# Mary Queen of Heaven Anaphylaxis Policy



Mary Queen of Heaven Catholic Primary School 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 (MACS), where formation and education are based on the principles of Catholic doctrine, and where the teachers are outstanding in true doctrine and uprightness of life.

# Purpose

Mary Queen of Heaven Catholic Primary School seeks to provide, as far as practicable, a safe and supportive environment in which students at risk of anaphylaxis are provided with reasonable adjustments. The school 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, Mary Queen of Heaven Catholic Primary School requires parents to provide relevant information to enable them to carry out their duty of care obligations. Mary Queen of Heaven Catholic Primary School requires the active engagement of parents/carers in the provision of up to date to Anaphylaxis Management Plans (ASCIA Action Plan) that comply with Ministerial Order 706. Mary Queen of Heaven Catholic Primary School's processes reflect the associated guidelines published by the Victorian government to comply with Ministerial Order 706 in all Victorian schools.

The Principal will at all times ensure that the school complies with Ministerial Order 706.

The policy is to be read and observed in conjunction with school policies on Medical Conditions, Asthma Management, and First Aid including Arrangements for ill students.

The Victorian guidelines on anaphylaxis management include information on anaphylaxis including:

- legal obligations of schools in relation to anaphylaxis
- School Anaphylaxis Management Policy
- staff training
- Individual Anaphylaxis Management Plans
- risk minimisation and prevention strategies
- school management and emergency responses
- adrenaline autoinjectors for general use
- Communication Plan
- Annual Risk Management Checklist.

# Scope

This policy applies to:

- all staff, including casual relief staff and volunteers
- all students who have been diagnosed as at risk of anaphylaxis or who may require emergency treatment for anaphylactic reaction
- parents, guardians and/or carers of students who have been diagnosed as at risk of anaphylaxis or who may require emergency treatment for anaphylactic reaction.

# **Definitions and terms**

The Act is the Education and Training Reform Act 2006 (Vic).

**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).

**ASCIA** is an acronym, short for Australasian Society of Clinical Immunology and Allergy, the peak professional body of clinical immunology and allergy in Australia and New Zealand.

ASCIA Action Plan is the plan that is a nationally recognised action plan for anaphylaxis developed by ASCIA. These plans are device specific; that is, they list the student's prescribed adrenaline autoinjector (e.g. EpiPen® or EpiPen® Jr) and must be completed by the student's medical practitioner. Should a different adrenaline autoinjector become available in Australia, then a different ASCIA Action Plan specific to that device would be developed. This plan is one of the components of the student's Individual Anaphylaxis Management Plan.

**Autoinjector** is an adrenaline autoinjector device, approved for use by the Commonwealth 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).

The Department is the Victorian Department of Education and Training

**The Guidelines** are the Anaphylaxis Guidelines – A resource for managing severe allergies in Victorian schools, published by the Department of Education and Training for use by all schools in Victoria and updated from time to time.

**Online training course** is the ASCIA Anaphylaxis e-training for Victorian Schools approved by the Secretary pursuant to clause 5.5.4 of Ministerial Order 706.

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

#### **Procedures**

The principal of Mary Queen of Heaven Catholic Primary School engages with the parents/carers of students at risk of anaphylaxis to develop an individual anaphylaxis management plan (IAMP) and risk minimisation strategies and management strategies. The principal also takes 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 purchases additional adrenaline autoinjectors for general use. These are stored in the first aid room and in the school's portable first aid kit as required.

As reflected in Ministerial Order 706 and the school's enrolment agreement, parents are required to provide the school with up to date medical information to enable the school to carry out its duty of care. Parents are responsible for the provision of 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 are also responsible for replacing the recommended medication and/or autoinjectors prior to their expiry date. Mary Queen of Heaven Catholic Primary School will store and display completed IAMP and ASCIA Action Plans to facilitate access for staff e.g. in staff working areas, sick bay and class teacher manuals. Parents 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.

