Introduction
Cornish College takes its responsibility to provide a safe, secure and supportive environment for all members of its community very seriously.

Anaphylaxis is a severe, rapidly progressive allergic reaction that is potentially life threatening and as a College, we endeavor to provide an environment where all students can safely participate in all aspects of a Cornish College education.

Rationale
The most common allergens in school aged children are peanuts, eggs, tree nuts (eg cOSHcws), cow's milk, fish and shellfish, wheat, soy, sesame, latex, certain insect stings and medication.

The key to prevention of anaphylaxis in schools is knowledge of those students who have been diagnosed at risk, awareness of triggers (allergens), and prevention of exposure to these triggers. Partnerships between schools and parents are important in ensuring that certain foods or items are kept away from the student while at school.

Adrenaline given through an EpiPen® autoinjector to the muscle of the outer mid thigh is the most effective first aid treatment for anaphylaxis.

Cornish College will fully comply with Ministerial Order 706 and the associated Guidelines published and amended by the Department of Education.

Scope
This policy applies to all members of the Cornish College community.

Aim
- To provide, as far as practicable, a safe and supportive environment in which students at risk of anaphylaxis can participate equally in all aspects of the student’s schooling.
- To raise awareness about anaphylaxis and the school’s anaphylaxis management policy in the school community
- To engage with parents/carers of students at risk of anaphylaxis in assessing risks, developing risk minimisation and management strategies for the student.
- To ensure that each staff member has adequate knowledge about allergies, anaphylaxis and the College’s policy and procedures in responding to an anaphylactic reaction.
Implementation

General guidelines for College community

- Families are requested not to provide food for their children to consume during school hours, whilst at any school function or on camps/excursions, that contains nuts or products that have nuts listed on the official ingredients list on the label.
- The Canteen will not sell products that have nuts listed on the manufacturer's ingredients list on the product label.
- Foods containing nuts other than nuts are clearly marked in the canteen, and at school catered functions.
- Food provided at school catered functions will be nut free.
- Parents/carers of children with anaphylaxis are encouraged to assist their child to be easily and discreetly identifiable by registering with and wearing a MedicAlert® bracelet. They are required to provide the College with an action management plan for their child in the event their child suffers from anaphylaxis as provided by their medical practitioner.
- Students should not trade or share food, food utensils and food containers.
- Students with severe food allergies should only eat lunches and snacks that have been prepared at home.
- Parents/carers are requested to clearly label their child’s drink bottle and lunch box with their child's name on it.
- Photos are displayed in key places (canteen, first aid kits, Food Technology classroom, staffroom) of students who have allergies and/or are at risk of anaphylaxis.
- Students with food allergies are identified and recorded at the commencement of Food Technology classes. Students will be given the option of completing another task without the allergen in these classes and where possible, complete their tasks at a separate work bench.
- When parents provide food for birthday celebrations they are asked to consult with the classroom teacher to ascertain students' dietary restrictions.
- Whilst the College will do its best to adhere to these guidelines, students at a developmentally appropriate age who are in danger of having an anaphylactic reaction should also be aware and proactive in helping themselves.
Individual Anaphylaxis Management Plans

- The Principal will ensure that an individual management plan is developed, in consultation with the student's parents, for any student who has been diagnosed by a medical practitioner as being at risk of anaphylaxis. The required plan is the ASCIA Action Plan for Anaphylaxis’ as provided by a medical practitioner.
- The individual anaphylaxis management plan will be in place as soon as practicable after the student enrols, and where possible before their first day of school.
- Master copies of all management plans will be held in Sick Bay and electronically in the College’s Synergetic database.
- Details of allergens and management strategies will be recorded in the Synergetic database with all other individual Medical information.
- The individual management plan will set out the following;
  - Information about the diagnosis, including the type of allergy or allergies the student has (based on a diagnosis from a medical practitioner).
  - Strategies to minimise the risk of exposure to allergens while the student is under the care or supervision of school staff, for in-school and out of school settings including camps and excursions.
- 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; and
  - 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 (eg. class parties, elective subjects, cultural days, fetes, incursions).
- It is the responsibility of Parents to:
  - provide the ASCIA Action Plan;
  - inform the School in writing if their child’s medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, changes and if relevant, provide an updated ASCIA Action Plan;
  - provide an up to date photo for the ASCIA Action Plan when that Plan is provided to the School and when it is reviewed; and
  - provide the School with an Adrenaline Autoinjector that is current and not expired for their child.
Communication Plan

All staff will be briefed via email once each semester on:

- The College's anaphylaxis management policy.
- The causes, symptoms and treatment of anaphylaxis.
- The identities of students diagnosed at risk of anaphylaxis and where their medication is located.
- How to use an autoadrenaline injection device.
- The College's first aid and emergency response procedures.

An anaphylaxis student folder will be given to the form teacher of a student at risk of anaphylaxis containing:

- The school's anaphylaxis management policy which includes information on:
  - The causes, symptoms and treatment of anaphylaxis.
  - Personal action plan for anaphylaxis.
  - How to use an autoadrenaline injection device.
  - The College's first aid and emergency response procedures.
  - An epi-pen register kept at the Sick Bay to sign in and out any epi pens.

