Melbourne Archdiocese Catholic Schools

Stella Maris Catholic Primary School Anaphylaxis Policy

Stella Maris is a school which operates with the consent of the Catholic Archbishop of Melbourne and is owned, operated and governed by Melbourne Archdiocese Catholic Schools Ltd (MACS).

Introduction

Stella Maris seeks to facilitate the safe participation of all students in the educational experiences offered by the school. Where students are known to be at risk of anaphylaxis, parents/guardians/carers are required to provide relevant information to the school to enable us to carry out our duty of care obligations.

Our school requires the active engagement of parents/guardians/carers in the provision of up to date to Anaphylaxis Management Plans (ASCIA Action Plan) that comply with Ministerial Order 706: Anaphylaxis Management in Victorian schools and school boarding premises (Ministerial Order 706) for each student diagnosed with a medical condition that relates to allergy and the potential for anaphylactic reaction.

The Principal at all times ensures the school complies with Ministerial Order 706: Anaphylaxis Management in Victorian Schools (Ministerial Order 706). The school will also comply with the associated guidelines published and amended by the Department of Education (DE) from time to time to support implementation of Ministerial Order 706 in Victorian schools. The school's processes are documented in the procedures for the management of anaphylaxis in line with the Anaphylaxis Policy for MACS Schools.

Purpose

This policy ensures that Stella Maris provides, as far as practicable, a safe and supportive environment in which students at risk of anaphylaxis are provided with reasonable adjustments for their participation in school programs and activities.

Scope

This policy applies to:

- staff, including volunteers and casual relief staff
- all students who have been diagnosed with a medical condition that relates to allergy and the potential for anaphylactic reaction, where the school has been notified of that diagnosis, or who may require emergency treatment for anaphylactic reaction
- parents/guardians/carers of students who have been diagnosed as at risk of anaphylaxis or who may require emergency treatment for anaphylactic reaction.

Principles

The following principles underpin this policy:

- Stella Maris principal and staff are responsible in ensuring the safety and wellbeing of all students in the school environment.
- The principal and all staff work with parents/guardians/carers to ensure, as far as practicable, that the needs of children at risk of anaphylaxis will be considered, mitigated, and minimised during school activities.
- The principal and staff take reasonable steps to reduce and manage risks to students with anaphylaxis in the school environment and school approved activities.

Policy

Stella Maris engages with the parents/guardians/carers of students at risk of anaphylaxis to develop risk minimisation strategies and management strategies.

As reflected in Ministerial Order 706 and the school's Enrolment Agreement, parents/guardians/carers are required to provide the school with up-to-date medical information to enable the school to carry out its duty of care.

The principal is responsible for ensuring that an Individual Anaphylaxis Management Plan is developed in consultation with the student's parents/guardians/carers, for any student who has been diagnosed by a medical practitioner as having a medical condition that relates to allergy and the potential for an anaphylactic reaction, where the school has been notified of the diagnosis, which includes an action plan for anaphylaxis in a format approved by the ASCIA (otherwise known as an ASCIA Action Plan for Anaphylaxis).

Parents/guardians/carers are responsible for the provision of an updated ASCIA Action Plan with any relevant changes to the student's medical condition as it relates to their allergy and potential for anaphylactic reaction, signed by the treating medical practitioner, together with a recent photo of their child and any medications and autoinjectors referenced in the plan and recommended for administration. Parents/guardians/carers are also responsible for providing an up to date photo for the ASCIA Action Plan when it is reviewed. For overseas travel or travel involving flights, an ASCIA Travel Plan for People at Risk of Anaphylaxis is to be completed by a registered medical practitioner in conjunction with a red ASCIA Action Plan for Anaphylaxis.

Parent/guardians/carers must inform the school in writing if their child's medical condition changes, insofar as it relates to allergy and the potential for anaphylactic reaction, and if relevant, provide an updated ASCIA Action Plan.

Parents/guardians/carers are also responsible for replacing the recommended medication and/or autoinjectors prior to their expiry date.

The principal will ensure the storage and display of completed ASCIA Action Plans to facilitate access for all staff members within the First Aid Room and in other agreed areas around the school.

Parents/guardians/carers must participate in an annual Program Support Group (PSG) meeting to revise their child's anaphylaxis management plan and update the plan based on medical advice.