# 1. Individual Anaphylaxis Management Plans

The principal of Mary Queen of Heaven Catholic Primary School ensures that all students who have been diagnosed by a medical practitioner as being at risk of anaphylaxis have an Individual Anaphylaxis Management Plan developed in consultation with the student's parents, guardians and/or carers. These plans will be updated:

- annually
- when the student's medical condition changes
- as soon as possible after a student has an anaphylactic reaction at school
- when a student is to participate in an off-site excursion or special event organised or attended by the school

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Mary Queen of Heaven Catholic Primary School requires the plan 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 Plan is developed. The principal or delegate will develop an interim plan in consultation with parents. Training and a briefing for staff will occur as soon as possible after the interim plan is developed.

The Individual Anaphylaxis Management Plan 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 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
- 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).

### 2. 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:

- during classroom activities (including class rotations, specialist and elective classes)
- between classes and other breaks
- in canteens
- during recess and lunch times
- before and after school where supervision is provided (excluding Out of school hours care (OSHC)
- special events including incursions, sports, cultural days, fetes or class parties, excursions and camps.

Mary Queen of Heaven Catholic Primary School 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 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 at all possible; and the school reinforces the rules about not sharing and not eating foods provided from home.

The principal regularly reviews the risk minimisation strategies outlined in Appendix A: Risk Minimisation in light of information provided by parents related to the risk of anaphylaxis.

See Appendix A: Risk Minimisation strategies for schools.

#### 3. Register of students at risk of anaphylactic reactions

The principal has nominated the school registrar (who is also a first aid officer) to maintain an up-to-date register of students at risk of anaphylactic reaction. This information is shared with all staff and accessible to all staff in an emergency.

#### 4. Location of the Plans, storage and accessibility of autoinjectors (EpiPens)

The location of individual anaphylaxis management plans and ASCIA plans during on-site normal school activities and during off-site activities will be known to staff so they are accessible in an emergency.

It is the responsibility of the principal to purchase autoinjectors for the school for general use:

• 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 patient who has not previously been diagnosed at risk of

anaphylaxis.

The Principal determines the number of additional autoinjector(s) required. In doing so, the Principal takes into account the following relevant considerations:

- the number of students enrolled at the school who have been diagnosed as being at risk of anaphylaxis, including those with an ASCIA Action Plan for allergic reactions (they are potentially at risk of anaphylaxis)
- the accessibility of autoinjectors (and the type) that have been provided by parents of students who have been diagnosed as being at risk of anaphylaxis
- the availability and sufficient supply of autoinjectors for general use in specified locations at the school including in the school yard, and at excursions, camps and special events conducted, organised or attended by the school
- that autoinjectors for general use have a limited life, and will usually expire 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.

The Principal will need to determine the type of autoinjector to purchase for general use. In doing so, it is important to note the following:

- autoinjectors available in Australia are EpiPen® and EpiPen Jnr®
- Autoinjectors are designed so that anyone can use them in an emergency.

#### 4.1 When to use an Autoinjector for general use

Autoinjectors for general use will be used when:

- a student's prescribed autoinjector does not work, is misplaced, out of date or has already been used
- when instructed by a medical officer after calling 000 (mobile 112)
- First time reaction to be treated with adrenaline before calling 000 (mobile 112)

RCH help desk advises that you do not require permission or advice, this only delays the administration of adrenaline – if in doubt, give autoinjector as per ASCIA Action Plans.

#### 5. Emergency response to anaphylactic reaction

In an emergency anaphylaxis situation the student's Individual Anaphylaxis Management Plan, including ASCIA plan, the emergency response procedures in this policy and general first aid procedures of the school must be followed.

The principal ensures 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 is sufficient staff present who have been trained in accordance with Ministerial Order 706.

Details of the location of Individual Anaphylaxis Management Plans and ASCIA Plans within the school, during excursions, camps and special events conducted, organised or attended by the school must be communicated to staff.