Training

Staff must have up to date training in an anaphylaxis management training course which is current for a period of three years. This course will be in accordance with Ministerial Order 706:

- Course in First Aid Management of Anaphylaxis 22099VIC
- Course in Anaphylaxis Awareness 10313NAT.

The College will provide training for all staff with a priority given to those who will be teaching students at risk of anaphylaxis and those in support roles.

- Form Teachers
- Outdoor staff
- Food Technology staff
- Class/Sport staff
- Canteen staff
- First Aid staff
Anaphylaxis Management

Policy Creation Date: January 2012
Policy Review Date: April 2014

Anaphylaxis Emergency Response Procedure

- Stay with anaphylactic student.
- Immediately administer student's own epi-pen. (located in student uniform pocket)
- If student does not have own epi-pen send staff member to retrieve nearest stock emergency epi-pen.
- Locations of stock emergency epi-pens
  - Epi-pens situated next to first aid kits.
  - First aid cupboard Front office
  - Staff room
  - Food technology office

How to administer the epi-pen

- Remove from plastic container.
- Form a fist around Epi pen and pull off cap.
- Place tapered end against outer mid-thigh.
- Push down hard until click is heard or felt and hold in place for 10 seconds. Observe the 10 seconds on a watch where possible.
- Remove epi-pen and be careful not to touch the needle.
- Note time you gave the epi-pen.
- Return epi-pen to its plastic container.

- Whilst administering epi-pen send staff member/student to inform Administration staff
  - State name of student
  - Location of student

- Administration staff staff to:
  - Inform first aid staff
  - Ring ambulance stating a student has suffered an anaphylactic response.
  - Contact the student's emergency contacts.
  - Send a staff member to school roundabout to meet ambulance and direct to student location.
Strategies and procedures to avoid allergens and treat anaphylaxis

**Class room**
- Keep a copy of the student's ASIA Action plan in classroom.
- Epi-pen is located in classroom in an easily accessible place (not locked away) but out of reach to other students.
- Teaching staff to liaise with parents/guardian about food related activities ahead of time.
- Use non-food treats where possible, but if food treats are used in class parents/guardian to provide a treat box with alternative treats.
- Treat boxes to be clearly labelled and only handled by student.
- Treats for the other students in the class should not contain the substance to which the student is allergic.
- Be aware of the possibility of hidden allergens in cooking, food technology, science and art classes (e.g. egg or milk cartons.
- Never give food from outside sources to a student who is at risk of anaphylaxis.
- A designated staff member should inform casual relief teachers of students at risk of anaphylaxis, preventive strategies in place and the schools emergency procedures.
- Information on medical notice board in staff room.
- Have regular discussion with students about the importance to wash hands, eating their own food and not sharing food.

**School playground**
- Student may carry own epi-pen in uniform pocket Year 7 up.
- Easily accessible epi-pen
- Stock pen locations
  - Front Office
  - Staffroom
  - Food Technology office
  - Canteen

Yard duty staff emergency procedures
- Slay with anaphylactic student
- Immediately administer student's own epi-pen. If student does not carry pen send another staff member to retrieve stock emergency pen from nearest location.
- Send another staff member or student to notify administration staff of the name and location of student.

Administration staff will:
- Notify first aid staff
- Ring ambulance
- Contact parents
**Excursions**

**Student**
- Student must take personal epi-pen on excursion.

**Staff**
- Stock epi-pen, student’s Action Plan and mobile phone must be taken on all excursions.
- All staff present during excursions need to be aware if there is a student at risk of anaphylactic reaction.
- Staff must develop an emergency procedure with clear roles.
  - Who carries stock epi-pen and administers pen.
  - Who rings ambulance.
  - Who rings parents/guardian.
- Teachers to consider the potential exposure to allergens when consuming food on buses.
- Teacher should consult parent in advance to discuss
  - issues that may arise, to develop an alternative food
  - menu or request the parent/guardian to send a meal/snack if required

**Canteen**
- Photos of students at risk of anaphylaxis displayed in the canteen.
- Make sure that tables and surfaces are wiped down.
- Be aware of contamination of other foods when preparing, handling or displaying food.
- Canteens have a minimisation policy avoiding stocking peanut or tree nut products including nut spreads.

