

## Anaphylaxis Management Policy

### 1. Purpose

Anaphylaxis is the most severe form of allergic reaction. Individuals can have a mild, moderate or severe allergic reaction. Anaphylaxis is a severe, rapidly progressive, allergic reaction that is potentially life threatening. The most common allergens in school aged children are peanuts, cow's milk, eggs, tree nuts (eg cashews and walnuts), wheat, soy, sesame and certain insect stings (particularly bees, wasps, ants and ticks).

The key to prevention of anaphylaxis in schools is knowledge of those students and staff who have been diagnosed at risk, awareness of allergies and prevention of exposure to these triggers that cause allergic reactions.

Partnerships between the College and parents/guardians are important in helping students and staff avoid exposure as well as age-appropriate education for students.

Adrenaline given through an adrenaline (epinephrine) auto-injector (such as an EpiPen® or EpiPen® Jr) into the muscle of the outer mid-thigh is the first aid treatment for anaphylaxis.

The purpose of this policy is to communicate how Cornish College manages Anaphylaxis and raise awareness amongst staff, students, parents/guardians and College community.

### 2. Scope

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

It is important to remember that minimising the risks of anaphylaxis is everyone's responsibility, including the Principal and all College staff, parents/guardians, students and the broader College community.

### 3. Key Responsibilities

Position/Roles	Responsibilities
Parents and Guardians	<ul style="list-style-type: none"> <li>Inform the College in writing, either at enrolment or diagnosis, of the student's allergies, and whether the student has been prescribed an adrenaline auto-injector or not</li> <li>Obtain and provide the College with a completed <b>Australian Society of Clinical Immunology and Allergy (ASCIA) Action Plan</b> (refer Appendix 2) from the student's medical practitioner that details their condition, any medications to be administered, any relevant emergency management procedures and includes an up-to-date photo of the student annually at the commencement of the school year.</li> <li>Students will not be permitted to attend school in the absence of a current anaphylaxis plan</li> <li>Immediately informing the College Health Centre staff in writing of any changes to the student's medical condition and if necessary providing an updated ASCIA Action Plan</li> <li>Meeting with and assisting the College Health Centre staff to develop the Student's individual Anaphylaxis or Allergic Reactions Management Plan</li> </ul>

	<ul style="list-style-type: none"> <li>• Providing the College with an adrenaline auto-injector and any other medications that are current and not expired</li> <li>• Informing College staff in writing of any changes to the student's emergency contact details</li> </ul>
Principal	<p>The DET Guidelines set out the role and responsibilities of the Principal. The Principal must:</p> <ul style="list-style-type: none"> <li>• Ensure that the College develops, implements and annually reviews this policy in accordance with Ministerial Order 706 and the associated DET Guidelines. Actively seek information to identify students with severe life-threatening allergies or those who have been diagnosed as being at risk of anaphylaxis, either at the time of enrolment or at the time of diagnosis (whichever is earlier)</li> <li>• Ensure that parents/guardians provide an ASCIA Action Plan for Anaphylaxis which has been completed and signed by the student's medical practitioner and contains an up-to-date photograph of the student</li> <li>• Ensure that an Individual Anaphylaxis Management Plan is developed in consultation with the student's parents/guardians for any student that has been diagnosed by a medical practitioner with a medical condition relating to allergy and the potential for an anaphylactic reaction, where the College has been notified of that diagnosis</li> <li>• Ensure that the student's Individual Anaphylaxis Management Plan is reviewed in consultation with parents/guardians <ul style="list-style-type: none"> <li>○ Annually at the beginning of each school year</li> <li>○ When the student's medical condition changes</li> <li>○ As soon as practicable after a student has an anaphylactic reaction at school</li> <li>○ Whenever a student is to participate in an off-site activity such as camps or excursions or at special events conducted, organised or attended by the College</li> </ul> </li> <li>• Ensure that an <b>interim</b> Individual Anaphylaxis Management Plan is developed, in consultation with parents/guardians, for a student with a medical condition that relates to allergy and the potential for anaphylactic reaction where: <ul style="list-style-type: none"> <li>○ The College has not been notified of a student's potential for anaphylaxis, but there is reason to believe that the student is at risk (e.g. where the parents/guardians have not told the school about any allergies, but the student mentions it in class); or</li> <li>○ A student's adrenaline autoinjector has been used or lost and not yet replaced; or</li> <li>○ A student's autoinjector is identified as out of date or cloudy/ discoloured; or</li> <li>○ Relevant training or briefing has not yet occurred for a member of staff, such training to occur as soon as possible.</li> </ul> </li> <li>• Ensure students' Individual Anaphylaxis Management Plans are appropriately communicated to all relevant staff</li> <li>• Ensure that the canteen provider and all its employees can demonstrate satisfactory training in the area of food allergy and anaphylaxis and its implications for food-handling practices</li> <li>• Ensure that parents/guardians provide the College with two Adrenaline Autoinjectors for their child, for which the expiry date is at least <b>12 months</b> in the future, and a replacement Adrenaline Autoinjector when requested</li> </ul>

	<ul style="list-style-type: none"> <li>• Ensure that an appropriate Communication Plan is developed and carried out</li> <li>• Ensure there are procedures in place for providing information to College volunteers and casual relief staff about students who are at risk of anaphylaxis, and their role in responding to an anaphylactic reaction of a student in their care</li> <li>• Ensure that relevant College staff have successfully completed an approved Anaphylaxis Management Training Course and that their accreditation is current</li> <li>• Ensure that College staff who are appointed as Anaphylaxis Supervisor(s) are appropriately trained in conducting autoinjector competency checks, in accordance with Ministerial Order No. 706, and that their accreditation is current (training successfully completed within two years of conducting autoinjector competency checks)</li> <li>• Ensure that all College staff are briefed at least twice a year by the Anaphylaxis Supervisor (or other appropriately trained member of the College staff), with the first briefing to occur at the start of each year</li> <li>• Allocate time, such as during staff meetings, to discuss, practise and review this policy</li> <li>• Encourage regular and ongoing communication between parents/guardians and College staff about the current status of the student's allergies, the College's policies and their implementation</li> <li>• Ensure that, where students at risk are under the care or supervision of the school outside of normal class activities, there is a sufficient number of appropriately trained staff present</li> <li>• Ensure the annual <a href="#">Risk Management Checklist</a> for anaphylaxis is completed and reviewed annually</li> <li>• Arrange to purchase and maintain an appropriate number of Adrenaline Autoinjectors for general use to be part of the College's first aid kit, stored with a copy of the general ASCIA Action Plan for Anaphylaxis (orange).</li> </ul>
Anaphylaxis Supervisors	<p>Anaphylaxis Supervisors must complete the <a href="#">School Anaphylaxis Supervisor Checklist</a> in conjunction with the Principal and other College staff to ensure that responsibilities, training requirements and tasks relating to anaphylaxis are being met by the College.</p> <p>Section 9 of the DET Guidelines sets out the role and responsibilities of the College Anaphylaxis Supervisor. Anaphylaxis Supervisors must:</p> <ul style="list-style-type: none"> <li>• In conjunction with the Principal, develop, implement and regularly review this policy</li> <li>• Inform the Principal prior to day one of term 1 each year if parents/guardians of current students with anaphylaxis have not supplied the school with a current anaphylaxis plan</li> <li>• Lead the twice-yearly Anaphylaxis College staff briefing</li> <li>• Work with the Principal, parents/guardians and students to develop, implement and review each Individual Anaphylaxis Management Plan in accordance with this policy</li> <li>• Ensuring students' Individual Anaphylaxis Management Plans are appropriately communicated to all relevant staff</li> <li>• Provide advice and guidance to College staff about anaphylaxis management and undertake regular risk identification reviews and implement appropriate minimisation strategies</li> </ul>