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 determines how appropriate communication with school staff, students and parents is to occur in the event of an emergency about anaphylaxis.

Copies of the emergency procedures are prominently displayed in the relevant places in the school, for example, first aid room, classrooms and in/around other school facilities.

See Appendix B: Emergency response to anaphylactic reaction procedures.

### 6. Staff training

It is the responsibility of the Principal to ensure that staff training is undertaken in accordance with Ministerial Order 706.

In compliance with Ministerial Order 706, it is recommended that all Victorian school staff undertake the online training course and have their competency in using an autoinjector tested in person within 30 days of completing the course by an Anaphylaxis Supervisor that has completed Course in Verifying the Correct Use of Adrenaline Autoinjector Devices 22303VIC. Staff at Mary Queen of Heaven Catholic Primary School are required to complete this training **every two years**.

School staff can also undertake face-to-face training courses in First Aid Management of Anaphylaxis 22300VIC or Course in Allergy and Anaphylaxis Awareness 10710 NAT formerly 10313NAT.

The principal 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 will 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

The principal considers where appropriate whether casual replacement teachers and volunteers should also undertake training.

Mary Queen of Heaven Catholic Primary School staff will:

- 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 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 implements this for staff. The principal ensures that staff are adequately trained and

that a sufficient number of staff are trained in the management of anaphylaxis noting that this may change from time to time depending on the number of students with ASCIA plans.

The principal identifies two staff to become School Anaphylaxis Supervisors. A key role is to undertake 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 will need to have completed 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 Autoinjector Devices 22303VIC. At the end of the online training course, participants who passed the assessment module, are issued a certificate signed by the *School Anaphylaxis Supervisor* to indicate that the participant has demonstrated their competency in using an adrenaline autoinjector device.

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

The Asthma Foundation has been contracted by the Catholic Education Commission of Victoria (CECV) to deliver training in the *Course in Verifying the Use of Adrenaline Autoinjector Devices 22303VIC*. Training in this course is current for **three years**.

Mary Queen of Heaven Catholic Primary School notes that course in *First Aid Management of Anaphylaxis 22300VIC* and *Course in Allergy and Anaphylaxis Awareness 10710NAT formerly 10313NAT* are face-to-face courses that comply with the training requirements outlined in Ministerial Order 706. School staff that have completed these courses will have met the anaphylaxis training requirements for the documented period of time.

#### 6.1 Twice Yearly Staff Briefing

The principal ensures that twice yearly anaphylaxis management staff briefings are conducted, with one briefing held at the start of the year. The briefing is conducted by the *Anaphylaxis Supervisors* or another staff member who has successfully completed an *Anaphylaxis Management Course* in the **previous two years**. The school uses the template presentation for the briefing provided by the Department of Education for use in Victorian schools.

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
- the identities 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
- ASCIA Action Plan for Anaphylaxis and how to use an auto injector, including practice with a trainer auto injector
- the school's general first aid and emergency responses
- location of and access to auto injectors that have been provided by parents or purchased by the school for general use.

All school staff are briefed on a regular basis about anaphylaxis and the school's anaphylaxis management policy and will be briefed after an interim plan is developed for a student found to be at risk of anaphylaxis for whom an Individual Anaphylaxis Management Plan has not yet been developed.

# 7. Anaphylaxis communication plan

The principal at Mary Queen of Heaven Catholic Primary School is responsible for ensuring that a communication plan is developed to provide information to all school staff, students and parents about anaphylaxis and the school's anaphylaxis management policy.

This communication plan includes strategies for advising school staff, students and parents 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**:

- First Aid Management of Anaphylaxis 22300VIC or Course in Allergy and Anaphylaxis Awareness 10710NAT formerly 10313NAT course every 3 years, or
- 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
  Autoinjector Devices 22303VIC.

#### AND provision of

• an in-house briefing at least <u>twice per calendar year</u> in accordance with Ministerial Order 706, with the first of these briefings occurring at the start of the school year.

