Plan at least twice per year (with the first briefing to be held at the beginning of the school year), facilitated by a staff member who has successfully completed an anaphylaxis management course within the last 2 years including

- 2.9.2.1 this Action Plan
- 2.9.2.2 the causes, symptoms and treatment of anaphylaxis
- 2.9.2.3 the identities of students with a medical condition that relates to allergies and the potential for anaphylactic reaction, and where their medication is located
- 2.9.2.4 how to use an adrenaline autoinjector, including hands on practice with a trainer adrenaline autoinjector
- 2.9.2.5 the school's general first aid and emergency response procedures
- 2.9.2.6 the location of, and access to, adrenaline autoinjectors that have been provided by parents or purchased by the school for general use.

2.10 First Aid officers and location of first aid kits

- General First Aid kits and Ventolin are available in the General office,
- Epipens are also located in the general office.
- Student medications, together with student assigned Epipens are located in the back room of the general office.
- There also Asthma kits in the following locations:
 - Jnr School Office – Room 107
 - Middle School Office – Room 2
 - Musicland office
 - Gym – PE staff office
 - Science Preparation Room
 - General Office
- All office staff have a first aid qualification. These staff include:
 - Ruchi Patel
 - Margaret Burnett
 - Linda Wilson
 - Linda Lazaru
 - Leonie Tolson

3. RESPONSIBILITIES

3.1 The Principal/nominee is responsible for the oversight of

- Ensuring that the anaphylaxis management plan is kept up-to-date in accordance with Ministerial Order 706
- Appointing a first aid officer in charge of overseeing the anaphylaxis management within the school.
- Providing an opportunity for twice yearly briefings of all staff who come into face-to-face contact with students who may be at risk of anaphylaxis



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- Ensuring at least one member of the school staff has successfully completed an anaphylaxis management training course in the 12 months prior in order to deliver and verify staff training.
- If for any reason training and briefing has not yet occurred in accordance with Ministerial Order 706 an interim plan will be developed in consultation with parents of any affected student with a medical related condition that relates to allergy and the potential for anaphylactic reaction and training must occur as soon as possible thereafter.
- Completing an annual Risk Management Checklist to monitor their obligations.

3.2 Teachers within the school will be responsible for:

- Ensuring they have completed the ASCIA Anaphylaxis e-training for Victorian Schools followed by a competency check by the School Anaphylaxis supervisor. online training module
- Making themselves aware of the students within the school who are at risk of anaphylaxis via the table published on the staff support site.
- When supervising an excursion seeking advice regarding students that are at risk of an anaphylactic reaction and ensuring they have reminded the students to bring their own Epipen as well as taking the student Epipen stored in the General Office.

3.3 The first aid officer will be responsible for:

- Ensuring that the list of students with medical conditions is up-to-date at the beginning of every year
- Keeping track of the used by dates on all student Epipens, as well as the general use pen that is stored in the general office.

3.4 The parents will be responsible for:

- Ensuring they provide an up-to-date anaphylaxis management plan signed by a doctor at the beginning of every school year
- Providing an in date Epipen for any student who is at risk of anaphylaxis and replacing this pen when necessary.

3.5 The students will be responsible for:

- Ensuring they carry with them their own Epipen on any excursions or camps.

4. RESOURCES REQUIRED

4.1 Resourcing requirements include

- 4.1.1 Staff member to manage the First Aid and students with Medical conditions
- 4.1.2 General use Epipen which is regularly updated

5. EVALUATION AND REVIEW

This action and implementation plan will be reviewed at the conclusion of the year in line Annual Implementation Plan and Strategic Plan.

6. REFERENCES AND APPENDICES

Author of action plan: Pamela Dunstall
Date for review: February 2020



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- Ministerial Order 706: Anaphylaxis Management in Victorian Schools
https://www.education.vic.gov.au/Documents/school/teachers/health/Anaphylaxis_MinisterialOrder706.pdf
- 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](#)

Blank Risk Management Checklist



Current Risk Management Checklist



Food technology risk management plan