	<ul style="list-style-type: none"> <li>• Undertake regular training in how to recognise and respond to an anaphylactic reaction, including administering an Adrenaline Autoinjector</li> <li>• Verify the correct use of Adrenaline Autoinjector (trainer) devices by College staff undertaking an Online Training Course and through completion of the School Anaphylaxis Supervisor Checklist</li> <li>• Provide access to the Adrenaline Autoinjector (trainer) device for practice by College staff</li> <li>• Send reminders to staff or information to new staff about anaphylaxis training requirements and liaise with the Principal to maintain records of training undertaken by staff at the College</li> <li>• Keep an up-to-date register of students at risk of anaphylaxis</li> <li>• Keep a register of Adrenaline Autoinjectors, including a record of when they are 'in' and 'out' from the central storage point (for instance, when they have been taken on excursions, camps etc)</li> <li>• Work with College staff to develop strategies to raise their own, students and College community awareness about severe allergies</li> <li>• Provide or arrange post-incident support to students and College staff, if appropriate.</li> </ul>
All Staff	<p>Section 9 of the DET Guidelines sets out the role and responsibilities of the College staff. The College staff must:</p> <ul style="list-style-type: none"> <li>• Know and understand the requirements of this policy</li> <li>• Know the identity of students who are at risk of anaphylaxis, know their face and if possible what their specific allergy is</li> <li>• Understand the causes, symptoms, and treatment of anaphylaxis</li> <li>• Undertake regular training in anaphylaxis management including administering an adrenaline autoinjector</li> <li>• Know where to find a copy of each student's ASCIA Action Plan for anaphylaxis for quickly and follow it in event of an allergic reaction</li> <li>• Know where each student's adrenaline autoinjector and the general use adrenaline autoinjectors are kept</li> <li>• Know and follow the risk minimisation strategies in the student's Individual Anaphylaxis Management Plan</li> <li>• Create and maintain a safe environment for all students and colleagues with anaphylaxis and allergies</li> <li>• Raise student awareness about allergies and anaphylaxis, and the importance of each student's role in fostering a College environment that is safe and supportive for their peers</li> </ul>

#### 4. Source of Obligations

Under the ***Education and Training Reform Act 2006 (Vic) (s 4.3.1 (6)(c)) (the Act)***, all schools must develop an anaphylaxis management policy.

***'Ministerial Order No. 706: Anaphylaxis Management in Victorian schools'*** prescribes specific matters that registered schools in Victoria must contain in their anaphylaxis management policy for the purposes of section 4.3.1(6)(c) of the Act.

And under the **National Quality Standard, Quality Area 2: Children's Health and Safety**, Cornish College Principal or Director of ELC will ensure that there is at least one educator on duty at all times who has current approved anaphylaxis management training.

## 5. Cornish College's Policy

Cornish College is committed to providing a safe learning environment for all our students and complying with the obligations and legislation as detailed in Section 4 above and the Department of Education and Training's [Anaphylaxis Guidelines for Schools \(DET Guidelines\)](#) as amended by the Department from time to time.

The College recognises that while policies and procedures to reduce the risk of an allergic reaction can be developed and maintained, they cannot achieve a completely allergen-free environment.

It is our policy to:

- Provide, as far as practicable, a safe and supportive environment in which students at risk of anaphylaxis and allergies can participate equally in all aspects of the student's schooling
- Raise awareness of food and insect allergy, the risk of anaphylaxis and the College's Anaphylaxis Management Policy in the College community
- Engage with parents/guardians of students at risk of anaphylaxis and allergies when assessing risks, developing risk minimisation and management strategies for the student; and
- Ensure that staff have knowledge about allergies, anaphylaxis can recognise an allergic reaction including anaphylaxis and understand the College's policy and College's guidelines and emergency procedures in responding to anaphylaxis reaction.

## 6. Our Duty of Care

The College has a common law duty of care to put in place strategies to manage students at risk of anaphylaxis while they are at the College and engaged in College-related activities.

When a student is diagnosed as being at risk of anaphylaxis, the exercise of the College's duty of care requires the development of an Individual Anaphylaxis Management Plan, which includes an ASCIA Action Plan for Anaphylaxis (emergency response plan) and risk minimisation strategies.

Students at risk of allergic reactions, including anaphylaxis, could also be singled out or subjected to bullying behaviour within the wider College community. As part of our *Bullying and Unacceptable Behaviours policy*, the College maintains an atmosphere of respectful relationships and actively develops and implements programs for bullying prevention, provides support for any student who is at risk of being bullied and empowers the whole College community to recognise and respond appropriately to bullying and behave as responsible bystanders.

## 7. Being Allergy Aware

Given the number of foods to which a student may be allergic to, it is not possible to remove all allergens.

It is better for the College community to become aware of the risks associated with allergies and for the College to implement practical, age-appropriate strategies to minimise exposure to known allergens.

At Cornish College we do not promote that we either 'ban allergens' such as egg and nuts or are 'nut-free, milk-free or egg-free' etc. Promoting the College as 'allergen-free' is not recommended for the following reasons:

- It is impractical to implement and enforce
- There is no evidence of effectiveness
- It does not encourage the development of strategies for avoidance in the wider College community, and
- It may encourage complacency about risk minimisation strategies (for teachers, students and parents/guardians) if a food is banned.

We consider that being 'allergy aware' is a more appropriate term.

Whilst we do not claim to be 'nut-free', minimising exposure to particular foods such as peanuts and tree nuts can reduce the level of risk. This can include removing nut spreads and products containing nuts from the College canteen but does not include removing products that 'may contain traces' of peanuts or tree nuts. Foods that have 'May contain...' statements can be consumed by students without a food allergy in the same location as students with a food allergy as long as they are not shared with students with a food allergy.

We may also request that parents/guardians of classmates of a young student (4-7 years) do not include nut spreads in sandwiches or products containing nuts in their lunch box. This is not a nut ban, but a strategy to reduce risk to the student until they are more able to care for themselves.

## 8. College Anaphylaxis Supervisor Role

The Principal will appoint a minimum of two School Anaphylaxis Supervisors who will be appropriately trained, in accordance with Ministerial Order No. 706, to be able to verify the correct use of adrenaline auto injector (trainer) devices and lead the twice-yearly briefings on the school's Anaphylaxis Management Policy. The School Anaphylaxis Supervisors must have successfully completed an Anaphylaxis Management Training Course in the two years prior to conducting the briefing (namely a course defined in section 9.3 of this Policy, and in accordance with clauses 5.5, 5.9 and 12.2.1 of **Ministerial Order No 706**).