## 8. Anaphylaxis Management Procedures

The principal is responsible for communication with staff to ensure they are aware of the the actions and procedures that must be undertaken to ensure that the requirements of the policy are enacted.

#### 1. Register of students with anaphylaxis

- Student name, anaphylaxis status, allergies and EpiPen expiry details will be recorded on the school's administration system. A copy of this report will be printed and kept in the Anaphylaxis Folder in the First Aid room.
- Student photos and anaphylaxis triggers will be placed up on the First Aid Room wall.
- The register of students with anaphylaxis will be maintained and updated by the school registrar/first aid officer.
- Individual Anaphylaxis Management Plans will be reviewed and documented at the beginning of each year. (Anaphylaxis Support Resource 1)
- An annual Risk Assessment checklist will be carried out annually by the leadership team. (Anaphylaxis Support Resource 3)

#### 2. Location, storage and accessibility of autoinjectors (Epipen)

- Student Individual Action Management Plans plans and Epipens will be kept visible and located in an insulated bag, kept in an unlocked cupboard in the First Aid Room. Student plans will also be placed up on the First Aid Room wall. Generic EpiPens will also be kept in the EpiPen cupboard in first aid room and labelled accordingly.
- Procedures for camps, excursions and special activities.
  - o When planning school camps, a risk management plan for the student at risk of anaphylaxis will be developed in consultation with parents/guardians and camp managers. (Anaphylaxis Support Resource 2)
  - o Campsites/accommodation providers and transport providers will be advised in advance of any student with food allergies.
  - o Staff will liaise with parents/guardians to develop alternative menus.
  - o Use of other substances containing allergens (e.g. soaps, lotions or sunscreens containing nut oils) should be avoided.
  - o The student's adrenaline autoinjector and Individual Action Management Plan, inclusive of the ASCIA plan and a mobile phone must be taken to camp.
  - o A team of staff who have been trained in the recognition of anaphylaxis and the administration of the adrenaline autoinjector will accompany the student on camp. However, all staff present need to be aware if there is a student at risk of anaphylaxis.
  - o Staff will be briefed on the emergency procedure that sets out clear roles and responsibilities in the event of an anaphylactic reaction.

- o Be aware of what local emergency services are in the area and how to access them. Liaise with them before the camp.
- o The adrenaline autoinjector should remain close to the student at risk of anaphylaxis and staff must be aware of its location at all times.
- On a school excursion, the individual medication will be carried as usual with first aid supplies by the teacher and will be easily accessible. It is not to be put into storage or cloaked.
- o On school camp, the medication is to be taken to each activity and outing which the child attends. The teacher is not to leave the child suffering the reaction, but will send another for assistance.
- o Cooking and art and craft games should not involve the use of known allergens.

#### 3. Emergency Response

- A complete and up-to-date list of all students identified at risk of anaphylaxis will be generated by the school administration system. The list will be reviewed each term by the school's registrar and placed in the schools Anaphylaxis Folder in the First Aid Room. A copy of the list will also be generated for all teachers and placed into their classroom administration folders. Classroom Administration Folders will be kept on each teacher's workstation.
- Teachers and other school staff who have contact with the student at risk of anaphylaxis, are supported to undertake training in anaphylaxis management including how to respond in an emergency.
- At other times while the student is under the care or supervision of the school, including excursions, yard duty, camps and special event days, the principal must ensure that there is a sufficient number of staff present who have up to date training and know how to recognise, prevent and treat anaphylaxis. Training will be provided to these staff as soon as practicable after the student enrols.
- Individual Anaphylaxis Management Plans and ASCIA action plans will be displayed on the wall in the First Aid Room. A copy of the Management Plans and ASCIA plans will also be kept in the individual insulated bags containing the Epipens and in the Classroom Administration Folders. Classroom Administration Folders will be brought to all off site activities and events, as will the students individually insulated Epipen bags.
- All autoinjectors, including those for general use will be kept in clearly labelled insulated bags. These will be kept in an unlocked cupboard in the First Aid Room.
- If a child experiences an anaphylactic reaction in the classroom, the message for the Epipen® to be sent to the room is relayed by intercom phone system or a child or another teacher is sent to the office with the child's anaphylaxis card which signifies that the required medication is needed.
- If the incident occurs on the yard, a child or another teacher is sent to the office with the child's anaphylaxis card which signifies that the required medication is needed on the yard.
- On a school excursion, the individual medication will be carried as usual with first aid supplies by the teacher and will be easily accessible. It is not to be put into storage or cloaked.
- On school camp, the medication is to be taken to each activity and outing which the child attends. The teacher is not to leave the child suffering the reaction, but will send another for assistance.

