



Anaphylaxis Policy and Procedure

Policy number	P-55		
Version number	1.0		
Drafted by	Veronica Kioria		
Responsible person CEO	Veronica Kioria	Signature 	Date: 22/05/19
Approved by the Board:			
On behalf of the Board	David Ling President	Signature 	Date: 22/05/19
Scheduled review date	December 2021		

Basic Beliefs/Purpose

Diamond Valley Learning Centre (DVLC) is committed to providing a safe learning environment for students and staff, and to establishing processes and protocols for dealing with illnesses, injuries/accidents and medical emergencies. This policy provides guidelines to the staff of Diamond Valley Learning Centre (DVLC) for the management of students or staff who present as an anaphylactic.

Scope

This policy applies to all DVLC staff and students.

Policy Guidelines

DVLC recognises that anaphylactic reactions are potentially life threatening, even though severe reactions are uncommon and death may be rare. DVLC will take a risk minimisation and prevention approach to anaphylaxis management and will:

- raise awareness about allergens, anaphylaxis and emergency procedures with all staff;
- ensure that relevant staff receive training as soon as practicable after an at risk student has enrolled;
- engage with parents / guardians / carers of any student under the age of 18 years who is at risk, to assess the risks and develop risk minimisation and management strategies for that student;
- develop an individual anaphylaxis management plan on enrolment for each at risk student, or staff member, which is kept available at all times, including on excursion;
- ensure that a copy of the individual anaphylaxis management plan is accessible to all staff who have a duty of care relationship with the student;

- ensure that auto-injectors are located within easy access;
- ensure that all food available is appropriately labelled;
- ensure that a student's individual anaphylaxis management plan is reviewed at least annually, and kept current with any changes in the student's medical condition, including any new allergens, or after an anaphylactic event at DVLC; and
- engage with parents / guardians / carers of an at risk student under the age of 18 years, in regards to work experience, structured workplace learning, excursions or camps, to develop suitable arrangements if needed.

Procedure Guidelines

When a student at risk of an anaphylactic reaction enrolls at DVLC, or an at risk staff member is employed, the following arrangements must be put in place by relevant staff and the CEO:

1. An Individual Anaphylaxis Management Plan must be developed as soon as practicable for the at risk person, in conjunction with the student's parent / guardian / carer (if under 18 years). This plan must include:
 - a. information about the student's medical condition regarding allergens and the potential for anaphylactic reaction, based on a written diagnosis from the treating doctor;
 - b. strategies to minimise the risk of exposure to known allergens while the student is under the care and supervision of DVLC staff (including lunch, breaks, excursions or special events);
 - c. the name of the person responsible for implementing the strategies;
 - d. information on where the medication will be stored; and
 - e. the relevant ASCIA Action Plan.
2. DVLC staff must engage with the at risk student and their parent / guardian / carer (if under 18 years) to ensure that they are aware of their responsibility to:
 - a. provide DVLC with the ASCIA Action Plan that has been completed by the student's treating doctor;
 - b. inform DVLC in writing if there is a change in their / their child's medical condition in regards to allergens or potential for anaphylactic reaction (and provide an updated ASCIA Action Plan if relevant);
 - c. provide DVLC with two current (i.e. non-expired) adrenaline auto-injectors; one injector is to remain with the student at all times, and the other to be kept as a backup; and
 - d. provide DVLC with an up to date colour photo of the student for submission with the ASCIA Action Plan (or if the Plan is updated).
3. The CEO will ensure that relevant staff receive anaphylaxis training as soon as possible (preferably before the student's first day), and briefings twice a year, and that all staff are made aware of anaphylaxis and emergency procedures, and the contents of this policy and procedure.
4. The Individual Anaphylaxis Management Plan must be reviewed by relevant DVLC staff in conjunction with the student's parent / guardian / carer (if the student is under 18 years) to keep it up to date. A review will be triggered by any or all of the following:
 - a. annually;
 - b. changes to the student's medical condition in regards to allergens and the potential for anaphylactic reaction;
 - c. after an anaphylactic event at DVLC; and
 - d. when the student is about to participate in any off-campus activity organised by DVLC such as work experience, structured workplace learning, excursions or camps.
5. The CEO is responsible for completing an annual Anaphylaxis Risk Management Checklist (published by the Victorian Department of Education and Training) to check

compliance with DVLC's legal obligations.

6. **In an anaphylaxis emergency**, DVLC staff must follow emergency response procedures, general first aid procedures and the Student's ASCIA Action Plan:
 - a. Lay the person flat - do not allow them to stand or walk. If breathing is difficult, allow them to sit. If vomiting or unconscious, lay them on their side in the recovery position, and clear their airway of obstruction;
 - b. Give the auto-injector, taking note of the time it was administered;
 - c. Call an ambulance on 000 (or call 012 if using a mobile phone that is out of range);
 - d. Call the parent / guardian / carer or emergency contact;
 - e. Give further adrenaline doses if no response after 5 minutes (if another auto-injector is available).