The Principal has appointed the following staff members as its Anaphylaxis Supervisors:

- Health Centre Coordinator; and
- Human Resources Manager

The Anaphylaxis Supervisors will also assist the Principal in meeting their obligations, refer to section 3. Key Responsibilities above.

## 9. Safe Work Practices

Cornish College has developed the following work practices and procedures for managing anaphylaxis .

### 9.1 Individual Anaphylaxis Management Plans

**Parents/Guardians are requested to notify the College in writing of all of their child's medical conditions** including allergies, asthma and the potential for anaphylactic reaction, and any changes to their child's medical condition.

Students who are identified as suffering from severe allergies that may cause anaphylaxis are considered high risk. For each of these students an Individual Anaphylaxis Management Plan should be developed and regularly reviewed and updated..

Cornish College maintains a complete and up to date list of students identifying as having a medical condition that relates to allergy and the potential for anaphylactic reaction. It is the responsibility of **Health Centre Coordinator** (who is also an Anaphylaxis Supervisor) to keep this list up-to-date. The list



is kept in the Health Centre and electronically in the College's Student database (Synergetic and Operoo). Copies are also kept at the Health Centre, Staff Room, Canteen, Food Technology Office and with Form teacher. For Offsite activities, plans are kept in the First Aid kit issued by the Health Centre.

### **Preparing an Individual Anaphylaxis Management Plan**

Where the College has been notified, the **Principal** or their delegate, the **Health Centre Coordinator** (who is also an Anaphylaxis Supervisor), will be responsible for developing an *Individual Anaphylaxis Management Plan* in consultation with the student's parents/carers, for any student who has been diagnosed by a medical practitioner as being at risk of anaphylaxis.

The Individual Anaphylaxis Management Plan should be in place as soon as practicable after the student is enrolled or diagnosed, and where possible before their first day at the College.

### **Preparing an Interim Individual Anaphylaxis Management Plan**

The Principal or Health Centre Coordinator should develop an Interim Individual Anaphylaxis Management Plan for the student where:

- the College has not been notified of a student's potential for anaphylaxis, but there is reason to believe that the student is at risk (e.g. where the parents/guardians have not told the College about any allergies, but the student mentions it in class); or
- a student's adrenaline autoinjector has been used or lost and not yet replaced; or
- a student's adrenaline autoinjector is identified as out of date or cloudy/discoloured; or
- relevant training has not occurred for a member of staff who has a child in their class at risk of anaphylaxis.

As soon as practicable, the Principal or Health Centre Coordinator should put the Interim Individual Anaphylaxis Management Plan in place and take steps to consult with the student's parents/guardians and prepare an Individual Anaphylaxis Management Plan if necessary.

The template [Individual Anaphylaxis Management Plan](#) included in the Anaphylaxis Guidelines for Victorian Schools should be used to complete a student's Interim Individual Anaphylaxis Management Plan. Refer to [Appendix 1](#).

### **Plan Contents**

Individual Anaphylaxis Management Plans must include 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 or at special events conducted or attended by the College.
- name of the person responsible for implementing the plan
- where the student's medication will be stored
- emergency contact details of the student
- the ASCIA Action Plan for Anaphylaxis

As much information as possible should be included. For example, if a student is allergic to nuts, the types of nuts must be listed and/or if a student is allergic to eggs: raw/cooked/the yolk?

### **Review of Plan**

Each student's *Individual Anaphylaxis Management Plan* will be reviewed, in consultation with the

student's parents/guardians in all of the following circumstances;

- annually, **PRIOR TO THE FIRST DAY OF TERM 1 EACH YEAR**
- if the student's medical condition changes,
- as soon as practicable after the student has an anaphylactic reaction,
- when the student is to participate in an off-site activity, or special event is required.

Parents/guardians are required to inform the College if their child's medical condition changes, and if relevant, provide an updated ASCIA Action Plan with an up-to-date photo of the student. The ASCIA Action Plan must be completed and signed by a medical practitioner. The ASCIA Action Plan needs to be renewed at least every 18-24 months (most students renew their ASCIA Action Plan with each new prescription of adrenaline auto-injector as they expire every 12-16 months). An up to date photo of the student must be provided for the ASCIA Action Plan each time the plan is reviewed (Note that this is not limited to when the student's medical condition changes).

If staff and parents/guardians have difficulty agreeing on management strategies, communication with the student's medical practitioner or Royal Children's Hospital Anaphylaxis Advice and Support service (1300 725 911) should be considered

The *Individual Anaphylaxis Management Plan* must be signed off by the parent/guardian and a designated staff member.

#### **Responsibilities in Relation to Plan**

The **Health Centre Coordinator** (an Anaphylaxis Supervisor) will work with the **Principal**, parents/guardians and students to develop, implement and review each Individual Anaphylaxis Management Plan to:

- Ensure that the student's emergency contact details are up-to-date
- Ensure that the student's ASCAA action plan for anaphylaxis matches the student's supplied adrenaline autoinjectors
- Regularly check that the student's adrenaline autoinjectors are not out of date, such as at the beginning or end of each term, and record this information in the register of adrenaline autoinjectors
- Inform parents/guardians in writing that an adrenaline autoinjector needs to be replaced one month prior to its expiry date, and follow up with parents/carers if the autoinjector is not replaced
- Ensure that the student's adrenaline autoinjectors are stored correctly (at room temperature and away from light) in an unlocked, easily accessible place
- Ensure that a copy of each student's ascia action plan for anaphylaxis is stored with that student's adrenaline autoinjector.

## **9.2 Communication Plan**

The Principal will be responsible for developing a Communication Plan that provide information to all staff, students and parents/guardians about anaphylaxis and the development of the College's anaphylaxis management strategies.

The Communication Plan includes the following information:

- the College's policy/guidelines which includes information on strategies to reduce the risk of an allergic reaction
- information on who needs to be trained, how often they are trained and what training to access/complete



- strategies for advising staff, students and parents/ guardians about how to respond to an anaphylactic reaction during normal College activities, including in the Classroom, in the school yard, in the school buildings and sites including gymnasiums and halls
- strategies for advising staff, students and parents/guardians about how to respond to an anaphylactic reaction during off-site or out of College activities, including on excursions, school camps and at special events conducted, organised or attended by the school
- procedures to inform volunteers and casual relief staff on arrival at the College if they are caring for a student with a medical condition that relates to allergy and the potential for anaphylaxis reaction and their role in responding to an anaphylactic reaction of a student in their care
- procedures to communicate with and raise awareness among staff, students, parents/carers and the College community
- the responsibility of the Principal for ensuring that College staff who conduct classes attended by students at risk of anaphylaxis are trained and briefed at least twice per calendar year. Refer to 9.3 Anaphylaxis Training and Briefings.