- Communication with staff, students, parents is essential to ensure that the school maintains its vigilance in responding to anaphylactic or potential anaphylactic occurrences:
  - o The principal will be responsible for providing information to all staff, students and parents/guardians about anaphylaxis and development of the school's anaphylaxis management strategies.
  - o Volunteers and casual relief staff will be informed on arrival at the school if they are caring for a student at risk of anaphylaxis and their role in responding to an anaphylactic reaction.

#### 4. Staff training

- Teachers and other school staff who conduct classes which students at risk of anaphylaxis attend, or
  give instruction to students at risk of anaphylaxis must have up to date training in an anaphylaxis
  management training course.
- At other times while the student is under the care or supervision of the school, including excursions, yard duty, camp and special event days, the principal must ensure that there is a sufficient number of staff present who have up to date training in an anaphylaxis management training course.
- The following school staff will be appropriately trained:
  - o School staff who conduct classes that students with a medical condition that relates to allergy and the potential for anaphylactic reaction; and
  - o Any further school staff determined by the Principal.
- The identified school staff will undertake the following training:
  - o an Anaphylaxis Management Training Course in the three years prior; and
  - o 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 practice 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. The Deputy Principal and School Registrar/First Aid Officer will be the Anaphylaxis Supervisors at Mary Queen of Heaven Catholic Primary 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.
- First Aid and Anaphylaxis training records will be maintained following each training course and briefing and will be updated on each staff member's profile and register of first aid training on the school's administration system by the school Office Administrator.

#### 5. Communication plan

- Raising staff awareness.
  - O Twice yearly briefings on the students with Anaphylaxis at Mary Queen of Heaven, school policy and procedures and the use of an autoinjector.
  - O A regular briefing on the school's anaphylaxis practices will be explored at a wellbeing staff Professional Learning Meeting each term.
  - O New staff and Casual replacement teaching (CRT) staff will be inducted into the school's Anaphylaxis process and Anaphylaxis students by the Deputy Principal upon their engagement with Mary Queen of Heaven Catholic Primary School. This will be reviewed periodically.
- Raising student awareness.
  - o Fact sheets and posters about anaphylaxis will be placed in the First Aid Room and in classrooms and the playground.
  - o Messages about anaphylaxis and its management will be included in correspondence distributed via the school newsletter and communication app as well as through the Health and Physical Education program.
- Working with parents.
  - o Families of students with anaphylaxis will be invited to attend a Program Support Group Meeting (PSG) during which students' personalised management plan and school procedures will be discussed.
  - o Medical information will be updated during these PSG meetings.
  - o Communication with families will be maintained through the regular sharing of Mary Queen of Heaven' practices via the school newsletter and Communication App.
  - o Families will be asked via our communication streams to regularly update medical information. This will be done at the beginning of each term and when a student's medical condition changes.
- Methods for raising school community awareness.
  - o Information will be shared via all communication platforms including the school Newsletter, website, information nights and assemblies.

#### 9. ANNUAL RISK MANAGEMENT CHECKLIST

The Principal completes the Annual Risk Management Checklist to ensure the obligations of Ministerial Order 706 are monitored.

The Anaphylaxis policy is reviewed annually.