The principal will purchase additional adrenaline autoinjectors for general use. They will decide on the type or brand of adrenaline autoinjector that is purchased for general use. These will be stored in the sick bay/first aid room and/or in the school's portable first aid kit as required. A First Aid Plan for Anaphylaxis and emergency procedures are to be stored or posted with general use adrenaline injectors. The principal is responsible for ensuring that general use autoinjectors are replaced at time of use or expiry, whichever is first. The expiry period is generally 12-18 months.

The principal must complete the Annual Anaphylaxis Risk Management Checklist for Schools at the start of each year to monitor the school's compliance with Ministerial Order 706 and monitoring obligations as published and amended by the Department from time to time.

The principal takes reasonable steps to ensure each Stella Maris staff member has adequate knowledge and training about allergies, anaphylaxis, and the school's expectations in responding to an anaphylactic reaction. The principal is responsible for ensuring that all staff undertake and successfully complete appropriate training for anaphylaxis management in accordance with Ministerial Order 706. Stella Maris will conduct twice yearly anaphylaxis management staff briefings including information set out by the Department of Education (DE) for use in Victorian schools, with one briefing at the commencement of the school year.

Procedures to implement this policy are documented below.

Roles, responsibilities and reporting

Role	Responsibility	Reporting requirement (if applicable)
First Aid Officer	Maintain a register of students at risk of anaphylactic reaction	
First Aid Officer	Ensure adequate autoinjectors for general use are available in the school and that they are replaced at time of use or expiry, whichever is first	
Principal	Ensure twice yearly briefings on anaphylaxis management are conducted, with one briefing held at the commencement of the school year	
Principal	Ensure staff have completed appropriate training and that adequate staff trained in anaphylaxis management are available for all school activities including off site activities and school approved activities outside school hours	
Principal	Ensure a communication plan is developed to provide information to all school staff, students, parents/guardians/carers about the school's policy and procedures for anaphylaxis management	
Principal	Ensure this policy is published and available to the school community	Annual attestation to the Executive Director
Anaphylaxis Supervisor or other staff member who has completed Anaphylaxis Management course successfully in past two years	Conduct twice yearly briefings for all staff on anaphylaxis management using the briefing template provided by the DE for use in schools	

Procedures

Communication with parents/guardians/carers for management information

The principal or their nominee engages with the parents/guardians/carers of students at risk of anaphylaxis to develop risk minimisation strategies and management strategies. The principal will also take reasonable steps to ensure each staff member has adequate knowledge about allergies, anaphylaxis, and the school's expectations in responding to an anaphylactic reaction.

The principal requires that parents/guardians/carers provide up to date medical information and an updated Individual Action Plan (ASCIA Action Plan) signed by the treating medical practitioner together with a recent photo of their child and any medications and autoinjectors referenced in the plan and recommended for administration. Parents/guardians/carers are requested to provide this information annually, prior to camps and excursions, and if the child's medical condition changes since the information was provided.

Individual Anaphylaxis Management Plans

The principal is responsible for ensuring that all students who have been diagnosed by a medical practitioner as having a medical condition that relates to allergy and the potential for anaphylactic reaction have an Individual Anaphylaxis Management Plan (IAMP) developed in consultation with the student's parents/guardians/carers.

Stella Maris requires the IAMP to be in place as soon as practicable after the student is enrolled and where possible before their first day of school. An interim management plan will be put into place for a student who is diagnosed with anaphylaxis after enrolment at the school until the IAMP is developed. The principal or delegate will develop an interim plan in consultation with parents/guardians/carers. Training and a briefing will occur as soon as possible after the interim plan is developed.

The IAMP will comply with Ministerial Order 706 and record:

- student allergies
- locally relevant risk minimisation and prevention strategies
- names of people responsible for implementing risk minimisation and prevention strategies
- storage of medication
- student emergency contact details
- student ASCIA Action Plans

The student's IAMP will be reviewed by the principal or their delegate, in consultation with the student's parents, in all 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
- 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)

Location of Individual Anaphylaxis Management Plans and ASCIA Action Plans

Stella Maris communicates to staff the details of the location of student Individual Anaphylaxis Management Plans and ASCIA Action Plans within the school, during excursions, camps and special events conducted, organised, or attended by the school. Please note the ASCIA Travel Plan for People at Risk of Anaphylaxis requires completion by a registered medical practitioner for domestic or overseas travel.

Anaphylaxis Management Plans and ASCIA Action Plans & Autoinjectors are located in the school First Aid Room and in other areas as required.

Risk minimisation and prevention strategies

The principal ensures that risk minimisation and prevention strategies are in place for all relevant in-school and out-of-school settings which include (but are not limited to) the following:

Stella Maris considers the types of locations that require risk minimisations and response to potential Anaphylactic episodes including:

- 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 where supervision is provided (excluding OSHC)
- special events including incursions, sports, cultural days, fetes or class parties, excursions and camps.