### **Raising Staff Awareness**

The Communication Plan must include arrangements for relevant College staff to be briefed at least twice per year by the College's Anaphylaxis Supervisor or a staff member who has successfully completed current anaphylaxis management training.

The College's Anaphylaxis Supervisors, Director of Operations or other designated staff member(s) should brief all volunteers and casual relief staff, and new College staff (including administration and office staff, canteen staff, sessional teachers, and specialist teachers) on the above information and their role in responding to an anaphylactic reaction experienced by a student in their care.

### **Raising Student Awareness**

The College will promote student awareness of the risk of anaphylaxis. The following methods may be used as appropriate:

- displaying fact sheets or posters in hallways, canteens and classrooms
- discussion by class/form teachers
- acknowledging that a student at risk of anaphylaxis may not want to be singled out or seen to be treated differently
- dealing with any bullying or attempt to harm a student in accordance with the College's *Behaviour Management Policy* and *Bullying and Unacceptable Behaviour Policy*.

### **Raising Awareness Among Parents and College Community**

The College will provide parents/guardians and the community with general guidelines on how they can help in managing and preventing allergic or anaphylactic reactions (refer to **Appendix 2. Anaphylaxis and Allergies – information for the College Community**)

The College is aware that the parents/guardians of a student who is at risk of anaphylaxis may experience considerable anxiety about sending their child to school. It is important to develop an open and cooperative relationship with them so that they can feel confident that appropriate management strategies are in place at the College. In addition, the anxiety that parents/guardians and students may feel can be considerably reduced by regular communication and increased education, awareness and support from the College community.

Raising awareness about anaphylaxis in the College community will lead to increased understanding of the condition. This can be done by providing information in the College newsletter, on the College website, at assemblies and parent information sessions.

#### **Location of the Plan**

The College's Communication Plan is contained in **Appendix 5 Communication Plan - Anaphylaxis** of this policy and published on the College website [CLICK HERE](#) and intranet "the Hive" [CLICK HERE](#).

### **9.3 Anaphylaxis Training and Briefing**

The Principal will ensure the following staff members will be appropriately trained in accordance with Ministerial Order No. 706:

- Staff who conduct classes attended by students at risk of anaphylaxis
- Staff identified by the Principal, based on a risk assessment of an anaphylactic reaction occurring while a student is under the care or supervision of the College; and
- Anaphylaxis Supervisor(s)

In addition to those staff members identified above, it is Cornish College's policy that at a minimum, all teaching staff including volunteer and regular casual relief teachers, must complete the Online Anaphylaxis Training course

The staff members identified above must have successfully completed the following training:

- A Face-to-Face Anaphylaxis Management Training course every 3 years; or
- An Online Anaphylaxis Training course followed by a competency check by the School Anaphylaxis Supervisor every 2 years.

#### ***Face to Face Anaphylaxis Training***

A face-to-face anaphylaxis training course can be a course in anaphylaxis management training that is:

- Accredited as a VET course
- Accredited under Chapter 4 of the Education and Training Reform Act 2006 (Vic) by the VRQA
- Endorsed and delivered by a tertiary level specialist allergy service within a tertiary level academic teaching hospital
- Any other course approved and advertised by the Department of Education and Training.

All face-to-face courses must be attended by the staff member in person and must include a competency check in the administration of an Adrenaline Autoinjector.

#### ***Online Anaphylaxis Training***

An online anaphylaxis training course means the ASCIA Anaphylaxis e-training for Victorian Schools course developed by the Australasian Society of Clinical Immunology and Allergy (ASCIA) and approved by the Secretary.

Under the online model for anaphylaxis training developed by the Department of Education and Training, it is recommended that all Victorian school staff undertake an Online Training Course, but this remains at the discretion of the College.

The Anaphylaxis Supervisor will undertake a competency check in the administration of an Adrenaline Autoinjector within 30 days of a relevant member of the College staff completing the online training course.

#### ***Autoinjector Competency Check Training***

Staff members identified as Anaphylaxis Supervisors must also undertake autoinjector competency check training at least once every three years.

Autoinjector competency check training means the *Course in Verifying the Correct Use of Adrenaline Injector Devices 22579VIC* or equivalent if superseded (Refer to the TGA [website](#) for list of RTO providers)

### **All Staff Anaphylaxis Briefings**

In addition to the training above all school staff must also participate in anaphylaxis briefings. Briefings must occur twice per year, with the first to be held at the beginning of the school year. Each briefing will cover the following areas:

- Our Anaphylaxis Management Policy
- The causes, symptoms and treatment of anaphylaxis
- The identify students with an allergy at risk of an anaphylaxis reaction and where their medication is located
- How to use an adrenaline auto-injector including practising with a “trainer” adrenaline auto injector
- The College’s general first aid and emergency response procedures; and
- The location of and access to adrenaline auto-injectors provided by parents or purchased by College for general use

Also refer to the following [DET documents](#) for the briefing:

- Facilitator Guide for Anaphylaxis Management
- Anaphylaxis Management Briefing Presentation

If any of these training briefings do not occur when scheduled, the Principal will ensure a briefing shall occur as soon as possible thereafter.

### **Training Requirements**

Staff must successfully complete anaphylaxis training in accordance with this Policy within two or three years prior to supervising a student at risk.

The Principal must develop an interim plan in consultation with parents of any affected student with a medical condition that relates to allergy and the potential for an anaphylactic reaction, if training and briefing is yet to occur. Training must occur as soon as possible after the student is enrolled at the College, and preferably before the student’s first day at the College.

It is the College’s policy that the Principal is to ensure that while the student is under the care of the College, including on excursions, camps, special event days such as sports carnivals, there is a sufficient number of College staff present who have successfully completed an Anaphylaxis Management Training Course.

## **9.4 Adrenaline Auto-injectors – Purchase Storage and Use**

The Principal is responsible for arranging to purchase and maintain an appropriate number of Adrenaline Auto injectors for general use to be part of the College's first aid kit, stored with a copy of the General ASCIA Action Plan for Anaphylaxis.

General use Adrenaline Auto injectors are used when:

- A student’s prescribed Auto-injector does not work, is misplaced, out of date or has already been used
- A student is having a suspected first time anaphylactic reaction and does not have a medical diagnosis for anaphylaxis; or
- When instructed by a medical officer after calling 000.

The number and type of Adrenaline Autoinjectors are purchased considering:

- The number of students enrolled who have been diagnosed as being at risk of anaphylaxis
- The number of students enrolled who have been diagnosed with a medical condition that relates to allergy
- The accessibility of adrenaline autoinjectors that have been provided by parents/carers
- The availability of a sufficient supply of adrenaline auto-injectors for general use in specified locations at the College (e.g. College yard, at excursions, camps and special events)
- That adrenaline autoinjectors have a limited life, usually expire within 12-18 months, and will need to be replaced either at the time of use or expiry, whichever is first
- That currently the only adrenaline autoinjector available in Australia is epipen®
- That children under 20 kilograms are prescribed a smaller dosage of adrenaline, through an epipen® jr
- Adrenaline autoinjectors are designed so that anyone can use them in an emergency.