**Food Technology**
- Nuts and/or nut products will not be included as a part of the practical curriculum.
- Be aware of contamination of other foods when preparing,
- Handling or displaying food:
  - Make sure that tables and surfaces are wiped down regularly
  - Students are regularly reminder of the importance of no food sharing with the at risk child.
  - An at risk child prepares their food at a bench considered to pose a low risk of contamination from allergens.
- Staff must develop an emergency procedure with clear roles.
  - Who rings ambulance.
  - Who rings parents/guardian.
  - Location of personal and stock epi-pen and who will administer pen.
- Student to take personal epi-pen to Food technology class.
Camps and Remote Setting

- Camp must be advised in advance of any student with food allergies.
- Teaching staff should liaise with parents/guardians to develop alternative menus or allow students to bring their own meals.
- Camps have a minimisation policy avoiding stocking peanut or tree nut products including nut spreads.
- The student must take his or her own epi-pen.
- The stock epi-pen, OSHCIA Action plan and mobile phone must be taken on camp.
- All staff present need to be aware if there is a student at risk of anaphylaxis.
- Staff must develop an emergency procedure that sets out clear roles and responsibilities in the event of an anaphylactic reaction.
  - Who carries stock epi-pen and administers.
  - Who rings emergency service.
  - Who rings parents.
- Source local emergency services in the area and how to access them. Liaise with them before camp.
- Cooking and art and craft games should not involve the use of known allergens.
- Consider the potential exposure to allergens when consuming food on buses and in cabins/tents.
- Students with anaphylactic responses to insects should always wear closed shoes and long sleeved garments when outdoors and should be encouraged to stay away from water and flowering plants.

Sporting events

- Sport Teachers and coaches need to be aware if there is a Sport staff student at risk of anaphylaxis and student’s Action plan taken.
- Sport Teachers and Coaches need to know where the student's personal epi-pen is located.
- Sport staff must know where stock epi-pen is located and how to access it if required. Student to carry personal epi-pen.
- Staff should avoid using food in activities or games.
- Sport Staff must develop an emergency procedure that sets out clear roles and responsibilities in the event of an Anaphylactic reaction.
  - Who must go and get stock epi-pen
  - Who administers.
  - Who rings the ambulance service
  - Who rings parents
Policy Availability
This policy will be readily accessible to all staff, families and visitors, and ongoing feedback on this policy will be invited.

Review
Management and staff will monitor and review the effectiveness of the Student Management Policy regularly. Updated information will be incorporated as needed.
Student Anaphylaxis Management Plan

This plan is to be completed by the Principal or nominee on the basis of information from the student's medical practitioner (ASCIA Action Plan for Anaphylaxis) provided by the Parent.

It is the Parents’ responsibility to provide the School with a copy of the student's ASCIA Action Plan for Anaphylaxis containing the emergency procedures plan (signed by the student's Medical Practitioner) and an up-to-date photo of the student - to be appended to this plan; and to inform the school if their child's medical condition changes.

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<thead>
<tr>
<th>School</th>
<th>Phone</th>
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<tbody>
<tr>
<td>Student</td>
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<td>DOB</td>
<td>Year level</td>
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Severely allergic to:

Other health conditions

Medication at school

### Emergency Contact Details (Parent)

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<th>Name</th>
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<td>Relationship</td>
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### Emergency Contact Details (Alternate)

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<th>Medical practitioner contact</th>
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Emergency care to be provided at school

Storage for Adrenaline Autoinjector (device specific) (EpiPen®/Anapen®)

**Environment**

To be completed by Principal or nominee. Please consider each environment/area (on and off school site) the student will be in for the year, e.g. classroom, canteen, food tech room, sports oval, excursions and camps etc.

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<th>Actions required to minimise the risk</th>
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<th>Completion date?</th>
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**ACTION PLAN FOR Anaphylaxis**

For use with EpiPen® Adrenaline Autoinjectors

**MILD TO MODERATE ALLERGIC REACTION**

- Swelling of lips, face, eyes
- Hives or welts
- Tingling mouth
- Abdominal pain, vomiting (these are signs of a severe allergic reaction to insects)

**ACTION**

- For insect allergy, flick out sting if visible. Do not remove ticks.
- Stay with person and call for help
- Locate EpiPen® or EpiPen® Jr
- Give other medications (if prescribed) ........................................
  Dose: ............................................................................................
- Phone family/emergency contact

*Mild to moderate allergic reactions may or may not precede anaphylaxis*

Watch for any one of the following signs of anaphylaxis

**ANAPHYLAXIS (SEVERE ALLERGIC REACTION)**

- Difficult/noisy breathing
- Swelling of tongue
- Swelling/tightness in throat
- Difficulty talking and/or hoarse voice
- Wheeze or persistent cough
- Persistent dizziness or collapse
- Pale and floppy (young children)

**ACTION**

1 Lay person flat. Do not allow them to stand or walk. If breathing is difficult allow them to sit.
2 Give EpiPen® or EpiPen® Jr
3 Phone ambulance* 000 (AU), 111 (NZ), 112 (mobile)
4 Phone family/emergency contact
5 Further adrenaline doses may be given if no response after 5 minutes (if another adrenaline autoinjector is available)

**If in doubt, give adrenaline autoinjector**

Commence CPR at any time if person is unresponsive and not breathing normally. If uncertain whether it is asthma or anaphylaxis, give adrenaline autoinjector FIRST, then asthma reliever.

EpiPen® is generally prescribed for adults and children over 5 years. EpiPen® Jr is generally prescribed for children aged 1.5 years.

*Medical observation in hospital for at least 4 hours is recommended after anaphylaxis.

**Additional information**

Note: This is a medical document that can only be completed and signed by the patient’s treating medical doctor and cannot be altered without their permission.