Stella Maris does not ban certain types of foods (e.g., nuts) as it is not practicable to do so and is not a strategy recommended by the Department of Education (DE) or the Royal Children's Hospital. However, the school avoids the use of nut-based products in all school activities, request that parents do not send those items to school if possible and the school l reinforces the rules about not sharing and not eating foods provided from home.

The principal & members of the school Leadership Team regularly reviews the risk minimisation strategies outlined in *Risk minimisation strategies for schools* considering information provided by parents related to the risk of anaphylaxis.

Register of students at risk of anaphylactic reactions

The principal nominates the school First Aid Officer/Administration Staff Members to maintain an up-to-date register of students at risk of anaphylactic reaction. This information is to be shared with all staff and accessible to all staff in an emergency.

Location, storage and accessibility of autoinjectors

It is the responsibility of the principal to purchase autoinjectors for the school for general use and to ensure they are replaced at time of use or expiry; whichever is first. (Expiry date period is usually within 12–18 months). General use autoinjectors are used as a back-up to autoinjectors that are provided for individual students by parents in case there is a need for an autoinjector for another student who has not previously been diagnosed at risk of anaphylaxis.

Stella Maris considers the following when identifying the minimum autoinjectors required:

- the number of students enrolled at the school who have been diagnosed as being at risk of anaphylaxis
- the accessibility of autoinjectors (and the type) that have been provided by parents
- the number of locations at in the school, including in the school yard, and at
- The number and types of excursions, camps and special events conducted, organised or attended by the school

- The expiry date period of autoinjectors brands. usually expire within 12–18 months

Stella Maris also considers the following:

- The available brands in Australia (EpiPen®, EpiPen Jr®, Anapen 500®, Anapen 300® and Anapen Jr®) - Refer to Anaphylaxis Procedures for MACS Schools for further information
- The types used for broad use in emergency situations
- The brands that are widely accessible and do not require a prescription

The autoinjectors are stored the First Aid Room and in other areas as required.

The School will ensure that should select from the storage of autoinjectors in accordance with the recommendations below:

- Adrenaline autoinjector devices be stored in a cool dark place at room temperature, which they define as 15 and 25 degrees Celsius.
- If these temperatures cannot be maintained, ASCIA recommends storing the device in an insulated wallet.

School anaphylaxis supervisors are responsible for informing school staff of the location for use in the event of an emergency.

When to use an Autoinjector for general use

The principal ensures that autoinjectors for general use will be used under the following circumstances:

- a student's prescribed autoinjector does not work, is misplaced, misfires, has accidentally been discharged, is out of date or has already been used
- a student previously diagnosed with a mild or moderate allergy who was not prescribed an adrenaline injector has their first episode of anaphylaxis
- when instructed by a medical officer after calling 000
- first time reaction to be treated with adrenaline before calling.

Note: if in doubt, give autoinjector as per ASCIA Action Plans. Please review ASCIA First Aid Plan for Anaphylaxis (ORANGE) and ASCIA Adrenaline (Epinephrine) Injectors for General Use *for further information.*

Emergency response to anaphylactic reaction

In an emergency anaphylaxis situation, the student's ASCIA Action Plan, the emergency response procedures in this policy and ASCIA First Aid Plan for Anaphylaxis must be followed.

The principal must ensure that when a student at risk of an anaphylactic reaction is under the care or supervision of the school outside normal class activities, such as in the school yard, on camps or excursions or at special events conducted, organised or attended by the school, there are sufficient staff present who have been trained in accordance with Ministerial Order 706.

All staff are to be familiar with the location and storage and accessibility of autoinjectors in the school, including those for general use.

The principal must determine how appropriate communication with school staff, students and parents is to occur in event of an emergency about anaphylaxis.

Copies of the ASCIA First Aid Plan for Anaphylaxis and emergency procedures are prominently displayed in the relevant places in the school, for example, first aid room, classrooms and in/around other school facilities, including the canteen.

Stella Maris will ensure:

- A complete and up-to-date list of students identified at risk of anaphylaxis and where this is located
- Details of Individual Anaphylaxis Management Plans and ASCIA action plans and their locations within the school and during off site activities or special events
- Details of what to do in an emergency – classroom, playground, off-site, etc
- Location and storage of autoinjectors, including those for general use
- How appropriate communication with staff, students, parents is to occur.