Even when there are no students enrolled with a diagnosed risk of anaphylaxis, the Principal must purchase at least one adrenaline autoinjector for general use (300mcg dose) for students/staff who may experience their first anaphylaxis while at the College and for other already diagnosed students if needed.

#### **Storage and Location of Adrenaline Autoinjectors**

All Adrenaline Autoinjectors and medication must be stored according to a student's ASCIA Action Plan for Anaphylaxis and checked regularly to ensure that they have not expired, become discoloured or sediment is visible

Adrenaline Autoinjectors and other medication must be stored in various locations which are easily accessible to staff but not accessible to students. A copy of the student's ASCIA Action Plan for Anaphylaxis must also be stored with their medical kit.

It is not advised that children under 10 years carry their medical kit (including their adrenaline autoinjector) on their person unless they:

- Travel to school without an adult present; or
- Have been advised to do so by their medical practitioner.

Students above the age of 10 years may carry their own medical kit (including their adrenaline autoinjectors and ASCIA Action Plan) on their person at all times.

Students in secondary school must always have their adrenaline autoinjectors with them as they move between classes, at activities off the College grounds and during travel to and from the College without supervision. The medical kit must be easily accessible at all times.

Those who do not carry their medication on their person must have it located in a central location where it can be accessed quickly in an emergency. A copy of each student's ASCIA Action Plan for Anaphylaxis must also be stored with their medical kit. Although some students aged 10 and over carry their own medical kit containing their medication, the College expects another adrenaline autoinjector to be kept at the College in case the student forgets or misplaces their device.

The following procedures will be followed for storage of Adrenaline Autoinjectors:

- Adrenaline Autoinjectors for individual students, or for general use, are stored correctly and able to be accessed quickly

- Adrenaline Autoinjectors are stored in an unlocked, easily accessible place away from direct light and heat but not in a refrigerator or freezer
- each Adrenaline Autoinjector is clearly labelled with the student's name and stored with a copy of the student's ASCIA Action Plan for Anaphylaxis
- an Adrenaline Autoinjector for general use will be clearly labelled and distinguishable from those for students at risk of anaphylaxis and stored with a general ASCIA Action Plan for Anaphylaxis (orange)
- Adrenaline Autoinjector trainer devices (which do not contain adrenaline or a needle) are not stored in the same location due to the risk of confusion.

Whenever Adrenaline Autoinjectors are taken and returned to/from their usual location, such as for camps and excursions, this must be clearly recorded.

All staff should be aware of the location of these emergency Adrenaline auto-injectors:

- Adrenaline Auto-injector (EpiPen) situated in all St John first aid kits (used on yard duty)
- Health Centre at Reception (Epi Ready on wall)
- Staff room (Epi Ready on wall)
- Senior Studies Centre Office (Epi Ready on wall)
- Canteen (Epi Ready on wall)

#### **Review of Adrenaline Autoinjectors**

The College will undertake regular reviews of students' Adrenaline Autoinjectors and those for general use, are checked regularly to ensure the requirements of this Policy are being met.

If the Anaphylaxis Supervisor or other designated College staff member identifies any Adrenaline Autoinjectors which are out of date or cloudy/discooured, they should:

- Immediately send a written reminder to the student's parent/carer to replace the Adrenaline Autoinjector as soon as possible (and follow this up if no response is received from the parent/carer or if no replacement Adrenaline Autoinjector is provided)
- Advise the Principal that an Adrenaline Autoinjector needs to be replaced
- Work with the Principal to prepare an interim Individual Anaphylaxis Management Plan pending receipt of the replacement Adrenaline Autoinjector.

### **9.5 Emergency Response Procedures for Students at Risk of Anaphylaxis**

In the event that a student suffers anaphylaxis, the student will be managed in accordance with the individual's ASCIA Action Plan for Anaphylaxis.

Student's *ASCIA Action Plan for Anaphylaxis* and *individual Anaphylaxis Management Plans* are available to all staff via Operoo, Synergetic and a hard copy folder in the Staff Room and Health Centre.

**The emergency response procedures contained in this Anaphylaxis Management Policy must be followed in the event of an anaphylactic reaction.**

Student or staff health incidents which do not require treatment for anaphylaxis are managed through our *First Aid Procedures and Medical Records Policy* and in the in the College Emergency Management Plan (section on Medical Emergency Procedures) available on *the Hive*.

#### **Summary Emergency Response Procedures for Students at Risk of Anaphylaxis at school**

In the event of a student is displaying signs of anaphylaxis the staff member should:

- Stay with anaphylactic student
- Lay the student flat and do not allow them to stand or walk
- If the student is carrying their adrenaline auto-injector (EpiPen) following instructions on ASICA Action Plan and give the adrenaline auto-injector accordingly
- If the student is not carrying their adrenaline auto-injector (EpiPen), send a staff member or reliable students to retrieve adrenaline auto-injector (EpiPen) from the Health Centre or the nearest stock of emergency adrenaline auto-injectors (EpiPen) in the following locations;
  - In all St Johns First Aid Kits (for Yard Duty)
  - Health Centre in Front office (Epi Ready on wall)
  - Staff Room (Epi Ready on wall)
  - Senior Study Centre Office (Epi Ready on Wall); or
  - Canteen (Epi Ready on wall)
- Whilst administering the adrenaline auto-injector (EpiPen) send a staff member/student to inform Administration staff of the incident and clearly state;
  - the Name of student; and
  - Location of student.
- Administration staff to:
  - Inform *Health Centre Coordinator*
  - Ring ambulance stating a student has suffered an anaphylactic reaction
  - Contact the student's emergency contacts
  - Send a staff member to the school roundabout to meet the ambulance and direct them to the student location.

Further information about the College Anaphylaxis Emergency Response procedures at school or during an excursion or offsite activities can be found in **Appendix 4. Emergency Response Procedures - Anaphylaxis.**

## 9.6 Risk Minimisation Strategies to avoid allergens and treat anaphylaxis

Cornish College has developed a number of risk minimisation strategies to assist staff to avoid allergens and treat anaphylaxis in the following situations:

- In the Classroom
- In the Canteen
- In Food Technology Classes
- In the school yard
- During On-site events
- During Off-site events (excursions, day trips)
- During Camps and Remote Setting

Refer to **Appendix 3. Risk Minimisation Strategies – Anaphylaxis** for more detailed information

Staff should determine which strategies are appropriate after consideration of factors such as the:

- Age of the student at risk
- Facilities and activities available at the College
- Likelihood of that student's exposure to the relevant allergen/s whilst at school
- General College environment.



Staff should also consult the Risk Minimisation Strategies for schools included in the [Anaphylaxis Guidelines for Schools \(DET Guidelines\)](#).

## 10. Signage and Policy Availability

This policy will be readily accessible to all staff, families and visitors on the College Website and via the College intranet, the Hive. Ongoing feedback on this policy is invited.

ASCIA Action Plans are posted in the staffroom with first aid procedures.

## 11. Review

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

The Principal will undertake an annual Anaphylaxis risk management review each year using the Annual [Anaphylaxis Risk Management Checklist](#).

