

# ANAPHYLAXIS MANAGEMENT PROCEDURE

This procedure must be read in conjunction and interpreted in line with the [*First Aid Policy*](https://index.ed.act.edu.au/our-people/whs/control/emergency-management-critical-incident-first-aid.html) and *[First Aid General Procedure](https://index.ed.act.edu.au/our-people/whs/control/emergency-management-critical-incident-first-aid.html)*[.](https://index.ed.act.edu.au/our-people/whs/control/emergency-management-critical-incident-first-aid.html)

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## OVERVIEW

This procedure describes the mandatory steps required to manage the risk of anaphylaxis and any anaphylaxis emergency.

## RATIONALE

The directorate considers anaphylaxis as a medical emergency and manages this risk in accordance with the [*First Aid in the Workplace Code of Practice*](http://www.safeworkaustralia.gov.au/sites/swa/about/publications/pages/first-aid-in-the-workplace) in order to meet legislative requirements outlined in the[*Work Health and Safety Act 2011*](http://www.legislation.act.gov.au/a/current/w.asp), the[*Children (Education and Care Services) National Law (NSW) No. 104a*](http://www.legislation.act.gov.au/a/2011-42/default.asp), and the[*Work Health and Safety Regulation 2011*](http://www.legislation.act.gov.au/sl/current/w.asp) and[*Education and Care Services National Regulations*](http://www.legislation.nsw.gov.au/maintop/view/inforce/subordleg%2B653%2B2011%2Bcd%2B0%2BN).

* 1. The [*Education and Care Services National Regulations*](http://www.legislation.nsw.gov.au/maintop/view/inforce/subordleg%2B653%2B2011%2Bcd%2B0%2BN) outlines specific requirements for the development of a suite of plans in consultation with parents and carers for any student with anaphylaxis. These plans include a *Medical Management Plan*, which comprises the [*Known Medical Condition Response Plan*,](https://index.ed.act.edu.au/our-people/whs/control/emergency-management-critical-incident-first-aid.html) a *Risk Minimisation Plan* and a *Communications Plan*.

## DEFINITIONS

ACTPS is the ACT Public Sector or Service.

Anaphylaxis is the most severe type of allergic reaction, characterised by difficulty in breathing or a drop in blood pressure, often in association with other symptoms such as rash, swelling and vomiting. Anaphylaxis is potentially life threatening and should be treated as a medical emergency.

**Executive** is a term that includes executives, school principals, managers and supervisors.

**Worker** includes directorate employees, volunteers, students gaining work experience and others including contractors and sub-contractors.