Last reviewed: August 2021

#### **Anaphylaxis Support Resources**

Anaphylaxis Support Resource 1: Individual Anaphylaxis Management Plan

Anaphylaxis Support Resource 2: Risk Assessment Checklist for camps, excursions

Anaphylaxis Support Resource 3: Annual risk assessment checklist

# **Related policies**

Mary Queen of Heaven Catholic Primary School Supervision Policy

Mary Queen of Heaven Catholic Primary School Anaphylaxis Checklist for Off-Site Activities

Mary Queen of Heaven Catholic Primary School Asthma Management Policy

Mary Queen of Heaven Catholic Primary School Emergency Management Plan

Mary Queen of Heaven Catholic Primary School First Aid Policy

Mary Queen of Heaven Catholic Primary School Distribution of Medicines Policy

# Appendix A: Risk Minimisation strategies for schools

# **In-school settings**

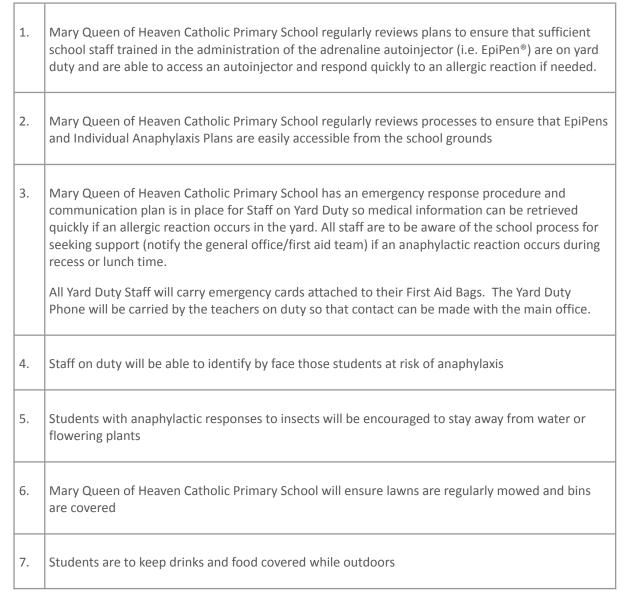
# Learning Areas/Classrooms

1.	A copy of each student's Individual Anaphylaxis Management Plan will be easily accessible, kept in the First Aid Room, the Administration Folder in the student's classroom, the insulated Epipen bag and in the students' file in the office.  Anaphylaxis cards will be attached to the First Aid bags which taken to Yard Duty.
3.	Use non-food treats where possible, but if food treats are used in class it is recommended that parents of students with food allergy provide a treat box with alternative treats. Alternative treat boxes should be clearly labelled and only handled by the student.
4.	Staff will not provide food items from external sources to students who are at risk of anaphylaxis
6.	Products labelled as containing specific allergens known to impact students e.g. 'may contain traces of nuts' should not be served to students allergic to nuts. Products labelled 'may contain milk or egg' should not be served to students with milk or egg allergy.
7.	Staff will be aware of possible hidden allergens in food and other substances used in cooking, food technology, science and art classes including packaging e.g. peanut butter containers, egg containers etc.
8.	All cooking utensils, preparation dishes, plates, knives and forks etc. will be washed and cleaned thoroughly after preparation of food and cooking
9.	Mary Queen of Heaven Catholic Primary School acknowledges that children with food allergy need special care when cooking or doing food technology. Mary Queen of Heaven Catholic Primary School will liaise with parents prior to the student undertaking these activities/subjects. Mary Queen of Heaven Catholic Primary School will utilise the resources available to support decision making processes noting that helpful information is available at: www.allergyfacts.org.au/images/pdf/foodtech.pdf
10.	Mary Queen of Heaven Catholic Primary School will regularly undertake discussions with students about the importance of washing hands, eating their own food and not sharing food

11. The Deputy Principal will inform emergency teachers, specialists, teachers and volunteers of the names of any students at risk of anaphylaxis, the location of each student's Individual Anaphylaxis Management Plan and EpiPen, the School's Anaphylaxis Policy and each person's responsibility in managing an incident i.e. seeking a trained staff member.