## 12. References

- Ministerial Order 706
- [Anaphylaxis Guidelines for Victorian Schools](#) Published by the Victorian Department of Education and Training
- Complispace, Anaphylaxis Management Policy and Safe Work Practices (Oct 2022)

## 13. Related College Policies and Forms

- Asthma Management Policy
- Diabetes Management Policy
- First Aid Procedures and Medical Records Policy
- Student Medication Policy
- College Emergency Management Plan
- Bushfire/Grassfire Preparedness Plan

## 14. Appendices

**Appendix 1.** *Individual Anaphylaxis Management Plan*

**Appendix 2.** *Anaphylaxis and Allergies – information for the College Community*

**Appendix 3.** *Risk Minimisation Strategies - Anaphylaxis*

**Appendix 4.** *Emergency Response Procedures – Anaphylaxis*

**Appendix 5.** *Communication Plan – Anaphylaxis*

## Student Anaphylaxis Management Plan

<p>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.</p> <p>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.</p>				
School			Phone	
Student				
DOB			Year level	
Severely allergic to:				
Other health conditions				
Medication at school				
<b>EMERGENCY CONTACT DETAILS (PARENT)</b>				
Name			Name	
Relationship			Relationship	
Home phone			Home phone	
Work phone			Work phone	
Mobile			Mobile	
Address			Address	
<b>EMERGENCY CONTACT DETAILS (ALTERNATE)</b>				
Name			Name	
Relationship			Relationship	
Home phone			Home phone	
Work phone			Work phone	
Mobile			Mobile	
Address			Address	
Medical practitioner contact	Name			
	Phone			
Emergency care to be provided at school				
Storage for Adrenaline Auto injector (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.			
Name of environment/area:			
Risk identified	Actions required to minimise the risk	Who is responsible?	Completion date?
Name of environment/area:			
Risk identified	Actions required to minimise the risk	Who is responsible?	Completion date?
Name of environment/area:			
Risk identified	Actions required to minimise the risk	Who is responsible?	Completion date?
Name of environment/area:			
Risk identified	Actions required to minimise the risk	Who is responsible?	Completion date?
Name of environment/area:			
Risk identified	Actions required to minimise the risk	Who is responsible?	Completion date?
Name of environment/area:			
Risk identified	Actions required to minimise the risk	Who is responsible?	Completion date?

(Continues on next page)

# ACTION PLAN FOR Anaphylaxis

Name: \_\_\_\_\_

Date of birth: \_\_\_\_\_



Confirmed allergens:

Family/emergency contact name(s):

\_\_\_\_\_

Work Ph: \_\_\_\_\_

Home Ph: \_\_\_\_\_

Mobile Ph: \_\_\_\_\_

Plan prepared by medical or  
nurse practitioner:

I hereby authorise medications specified on this  
plan to be administered according to the plan

Signed:

\_\_\_\_\_

Date: \_\_\_\_\_

Action Plan due for review: \_\_\_\_\_

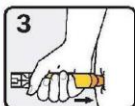
## How to give EpiPen®



Form fist around EpiPen®  
and PULL OFF BLUE  
SAFETY RELEASE



Hold leg still and PLACE  
ORANGE END against  
outer mid-thigh (with or  
without clothing)



PUSH DOWN HARD until  
a click is heard or felt and  
hold in place for 3 seconds  
REMOVE EpiPen®

All EpiPen®s should be held in place for 3  
seconds regardless of instructions on device label

For EpiPen® adrenaline (epinephrine) autoinjectors

## SIGNS OF MILD TO MODERATE ALLERGIC REACTION

- Swelling of lips, face, eyes
- Hives or welts
- Tingling mouth
- Abdominal pain, vomiting (these are signs of anaphylaxis for insect allergy)

## ACTION FOR MILD TO MODERATE ALLERGIC REACTION

- For insect allergy - flick out sting if visible
- For tick allergy - freeze dry tick and allow to drop off
- Stay with person and call for help
- Locate EpiPen® or EpiPen® Jr adrenaline autoinjector
- Give other medications (if prescribed).....
- Phone family/emergency contact

**Mild to moderate allergic reactions (such as hives  
or swelling) may not always occur before anaphylaxis**

## WATCH FOR ANY ONE OF THE FOLLOWING SIGNS OF ANAPHYLAXIS (SEVERE ALLERGIC REACTION)

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

## ACTION FOR ANAPHYLAXIS

### 1 Lay person flat - do NOT allow them to stand or walk

- If unconscious, place  
in recovery position
- If breathing is difficult  
allow them to sit



### 2 Give EpiPen® or EpiPen® Jr adrenaline autoinjector

### 3 Phone ambulance - 000 (AU) or 111 (NZ)

### 4 Phone family/emergency contact

### 5 Further adrenaline doses may be given if no response after 5 minutes

### 6 Transfer person to hospital for at least 4 hours of observation

### If in doubt give adrenaline autoinjector

Commence CPR at any time if person is unresponsive and not breathing normally

## ALWAYS give adrenaline autoinjector FIRST, and then asthma reliever puffer if someone with known asthma and allergy

to food, insects or medication has SUDDEN BREATHING DIFFICULTY (including  
wheeze, persistent cough or hoarse voice) even if there are no skin symptoms

Asthma reliever medication prescribed: ☐ Y ☐ N

This Individual Anaphylaxis Management Plan will be reviewed on any of the following occurrences (whichever happen earlier):

- **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 (e.g. class parties, elective subjects, cultural days, fetes, incursions).

I have been consulted in the development of this Individual Anaphylaxis Management Plan.

I consent to the risk minimisation strategies proposed.

Risk minimisation strategies are available at Chapter 8 - Prevention Strategies of the Anaphylaxis Guidelines

Signature of parent:	
Date:	
I have consulted the Parents of the students and the relevant School Staff who will be involved in the implementation of this Individual Anaphylaxis Management Plan.	
Signature of Principal (or nominee):	
Date:	

## **Anaphylaxis and Allergies – information for the College Community**

### **Being Allergy Aware**

Given the number of foods to which a student may be allergic to, it is not possible to remove all allergens. It is better for the College community to become aware of the risks associated with allergies and for the College to implement practical, age-appropriate strategies to minimise exposure to known allergens.

At Cornish College we do not promote that we either 'ban allergens' such as egg and nuts or are 'nut-free, milk-free or egg-free' etc. Promoting the College as 'allergen-free' is not recommended for the following reasons:

- It is impractical to implement and enforce
- There is no evidence of effectiveness
- It does not encourage the development of strategies for avoidance in the wider College community, and
- It may encourage complacency about risk minimisation strategies (for teachers, students and parents/guardians) if a food is banned.

We consider that being 'allergy aware' is a more appropriate term.

Whilst we do not claim to be 'nut-free', minimising exposure to particular foods such as peanuts and tree nuts can reduce the level of risk. This can include removing nut spreads and products containing nuts from the College canteen but does not include removing products that 'may contain traces' of peanuts or tree nuts. Foods that have 'May contain...' statements can be consumed by students without a food allergy in the same location as students with a food allergy as long as they are not shared with students with a food allergy.