Staff training

In compliance with Ministerial Order 706, it is recommended that all Victorian school staff undertake one of two accredited training options.

Option 1. All school staff complete the online *ASCIA Anaphylaxis e-training for Victorian Schools* and have their competency in using an autoinjector tested by the school Anaphylaxis Supervisor in person within 30 days of completing the course. Staff are required to complete the ACSIA online training every two years.

The school Anaphylaxis Supervisor will have completed Course in Verifying the Correct Use of Adrenaline Injector Devices 22579VIC – at no cost for Victorian Catholic schools from HERO HQ.

Option 2. School staff undertake face-to-face training Course in First Aid Management of Anaphylaxis 22578VIC. Accredited for three years.

Stella Maris requires all staff to participate in training to manage an anaphylaxis incident. The training should take place as soon as practicable after a student at risk of anaphylaxis enrols and, where possible, before the student's first day at school.

Staff undertake training to manage an anaphylaxis incident if they:

- conduct classes attended by students with a medical condition related to allergy and the potential for anaphylactic reaction
- are specifically identified and requested to do so by the principal based on the principal's assessment of the risk of an anaphylactic reaction occurring while a student is under that staff member's care, authority or supervision.

Stella Maris considers where appropriate whether casual relief teachers and volunteers should also undertake training.

Stella Maris staff are to:

- successfully complete an approved anaphylaxis management training course in compliance with Ministerial Order 706
- participate in the school's twice yearly briefings conducted by the school's anaphylaxis supervisor or another person nominated by the principal, who has successfully completed an approved anaphylaxis management training program in the past two years.

A range of training programs are available, and the principal determines an appropriate anaphylaxis training strategy and implement this for staff. The principal ensures that staff are adequately trained and that enough staff are trained in the management of anaphylaxis noting that this may change from time to time dependant on the number of students with IAMPs.

The principal will identify two staff per school to become school anaphylaxis supervisors.

A key role undertakes competency checks on all staff who have successfully completed the ASCIA online training course. To qualify as a school anaphylaxis supervisor, the nominated staff members need to complete an accredited short course that teaches them how to conduct a competency check on those who have completed the online training course e.g., Course in Verifying the Correct Use of Adrenaline Injector Devices 22579VIC. At the end of the online training course, participants who have passed the assessment module are issued a certificate which needs to be signed by the

school anaphylaxis supervisor to indicate that the participant has demonstrated their competency in using an adrenaline autoinjector device.

School staff who complete the online training course are required to repeat that training and the adrenaline autoinjector competency assessment every two years.

Hero HQ has been contracted by the Catholic Education Commission of Victoria Ltd to deliver training in the Course in Verifying the Use of Adrenaline Injector Devices 22579VIC at no cost to Catholic schools. Training in this course is current for three years.

Stella Maris notes that Course in First Aid Management of Anaphylaxis 22578VIC is a face-to-face course that complies with the training requirements outlined in Ministerial Order 706. School staff who have completed this course will have met the anaphylaxis training requirements for the documented period.

Twice Yearly Staff Briefing

The principal ensures that twice yearly anaphylaxis management briefings are conducted, with one briefing held at the start of the year. The briefing is to be conducted by the school anaphylaxis supervisor or another staff member who has successfully completed an Anaphylaxis Management Course in the previous two years. The school use the Anaphylaxis Management Briefing Template provided by the Department of Education for use in Victorian schools. A facilitator guide and presentation for briefings created by Department of Education is available in the resources section of the procedures.

The briefing includes information about the following:

- The school's legal requirements as outlined in Ministerial Order 706
- the school's anaphylaxis management policy
- causes, signs and symptoms of anaphylaxis and its treatment
- names and pictures of students at risk of anaphylaxis, details of their year level, allergens, medical condition and risk management plans including location of their medication
- relevant anaphylaxis training
- ASCIA Action Plan for Anaphylaxis and how to use an autoinjector, including practising with a trainer autoinjector
- the school's general first aid and emergency responses
- location of and access to autoinjectors that have been provided by parents or purchased by the school for general use.

All school staff should be briefed on a regular basis about anaphylaxis and the school's anaphylaxis management policy.

Anaphylaxis communication plan

The principal is responsible for ensuring that a communication plan is developed to provide information to all school staff, students and parents/guardians/carers about anaphylaxis and the school's anaphylaxis management policy.