## PROCEDURES

* + 1. **Roles and responsibilities**
		2. Responsibilities are set out in the [*Work Health and Safety Act 2011*](http://www.legislation.act.gov.au/a/current/w.asphttp%3A/www.legislation.act.gov.au/a/2011-35/current/pdf/2011-35.pdf) and articulated in the ACTPS [*Work Health and Safety Act 2011-Responsibilities* WHS-03-2013](http://www.cmd.act.gov.au/employment-framework/wpsafety/WHSPolicies) (ACTPS responsibilities).
		3. **Director-General**
			1. The Director-General will exercise due diligence to ensure that work environments are safe and healthy for workers, students and others and that the directorate complies with the ACTPS policy [*First Aid in the Workplace WHS-04-2013*.](http://www.cmd.act.gov.au/__data/assets/pdf_file/0011/489098/2013_whs_04_firstaidpolicy.pdf)
			2. Key responsibilities as they relate to the management of anaphylaxis management are outlined below and should be read in conjunction with the ACTPS responsibilities and the ACTPS and directorate first aid policies and procedures. A summary of school-based responsibilities is available from the [*ACSCIA Anaphylaxis Checklist for Schools and Childcare Services.*](http://www.allergy.org.au/health-professionals/ascia-plans-action-and-treatment)
			3. In the context of anaphylaxis management, due diligence means taking all reasonable steps to ensure:
* a system of regular monitoring of safe practices, procedures and controls in relation to anaphylaxis management is implemented
* first aid systems are in place that facilitate consultation with workers, parent, carers and students when decisions are made about anaphylaxis management requirements
* facilities and equipment are available for all workers, students and others including those who work outside normal business hours e.g. cleaners and contractors
* sufficient numbers of qualified workers are available, in accordance with the site-based risk assessment and early childhood legislative requirements.
	+ 1. **Executive**
			1. Executives will exercise due diligence in assisting the Director-General with their obligations including implementing the ACTPS and directorate first aid policies and procedures. In the context of anaphylaxis management this includes:
* implementing a management approach to identify and adequately resource the administration of anaphylaxis management at their workplace
* implementing a system of regular monitoring through annual review of safe practices, procedures and controls in relation to anaphylaxis management
* ensuring appropriately-trained workers administer the provision of anaphylaxis first aid
* ensuring that all workers are inducted in anaphylaxis awareness
* ensuring that safe storage systems are in place for any medications and that single use anaphylaxis emergency kits are available to manage anaphylaxis emergencies
* ensuring in-confidence record keeping of the administration of anaphylaxis medications
* in a school context:
* ensuring all students have a treatment plan
* consulting with workers, parents and carers regarding decisions about anaphylaxis management and risk minimisation requirements
* ensuring a *Risk Minimisation Plan* is developed using a risk matrix for the management of any student with anaphylaxis
* ensuring anaphylaxis medications are administered in accordance with the [*Known Medical Condition Response Plan*](https://index.ed.act.edu.au/our-people/whs/control/emergency-management-critical-incident-first-aid.html), inclusive of the [*ACSIA Anaphylaxis Action Plan (Personal)*](http://www.allergy.org.au/health-professionals/ascia-plans-action-and-treatment), and the requirements set out in this procedure.
	+ 1. **Workers**
			1. ACT Government workers have a responsibility to ensure that while at work they:
* take reasonable care for their own health and safety, including any anaphylactic condition that may adversely affect the health and safety of another person
* comply with the ACTPS and directorate first aid policies and procedures. This includes taking all reasonable steps to:
* participate in consultation and risk management processes related to the management of anaphylaxis including the provision and administration of facilities, resources and training
* report any hazards
* undertake first aid induction and anaphylaxis emergency training or awareness training as required
* provide assistance with the management of anaphylaxis when required, to the level of their competence, including calling on expert assistance when necessary.

**Anaphylaxis triggers and causes**

* + 1. The most common triggers for anaphylaxis are food allergies in children. The vast majority of cases are triggered by peanuts, tree nuts, eggs, cow’s milk and dairy products, sesame seeds and, occasionally, seafood, wheat or soy.
		2. Anaphylaxis can also be triggered by insect stings and sometimes medication or latex rubber, although these are less common in young students.

**Symptoms**

* + 1. Symptoms can occur within ten minutes to a few hours after exposure to allergens. Symptoms can include:
* difficult or noisy breathing
* swelling of the tongue
* swelling or tightness in the throat
* difficulty talking or a hoarse voice
* wheezing or persistent cough
* persistent dizziness or collapse
* paleness and floppy limbs (young students particularly).