# Canteen (No Canteen in 2022)

#### **School Grounds**



#### Special Events (e.g. sporting events, incursions, class parties, etc)

- 1. Mary Queen of Heaven will ensure that sufficient staff, who have been trained in the administration of an autoinjector, are supervising students to be able to respond quickly to an anaphylactic reaction if required. Staff will avoid using food in activities or games or as rewards 2. 3. Mary Queen of Heaven will consult with parents in advance of planned special events to either develop an alternative food menu or request the parent to send a meal for the student/s at risk 4. Parents of other students will be informed in advance about foods that may cause allergic reactions in students at risk and request that they avoid providing students with treats containing known allergens whilst they are at a special school event 5. Party balloons will not be used if a student has an allergy to latex 6 Where students from other schools are participating in an event at Mary Queen of Heaven
  - Catholic Primary School, staff will consider requesting information from the participating schools about any students who will be attending the event who are at risk of anaphylaxis. In this instance, staff will seek agreement on strategies to minimise the risk of a reaction while the student is visiting the school. This should include a discussion of the specific roles and responsibilities of the host and visiting school. Students at risk of anaphylaxis will be required to bring their own adrenaline autoinjector with them to events outside their own school.

# Out-of-school settings/Excursions/Camps/Tours

Mary Queen of Heaven Catholic Primary School will determine which of the strategies set out below apply in the specific context for the out-of-school setting involved in the planned activity. The strategies that are appropriate will be determined with consideration of factors such as the age and independence of the student, the facilities and activities available, and the general environment. Not all strategies will be relevant for each school activity.

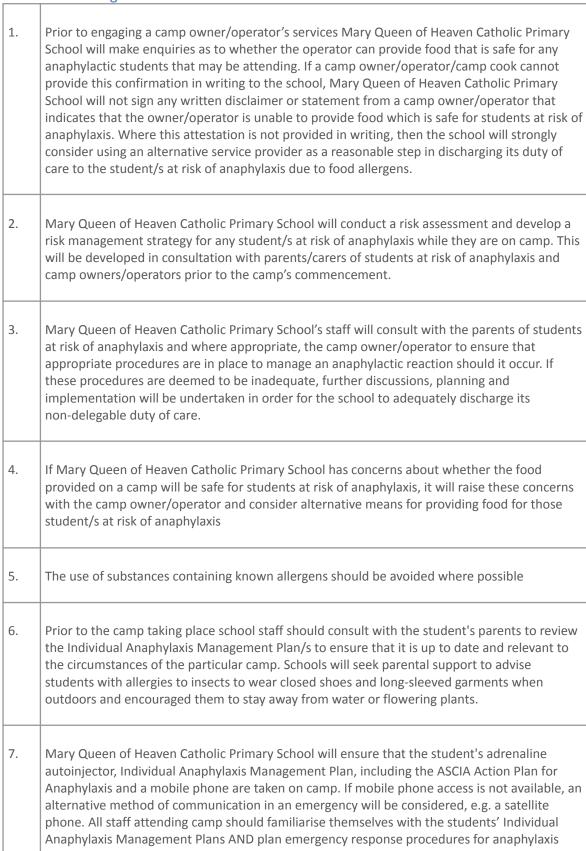
#### Travel to and from school by bus

1. School staff will consult with parents of students at risk of anaphylaxis and the bus service provider to ensure that appropriate risk minimisation strategies are in place to manage an anaphylactic reaction should it occur on the way to or from the school or venue on the bus. This includes the availability and administration of an adrenaline autoinjector. The adrenaline autoinjector and ASCIA Action Plan for Anaphylaxis must be with the student on the bus even if this child is deemed too young to carry an adrenaline autoinjector on their person at school. It will be the responsibility of the teacher to carry the autoinjector and plan.