We may also request that parents/guardians of classmates of a young student (4-7 years) do not include nut spreads in sandwiches or products containing nuts in their lunch box. This is not a nut ban, but a strategy to reduce risk to the student until they are more able to care for themselves.

### **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 explicitly have nuts listed on the manufacturer's ingredients list on the product label
- Food provided at school catered functions will, as far as practicable, 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 or similar
- 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 will clearly label their child's drink bottle and lunch box with their child's name
- Photos are displayed in key places (Canteen, Food Technology, Health Centre, and 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 class celebrations, such as birthdays, they are asked to consult with the classroom teacher to ascertain students' dietary restrictions



### **Risk Minimisation Strategies - Anaphylaxis**

Cornish College may also employ some or all the following risk minimisation strategies that are designed to identify allergens, prevent exposure to them and enhance our response in case of an anaphylactic reaction.

Staff should determine which strategies are appropriate after consideration of factors such as the:

- age of the student at risk
- facilities and activities available at the College
- likelihood of that student's exposure to the relevant allergen/s whilst in the College environment.

Staff should also consult the Risk Minimisation Strategies for schools included in the [Anaphylaxis Guidelines for Victorian Schools](#).

**In the Classroom** teachers should:

- Ensure they are aware of the identity of any students who are a high risk of having an anaphylactic reaction
- Be familiar with the student's ASCIA Action Plan for Anaphylaxis and have it readily accessible
- Be familiar with staff who are trained to deal with an anaphylactic reaction if they are not
- Liaise with parents/carers about food related activities ahead of time
- Use non-food treats where possible. If food treats are used in class, it is recommended that parents/carers provide a box of safe treats for the student at risk of anaphylaxis
- Never give food from outside sources to a student who is at risk of anaphylaxis
- Be aware of the possibility of hidden allergens in cooking, food technology, science and art classes (e.g. egg or milk cartons)
- Consider whether to have a student's Adrenaline Autoinjector in class, depending on the speed or severity of previous anaphylactic reactions
- Have regular discussions with students about the importance of washing hands, eating their own food and not sharing food
- Brief casual/relief teachers and provide them with a copy of the student's ASCIA Action Plan for Anaphylaxis.

Casual and relief teachers are:

- Required to have completed training in anaphylaxis management upon commencing employment
- Provided with a copy of the student's Individual Anaphylaxis Management Plan (including ASCIA Action Plan for Anaphylaxis) upon commencing employment.

**In the Canteen:**

- In the event we use an external/contracted food service provider, the provider should be able to demonstrate satisfactory training in the area of anaphylaxis and its implications on food handling
- With written permission from parents/carers, canteen staff (including volunteers), should be briefed about students at risk of anaphylaxis, preventative strategies in place and the information in their ASCIA Action Plans for Anaphylaxis
- With written permission from parents/carers, the College may have the student's name, photo and the foods they are allergic to displayed in the canteen as a reminder to staff

- Food banning is not recommended (refer to our Anaphylactic Management Policy – Being Allergy Aware), however we may choose not to stock peanut and tree nut products (including nut spreads)
- Products labelled ‘may contain traces of peanuts/tree nuts’ should not be served to the student known to be allergic to peanuts/tree nuts
- Staff should be aware of the potential for cross contamination when storing, preparing, handling or displaying food
- Staff should ensure tables and surfaces are wiped clean regularly
- Staff who have completed the free online training for food service are preferred when preparing food and serving students with food allergy as they are likely to be the most informed on food allergy management in the canteen
- Suppliers of food products to the College canteen must provide ingredient lists for the products supplied. If a supplier does not provide ingredient lists an alternate supplier should be found
- If gloves are used to prepare food, non-latex gloves should be used.

### **In Food Technology Classes:**

- With written permission from parents/carers, canteen staff (including volunteers), should be briefed about students at risk of anaphylaxis, preventative strategies in place and the information in their ASCIA Action Plans for Anaphylaxis
- With written permission from parents/carers, the College may have the student's name, photo and the foods they are allergic to displayed in the Food Technology office as a reminder to staff
- Food banning is not recommended (refer to our Anaphylactic Management Policy – Being Allergy Aware), however we may choose not to stock peanut and tree nut products (including nut spreads)
- Products labelled ‘may contain traces of peanuts/tree nuts’ should not be served to the student known to be allergic to peanuts/tree nuts
- Staff should be aware of the potential for cross contamination when storing, preparing, handling or displaying food
- Staff should ensure tables and surfaces are wiped clean regularly
- Staff who have completed the free online training for food service are preferred when preparing food and serving students with food allergy as they are likely to be the most informed on food allergy management in the canteen
- Suppliers of food products to the College canteen must provide ingredient lists for the products supplied. If a supplier does not provide ingredient lists an alternate supplier should be found
- If gloves are used to prepare food, non-latex gloves should be used.
- 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

### **In the College Yard:**

- A student with anaphylactic responses to insects should wear shoes at all times
- Outdoor bins should be kept covered
- Lawns and clover should be kept regularly mowed
- A student with anaphylactic responses should keep open drinks (e.g. Drinks in cans) covered while outdoors

- Staff trained to provide an emergency response to anaphylaxis should be readily available during non-class times (e.g. Recess and lunch)
- The general use adrenaline autoinjector should be easily accessible
- Staff on duty need to be able to communicate that there is an anaphylactic emergency without leaving the child experiencing the reaction unattended.
- Students with food/insect allergy will not be allocated to pick up papers or be on bin duty because of the risk of food contamination or insect sting/bite
- Staff will be aware of the play areas that are of the lowest risk to a student identified as at risk of anaphylaxis to insects and encourage the student and their peers to play in these areas.

**During On-site Events** (e.g. sporting events, in College activities, incursions, or in the gymnasium):

- Class teachers should consult parents/carers in advance to either develop an alternative food menu or request the parents/carers to send a meal for the student
- Parents/carers of other students should be informed in advance about foods that may cause allergic reactions in students at risk of anaphylaxis as well as being informed of our Anaphylaxis Management Policy
- All staff should be aware of the most common allergens during on-site events.
- Staff should avoid using food in activities such as science experiments or games, including as rewards
- Party balloons should not be used if a student is allergic to latex
- Latex swimming caps and goggles should not be used by a student who is allergic to latex
- Staff must know where the adrenaline autoinjector is located and how to access it if required
- For sporting events, it may be appropriate to take the student's adrenaline autoinjector to the event. Ensure that the adrenaline autoinjector is stored in accordance with prescribed temperatures and conditions.

**During Off-site College Settings** (excursions, day trips )

- The student's Adrenaline Autoinjector (two are recommended), Individual Anaphylaxis Management Plan, ASCIA Action Plan for Anaphylaxis and means of contacting emergency assistance must be taken
- One or more staff members who have been trained in the recognition of anaphylaxis and administration of the Adrenaline Autoinjector should accompany the student on field trips or excursions. All staff present during the field trip or excursion need to be aware if there is a student at risk of anaphylaxis
- Staff should develop an emergency procedure that sets out clear roles and responsibilities in the event of an anaphylactic reaction
- Parents/carers should be consulted in advance to discuss issues that may arise, to develop an alternative food menu or request the parent/carer to send a meal (if required)
- Parents/carers may wish to accompany their child on field trips and/or excursions. This should be discussed with parents/carers as another strategy for supporting the student.
- Consider the potential exposure to allergens when consuming food on buses.