**Emergency anaphylaxis first aid**

* + 1. In the event of an anaphylaxis emergency workers should stay with the student to ensure medical observation occurs, and call an ambulance immediately.
		2. In an anaphylaxis emergency, trained workers are able to administer adrenaline at the appropriate dosage. Workers should follow the written instructions on the student’s [*Known Medical Condition Response Plan*](https://index.ed.act.edu.au/our-people/whs/control/emergency-management-critical-incident-first-aid.html) inclusive of the [*ACSIA Anaphylaxis Action Plan (Personal)*](http://www.allergy.org.au/health-professionals/ascia-plans-action-and-treatment) (which replaces section D of this form). If the student does not have an [*Known Medical Condition Response Plan*](https://index.ed.act.edu.au/our-people/whs/control/emergency-management-critical-incident-first-aid.html), then the instructions on the [*ACSIA Action Plans (General)*](http://www.allergy.org.au/health-professionals/ascia-plans-action-and-treatment) should be followed, including:
* laying the student flat or, if breathing is difficult, allow the student to sit but not stand
* administering adrenaline into the muscle of the outer-mid thigh via an EpiPen/Anapen or similar device
* recording the time and name of the person who administered the EpiPen/Anapen or similar device in the first aid register.
	+ 1. The [*ASCIA Anaphylaxis Treatment Plan*](http://www.allergy.org.au/health-professionals/ascia-plans-action-and-treatment) demonstrates how to use the EpiPen/Anapen.
		2. EpiPens/Anapens or similar devices can be administered through a single layer of clothing if necessary, but not through seams or pockets.
		3. Anaphylaxis may occasionally present as unresponsiveness or loss of consciousness . If a student is known to be at risk of anaphylaxis, it is best to follow their *Action Plan* including administrating their adrenaline auto injector, calling for emergency assistance, and commencing CPR if needed. Commence CPR if the student is unresponsive and not breathing normally.

**Effective prevention**

* + 1. The following minimum steps are required to prevent anaphylaxis in students at-risk in school settings:
* obtain written medical information on the [*Medical Information and Consent* *Form*](https://index.ed.act.edu.au/our-people/whs/control/emergency-management-critical-incident-first-aid.html) and [*Known Medical Condition Response Plan*](https://index.ed.act.edu.au/our-people/whs/control/emergency-management-critical-incident-first-aid.html)
* train workers in how to recognise and respond to a mild, moderate or severe allergic reaction, including use of adrenaline auto injector devices
* provide age-appropriate education to students with severe allergies and their peers
* take practical steps to reduce the risk of exposure to medically-confirmed allergens, particularly in higher risk environments such as early childhood where students inadvertently share food, kiss and may contaminate equipment. A school may determine that some or all of a school’s bounds is to be nut, egg or dairy free as appropriate. Workers should also be instructed to provide allergen free food treats. Further information is available from the [*ASCIA guidelines for prevention of anaphylaxis in schools preschools and childcare: 2012*.](http://www.allergy.org.au/health-professionals/ascia-plans-action-and-treatment)

**Medical information**

* + 1. **Students**
			1. Parents and carers are required to complete a [*Medical Information and Consent* *Form*](https://index.ed.act.edu.au/our-people/whs/control/emergency-management-critical-incident-first-aid.html) and a [*Known Medical Condition Response Plan*](https://index.ed.act.edu.au/our-people/whs/control/emergency-management-critical-incident-first-aid.html)*.* The[*Known Medical Condition Response Plan*](https://index.ed.act.edu.au/our-people/whs/control/emergency-management-critical-incident-first-aid.html) includes the[*ACSIA Anaphylaxis Action Plan (Personal)*](http://www.allergy.org.au/health-professionals/ascia-plans-action-and-treatment) and is developed in consultation with the treating medical practitioner.
			2. Workers with a primary supervision role or first aid duties should meet with the parent or carer of the student identified at risk of anaphylaxis to develop the *Risk Minimisation Plan* (see section 4.8). In high schools, this meeting may also include the student.

**EpiPens/Anapens**

* + 1. EpiPens/Anapens can be obtained from pharmacies over the counter or as prescribed by medical practitioners.
		2. EpiPens contain two strengths of adrenaline:

|  |  |  |  |
| --- | --- | --- | --- |
| EpiPen Type |  | Anapen® | Age |
| EpiPen 150ug | or | Anapen 150 | 1-5 years |
| EpiPen 300ug | or | Anapen 300 | 5 years + |