Stella Maris will ensure the following Risk Management Strategies are considered when communicating Anaphylaxis Management Plan Requirements to all staff members, parents/carers & students, where required:

- Raising staff awareness – arrangements for twice yearly briefing, regular briefings, induction of new staff, CRT staff, etc.
- Raising student awareness – Use of fact sheets, posters with messages about anaphylaxis, peer support, etc.
- Working with parents – developing open, cooperative relationships with parents/guardians/carers, how information will be shared; requesting and updating medical information.

- Methods for raising school community awareness – e.g. Newsletter, website, information nights, assemblies.

This communication plan includes strategies for advising school staff, students and parents/guardians/carers about how to respond to an anaphylaxis reaction of a student in various environments:

- during normal school activities, including in a classroom, in the school yard, in all school buildings and sites including gymnasiums and halls.
- during off-site or out of school activities, including on excursions, school camps and at special events conducted, organised or attended by the school.

The Communication Plan includes procedures to inform volunteers and casual relief staff of students who are at risk of anaphylaxis and of their role in responding to an anaphylactic reaction experienced by a student in their care.

The principal ensures that the school staff are adequately trained by completing an approved training course:

- Course in First Aid Management of Anaphylaxis 22578VIC or Course in Allergy and Anaphylaxis Awareness 10710NAT every 3 years.

The school may also consider, where appropriate, the completion of the course 'on line' via

- ASCIA e-training every 2 years together with associated competency checks by suitably trained Anaphylaxis Supervisor that has completed Course in Verifying the Correct Use of Adrenaline Injector Devices 22579VIC, or

AND provision of

- an in-house briefing for school staff at least twice per calendar year in accordance with Ministerial Order 706.

This policy is publicly available/ published on the school's website.

Definitions

Anaphylaxis

Anaphylaxis is a severe, rapidly progressive allergic reaction that is potentially life threatening. The most common allergens in school aged children are peanuts, eggs, tree nuts (e.g., cashews), cow's milk, fish and shellfish, wheat, soy, sesame, lupin and certain insect stings (particularly bee stings).

Anaphylaxis Guidelines (Guidelines)

A resource for managing severe allergies in Victorian schools, published by the Department of Education (DE) for use by all schools in Victoria and updated from time to time.

Australasian Society of Clinical Immunology and Allergy (ASCIA)

The peak professional body of clinical immunology and allergy in Australia and New Zealand.

Autoinjector

An adrenaline autoinjector device, approved for use by the Australian Government Therapeutic Goods Administration, which can be used to administer a single pre-measured dose of adrenaline to those experiencing a severe allergic reaction (anaphylaxis).

Department of Education (DE)

Victorian Department of Education.

Melbourne Archdiocese Catholic Schools Ltd (MACS)

MACS is a reference to Melbourne Archdiocese Catholic Schools Ltd, and / or its subsidiaries, MACSS and/or MACSEYE (*as the context requires*).

Melbourne Archdiocese Catholic Specialist Schools Ltd (MACSS)

Melbourne Archdiocese Catholic Specialist Schools Ltd, a wholly owned subsidiary of MACS established to conduct and operate specialist schools.

Ministerial Order 706

Ministerial Order 706: Anaphylaxis Management in Victorian Schools which outlines legislated requirements for schools and key inclusions for their Anaphylaxis Management Policy.

Related policies and documents

Supporting documents

Stella Maris Individual Anaphylaxis Management Plan – Template

Risk Minimisation Strategies for Schools – Template

Stella Maris Emergency Response to Anaphylactic Reaction – Sample – Template for Schools

Stella Maris Off-site Risk Management Checklist for Schools – Template

Annual Anaphylaxis Risk Management Checklist for Schools – Template

Appendix 1: Definitions

Related MACS policies

Anaphylaxis Policy for MACS schools

Duty of Care Policy for MACS schools

Emergency Management Plan

First Aid Policy

Resources

External websites, organisations or other contacts to assist with policy implementation.

Legislation and standards

Department of Education Victoria Anaphylaxis Guidelines

Department of Education Victoria Anaphylaxis Management Briefing presentation

Department of Education Victoria Facilitator guide for anaphylaxis management briefing

ASCIA Action Plans and First Aid Plans for Anaphylaxis or Allergies

ASCIA Action Plans for Anaphylaxis (General, Anapen, Epipen)

ASCIA First Aid Plan for Anaphylaxis (General, Anapen, Epipen, Pictorial)

ASCIA Travel Plan

ASCIA Anaphylaxis e-training for Victorian schools

ASCIA Adrenaline (Epinephrine) Injectors for General Use

Policy information

Approval Authority	Executive Director
Sponsoring director	Director, Learning and Regional Services
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