# Field trips/excursions/sporting events

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	1.	Risk Assessment will be undertaken for each individual student attending. If a student/s at risk of anaphylaxis is attending, sufficient school staff supervising the special event will be trained in the administration of an adrenaline autoinjector and be able to respond quickly to an anaphylactic reaction if required. A briefing for all staff involved in the activity will be held prior.	
	2.	A school staff member or team of school staff trained in the recognition of anaphylaxis and the administration of the adrenaline autoinjector will attend field trips or excursions.	
	3.	School staff and venue staff should avoid using food in activities or games, including as rewards	
	4.	The adrenaline autoinjector and a copy of the individual management and ASCIA Action Plan for Anaphylaxis for each student at risk of anaphylaxis should be easily accessible and school staff must be aware of their exact location.	
	5.	For each field trip, excursion etc, a risk assessment will be undertaken for each individual student attending who is at risk of anaphylaxis. The risks may vary according to the number of anaphylactic students attending, the nature of the excursion/sporting event, size of venue, distance from medical assistance, the structure of excursion and corresponding staff-student ratio. All school staff members present during the field trip or excursion will be made aware of the identity of any students attending who are at risk of anaphylaxis and be able to identify them by face.	
	6.	Staff in charge should consult parents of anaphylactic students in advance to review the plans and discuss issues that might arise, to develop an alternative food menu or request the parent provide a meal (if required)	
	7.	In rare cases where the school deems it necessary, parents may be invited to accompany their child on field trips and/or excursions. This will be discussed with parents as one possible strategy for supporting the student who is at risk of anaphylaxis.	
	8.	Prior to the excursion taking place, school staff should consult with the student's parents 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 activity.	
	9.	If the field trip, excursion or special event is being held at another school then that school should be notified ahead of time that a student at risk of anaphylaxis will be attending, and appropriate risk minimisation strategies discussed ahead of time so that the roles and responsibilities of the host and visiting school are clear. Students at risk of anaphylaxis should take their own autoinjector with them to events being held at other schools.	

**Camps or Remote Settings** 



	prior to camp and be clear about their roles and responsibilities in the event of an anaphylactic reaction.
8.	Mary Queen of Heaven Catholic Primary School will conduct a risk assessment prior to excursions/school camps which will include contact with local emergency services and hospitals well before the camp to provide details of any medical conditions of students, location of camp and location of any off-camp activities. Contact details of emergency services will be available for school staff as part of the emergency response procedures developed for the camp. Camp activities will be reviewed to avoid activities that use known allergens (cooking, craft etc)
9.	Autoinjectors should remain close to the students and staff must be aware of its location at all times.
10.	General use Autoinjectors will be included in camp first aid kits as a back-up device in the event of an emergency.
11.	Staff will consider exposure to allergens when students are consuming food during travel on bus/plane/etc. and whilst in cabins/tents/dormitories/etc.

# Appendix B: Example Emergency Response to Anaphylactic Reaction Procedures

Emergency Respon	Emergency Response to anaphylactic reaction		
In all situations	If safe to do so, lay the person flat, do not allow patient to stand or walk.		
	<ul> <li>If breathing is difficult allow patient to sit</li> <li>Be calm, reassuring</li> <li>Do not leave them alone</li> <li>Seek assistance from another staff member or reliable student to locate the autoinjector or a general use autoinjector, and the student's Individual Anaphylaxis Management Plan</li> <li>If the student appears to be experiencing a first time reaction, continue with steps 2 – 6.</li> </ul>		
	Administer prescribed adrenaline autoinjector or EpiPen– note the time given and retain used EpiPen to give ambulance paramedics		
	4. Phone ambulance 000 (112 – mobile)		
	5. If there is no improvement or severe symptoms progress, further adrenaline doses may be given every five minutes (if another autoinjector is available)		
	6. Phone family/emergency contact		

If in doubt, give autoinjector.

If the student has not been previously diagnosed with an allergy or at risk of anaphylaxis but appears to be having a severe allergic reaction, follow Steps 2–6 above.