* + 1. Workers should be trained in how to use both types of adrenaline auto injectors.
		2. Any available EpiPen/Anapen should be used whether supplied by workers or by the student or via the first aid kit, providing it is the appropriate dose for that person. Further information is available from the [*ACSIA Epipen or Anapen Action Plans (General*](http://www.allergy.org.au/health-professionals/anaphylaxis-resources/action-plans-for-allergic-reactions-faq)).
	1. **Risk Minimisation Plan**
		1. A *Risk Minimisation Plan* is a risk assessment document prepared on the [*Hazard Risk Assessment*](http://sharedservices/actgovt/WHS/SafetyMgt/RiskManagement/Managing-Risk.htm) form. It is developed in consultation with the student’s parent or carer, a school delegate and supporting workers. It is developed to ensure:
* risks relating to the student’s allergy and anaphylaxis care needs are assessed and minimised. If relevant, it ensures that:
* practices and procedures in relation to the safe handling, preparation, consumption and service of food are developed and implemented
* practices and procedures to ensure that parents and carers are notified of any known allergens that poses a risk to the student and risk treatments are developed and implemented
* practices and procedures are developed and implemented so all workers and volunteers can identify the student, the student’s *Medical Management Plan* and the location of the student’s medication
* practices and procedures are developed and implemented so that the student does not attend school without medication prescribed by the student’s medical practitioner.
	+ 1. A *Risk Minimisation Plan* includes an overall school *Anaphylaxis Prevention Plan* outlined in section 4.10.

Directorate workplaces should prominently display [*ACSIA Action Plans (General)*](http://www.allergy.org.au/health-professionals/ascia-plans-action-and-treatment) to assist with minimising risk in case of anaphylaxis emergency.

**Anaphylaxis Prevention Plan**

* + 1. Schools should take steps to avoid anaphylaxis potential triggers and to recognise the signs of an impending anaphylactic reaction.
		2. School *Anaphylaxis Prevention Plans* should be appropriate to the age of the students under care, for example:
* a ban on certain foods when caring for very young students, where the risk of accidental exposure (e.g. from surface, toys and play equipment) is higher
* instructing young students not to share food, food containers, or food utensils
* requiring labelling of lunchboxes and drink bottles
* recommending that students with severe food allergies only eat food prepared at home.
	+ 1. Other aspects that should be covered in prevention plans include:
* precautions to be taken regarding foods available in canteens, school camps and excursions, and food that might be used in cooking classes
* clear signs about school policies in relation to food and food sharing restrictions (e.g. Nut Free signs)
* age-relevant prevention activities used by the school to minimise the risk of an anaphylactic reaction for in-school activities and out-of-school activities
* school management and emergency response procedures that can be followed when responding to an anaphylactic reaction
* purchase of sufficient EpiPen/Anapens for the school’s first aid kits in accordance with the site-based first aid risk assessment
* implementation of the *Communications Plan* to raise worker, student and school community awareness about severe allergies and the school’s *Anaphylaxis Prevention Plan*
* regular training and updates for school workers in recognising and responding appropriately to an anaphylactic reaction, including competently administering an EpiPen/Anapen.
	1. **Communications Plan**
		1. A *Communications Plan* is required for directorate schools regarding specialist medical conditions including anaphylaxis. The plan outlines how:
* relevant workers and volunteers are informed about the first aid policy and procedures, and the [*Known Medical Condition Response Plan*](https://index.ed.act.edu.au/our-people/whs/control/emergency-management-critical-incident-first-aid.html) and *Risk Minimisation Plan* for the student with anaphylaxis
* a student’s parent or carer can communicate changes to the [*Known Medical Condition Response Plan*](https://index.ed.act.edu.au/our-people/whs/control/emergency-management-critical-incident-first-aid.html) and *Risk Minimisation Plan*
* any changes to the student’s anaphylaxis or any health concerns can be communicated to the student’s parents or carers
* the parent or carer can be informed of the administration of medication for the student.
	+ 1. Required communication for workers and others regarding specialist medical conditions may be implemented through first aid induction, as well as the distribution and review by relevant workers of the student’s [*Medical Information and Consent Form*](https://index.ed.act.edu.au/our-people/whs/control/emergency-management-critical-incident-first-aid.html), and the [*Known Medical Condition Response Plan*](https://index.ed.act.edu.au/our-people/whs/control/emergency-management-critical-incident-first-aid.html)*.* This communication must be in undertaken in accordance with [*Territory privacy principles*](http://www.legislation.act.gov.au/a/2014-24/)*.*