7. If a person who has not been diagnosed as allergic, appears to be having an anaphylactic reaction, DVLC staff must:
 - a. Call an ambulance immediately on 000 (or call 012 if using a mobile phone that is out of range);
 - b. Commence first aid measures as identified in the Accident and First Aid Policy and Procedure;
 - c. Call the parent / guardian / carer or emergency contact;
 - d. If in any doubt, give an adrenaline auto-injector.

8. If an auto-injector dose has been administered, DVLC staff must:
 - a. Call an ambulance immediately on 000 (or call 012 if using a mobile phone that is out of range);
 - b. Lay the person flat - do not allow them to stand or walk. If breathing is difficult, allow them to sit. If vomiting or unconscious, lay them on their side in the recovery position, and clear their airway of obstruction;
 - c. Reassure the person experiencing the reaction that they are likely to be feeling anxious and frightened as a result of the reaction and the side effects of adrenaline;
 - d. Ask another DVLC staff member to move students away in a calm manner and reassure them that the person is being assisted;
 - e. Watch the person closely in case the situation worsens;
 - f. Where there is no improvement or severe symptom progress, as described in the ASCIA Action Plan, further adrenaline doses may be administered every 5 minutes if other auto-injectors are available; and
 - g. Call the parent / guardian / carer or emergency contact.

Definitions

An **adrenaline auto-injector** is an automatic injector that contain a single, fixed dose of adrenaline, designed for use by anyone, including people who are not medically trained. Adrenaline works rapidly (within minutes) to reduce throat swelling, open up the airways and maintain blood pressure. Withholding or delaying adrenaline may result in deterioration and potentially death of an individual experiencing anaphylaxis. The Therapeutic Goods Administration (part of the Commonwealth Health Department) approves auto-injector devices (such as EpiPen®, EpiPenJr®, Emerade®) for use.

Anaphylaxis is a severe, rapidly progressive and potentially life threatening allergic reaction. The most common triggers (allergens) include eggs, peanuts, tree nuts (such as cashews, hazelnuts and almonds), cow's milk, fish and shellfish, wheat, soy, sesame (seeds/oils), insect stings and/or bites, and some medications.

Signs of anaphylaxis (severe allergic reaction) include any one of:

- difficult / noisy breathing;
- tongue swelling;
- swelling or tightness in the throat;
- difficulty talking and/or a hoarse voice;

- wheeze or persistent cough;
- persistent dizziness or collapse;
- abdominal pain and/or vomiting (reaction to insects).

Less severe (mild to moderate) allergic reactions may include:

- swelling of lips, face and eyes;
- hives or welts;
- tingly mouth;
- abdominal pain (reaction to insects).

First aid treatment for anaphylaxis is adrenaline, administered via an adrenaline auto-injector, following instruction in the student's Individual Anaphylaxis Management Plan.

ASCIA Action Plan is a nationally recognised plan developed by ASCIA (Australasian Society of Clinical Immunology and Allergy Limited) to provide a consistent approach to the prevention, recognition and emergency treatment of anaphylaxis. It must be completed by the student's treating doctor, and lists the student's prescribed auto-injector. It is an essential component of the student's individual anaphylaxis management plan.

Individual Anaphylaxis Management Plan is an individual plan for each person at risk of anaphylaxis that has been developed in consultation with their parents (if under 18 years). It includes the ASCIA Action Plan which describes the person's allergies, symptoms and the required emergency response for administering their adrenaline auto-injector if he/she displays symptoms of an anaphylactic reaction.

Related Policies

P-1 Risk Management Policy and Procedure
 P-8 Student Welfare and Duty of Care Policy and Procedure
 P-20 Workplace Learning Policy and Procedure
 P-24 Critical Incident Policy and Procedure
 P-26 Access, Anti-Discrimination, Equity, Diversity and Empowerment Policy
 P-31 Student Safety and Security Policy
 P-35 Mandatory Reporting and Protection of Children Policy and Procedure
 P-40 Child Safe Policy
 P-43 Privacy Policy
 P-45 VCAL Attendance Policy and Procedure
 P-56 Accident and First Aid Policy and Procedure
 P-54 Excursions Policy and Procedure
 P-57 Asthma Management Policy and Procedure

Related Documents

D-028 Student Handbook
 Individual Anaphylaxis Management Plan
 ASCIA Action Plan

Legislation

Disability Discrimination Act 1992
 Child Wellbeing and Safety Act 2005 (Vic)
 Education and Training Reform Act 2006 (Vic)
 Ministerial Order 706
 Equal Opportunity Act 2010 (Vic)
 Health Records Act 2001 (Vic)
 Occupational Health and Safety Act 2004 (Vic)

Mapping Information

VRQA Guidelines for Non-school Senior Secondary Education Providers: Minimum Standards for Registration to Provide an Accredited Senior Secondary Course, Standard 3
 AQTF Standard 2.1, 2.3, 2.5, 3.2