**Training**

* + 1. Mandatory training in anaphylaxis management is required for first aiders and early childhood teachers in accordance with the risk assessment. Further details are outlined in the [*First Aid Training Procedure*.](https://index.ed.act.edu.au/our-people/whs/control/emergency-management-critical-incident-first-aid.html)
		2. Anaphylaxis awareness is required for all workers to assist with the management of this risk. This training is available free of charge through ASCIA *Anaphylaxis e-training for Schools and Childcare*and a one-hour asthma training session currently funded by the ACT Health Directorate. Further details are outlined in the [*First Aid Training Procedure*.](https://index.ed.act.edu.au/our-people/whs/control/emergency-management-critical-incident-first-aid.html)
		3. **Training resources**
			1. More information about anaphylaxis is available from:
* [*Australasian Society for Clinical Immunology and Allergy*](http://www.allergy.org.au/health-professionals/anaphylaxis-resources/ascia-action-plan-for-anaphylaxis)
* [*Allergy & Anaphylaxis Australia*](http://www.allergyfacts.org.au/)
* [*American Academy of Allergy, Anaphylaxis and Immunology*](http://www.aaaai.org/conditions-and-treatments/allergies/anaphylaxis.aspx)
* *Journal of Paediatrics and Child Health,* [*ASCIA guidelines for prevention of anaphylaxis in schools preschools and childcare: 2012*](http://www.allergy.org.au/health-professionals/ascia-plans-action-and-treatment)

**Continuous improvement processes**

* + 1. Annual review of anaphylaxis management procedures in each directorate workplace should be undertaken with the Health and Safety Representative and leadership team as part of the review of the provision of first aid. In the event of any serious anaphylaxis first aid emergency an immediate review should be undertaken. The local site-based [*Schools and Office* *Risk Register*](https://index.ed.act.edu.au/our-people/whs/risk-management-implementation/risk-management-planning.html) should be reviewed where required, with additional controls noted and changes to work practices implemented.

**Records management**

* + 1. Known anaphylaxis sufferers should be recorded in the [*Schools and Office Risk Register*](https://index.ed.act.edu.au/our-people/whs/risk-management-implementation/risk-management-planning.html)*.*
		2. Records must be kept in accordance with the [*Territory Records Act 2002*](http://www.legislation.act.gov.au/a/2002-18/default.asp) and *Territory privacy principles* outlined in the [*Information Privacy Act 2014.*](http://www.legislation.act.gov.au/b/db_49298/default.asp)
		3. Further information about [records management](https://index.det.act.gov.au/admin/records.html.) procedures including registration, storage and disposal is available on Index.

**Complaints**

* + 1. Where there are concerns regarding any first aid procedure or concerns about their application, people should:
* contact the school principal or People and Performance, Human Resources Branch in the first instance
* contact the directorate Liaison Unit
* access the [*Complaints Policy*](http://www.det.act.gov.au/contact_us), which is available on the department’s website.

## PROCEDURE OWNER

* 1. Director, People and Performance
	2. For support in relation to this procedure contact People and Performance on ph: 6205 9202.

## RELATED DOCUMENTS

* 1. The following documents must be read in reference to the information provide in this procedure document:
	2. ACTPS policy:
* [*First Aid in the Workplace WHS-04-2013*](http://www.cmd.act.gov.au/__data/assets/pdf_file/0011/489098/2013_whs_04_firstaidpolicy.pdf)
	1. Directorate policy and procedures:
* [*First Aid Policy*](https://index.ed.act.edu.au/our-people/whs/control/emergency-management-critical-incident-first-aid.html)
* [*First Aid General Procedure*](https://index.ed.act.edu.au/our-people/whs/control/emergency-management-critical-incident-first-aid.html)
* [*Asthma Management Procedure*](https://index.ed.act.edu.au/our-people/whs/control/emergency-management-critical-incident-first-aid.html)