**During Off-site Camps and remote settings**

- When planning College camps and overnight excursions, risk management plans for students at risk of anaphylaxis should be developed in consultation with parents/carers and camp managers
- Camp site/accommodation providers and airlines should be advised in advance of any student at risk of anaphylaxis
- In the week prior to the camp, staff going on the camp must have a 15-minute briefing on students at risk of anaphylaxis attending, signs and symptoms of an allergic reaction and practice with an adrenaline autoinjector training device
- Staff should liaise with parents/carers to develop alternative menus or allow students to bring their own meals
- Camp providers should avoid stocking peanut or tree nut products, including nut spreads. Products that 'may contain' traces of peanuts/tree nuts may be served, but not to the student who is known to be allergic to peanuts/tree nuts.
- Use of other substances containing allergens (e.g. Soaps, lotions or sunscreens containing nut oils) should be avoided
- The student's Adrenaline Autoinjector (two are recommended), Individual Anaphylaxis Management Plan, ASCIA Action Plan for Anaphylaxis and a mobile phone must be taken on camp
- A team of staff who have been trained in the recognition of anaphylaxis and the administration of the Adrenaline Autoinjector should accompany the student on camp. However, all staff present need to be aware if there is a student at risk of anaphylaxis
- Staff should develop an emergency procedure that sets out clear roles and responsibilities in the event of an anaphylactic reaction
- Staff should be aware of what local emergency services are in the area and how to access them. Liaise with them before the camp
- The Adrenaline Autoinjector should remain close to the student at risk of anaphylaxis and staff must be aware of its location at all times. It may be carried in the College's first aid kit, although the College can consider allowing students, particularly adolescents, to carry it on their person. Remember, staff still have a duty of care towards the student even if they carry their own Adrenaline Autoinjector
- Students with allergies to insect venoms should always wear closed shoes when outdoors
- 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/airlines and in cabins.

## Emergency Response Procedures – Anaphylaxis

In the event that a student suffers anaphylaxis, the student will be managed in accordance with the individual's ASCIA Action Plan for Anaphylaxis.

Student's *ASCIA Action Plan for Anaphylaxis* and *individual Anaphylaxis Management Plans* are available to all staff via Operoo, Synergetic and a hard copy folder in the Staff Room and Health Centre.

The College maintains a complete and up to date list of students identifying as having a medical condition that relates to allergy and the potential for anaphylactic reaction. It is the responsibility of **Anaphylaxis Supervisor (Health Centre Coordinator)** to keep this list up to date. They will update the list at start of each term or when parents notify them of students changed medical conditions. The list is kept in the Health Centre, copies are also kept at the Health Centre, Staff Room, Canteen, Food Technology Office and with the Form teacher and electronically in the College's intranet (the Hive). The Health Centre Coordinator advises College staff of any changes to individual students medical conditions as appropriate. Please review the documentation to minimise the risk.

**The emergency response procedures contained in the College's Anaphylaxis Management Policy must be followed in the event of an anaphylactic reaction.**

Student or staff health incidents which do not require treatment for anaphylaxis are managed through our **First Aid Procedures and Medical Records Policy** and in the in the College **Emergency Management Plan** (section on Medical Emergency Procedures) on the College intranet *The Hive*.

### Planning for an Emergency

The College regularly undertakes training to in responding to an anaphylactic incident.

Staff should refer to the Anaphylaxis Guidelines for Victorian Schools to plan for an anaphylactic reaction, including information on:

- Self-administration of an Adrenaline Autoinjector
- Responding to an incident
- Procedures to follow in the College and out of College environments
- How to administer an epipen
- Steps to follow if an Adrenaline Autoinjector is administered
- First-time reactions
- Post-incident support.

### Common Allergens for which Students May be at Risk of Allergy or Anaphylaxis

Common food allergies include those caused by:

- Egg
- Milk
- Peanuts
- Tree nuts
- Fish
- Shellfish
- Soy
- Sesame
- Wheat

- Lupin
- Mammalian meat (caused by tick bite exposure)

Other common allergies can be caused by:

- Bites and stings
- Latex
- Certain medications

### **Signs and Symptoms of a Mild to Moderate Allergic Reaction**

Signs and symptoms of a mild to moderate allergic reaction may include:

- Swelling of lips, face or eyes
- Hives or welts
- Tingling mouth
- Abdominal pain and vomiting (these are signs of anaphylaxis for insect allergy).

### **Signs and Symptoms for Anaphylaxis**

Signs and symptoms for anaphylaxis may include:

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

### **Emergency Response Procedures for Students at Risk of Anaphylaxis**

A member of staff should remain with the student displaying signs of an anaphylaxis reaction at all times. Another member of College staff should immediately locate the student's adrenaline autoinjector and the student's ASCIA Action Plan for Anaphylaxis. Where possible, only College staff with training in the administration of an adrenaline autoinjector should administer the student's adrenaline autoinjector. However, it is imperative that an adrenaline autoinjector is administered as soon as signs of anaphylaxis are recognised by any staff member available if trained College staff are unavailable.

For students having anaphylaxis at school, the following first aid steps should be followed:

- Stay with anaphylactic student
- Lay the student flat and do not allow them to stand or walk. If breathing is difficult, allow the student to sit. The student must not stand or be moved unless they are in danger (for example from bees in a nearby hive).
- If the student is carrying their adrenaline autoinjector, follow instructions on the ASCIA Action Plan and give the adrenaline autoinjector accordingly.
- If the student is not carrying their adrenaline auto-injector (EpiPen), send a staff member or reliable students to retrieve adrenaline auto-injector (EpiPen) from the Health Centre or the nearest stock of emergency adrenaline auto-injectors (EpiPen) in the following locations;
  - In all St Johns First Aid Kits (for Yard Duty)
  - Health Centre in Front office (Epi Ready on wall)



- Staff Room (Epi Ready on wall)
- Senior Study Centre Office (Epi Ready on Wall); or
- Canteen (Epi Ready on wall)
- Call an ambulance on triple zero “000”. Students should be transported by stretcher to the ambulance in all circumstances even if symptoms appear to have improved or resolved.
- Alert the student’s parents/guardians.
- Further adrenaline autoinjector doses may be given if no response after five minutes.
- The student must remain in hospital for at least four hours of observation.

Always give the adrenaline autoinjector first, and then the asthma reliever puffer if someone with known asthma and allergy to food, insects or medication has sudden severe breathing difficulty (including wheeze, persistent cough or hoarse voice) even if there are no skin symptoms.

### **Emergency Response During Excursions and Offsite Activities**

Each individual excursion and offsite activity (including College camps and special events such as sports carnivals) require an individual risk management analysis.

The College has developed the following emergency response during excursions and offsite activities:

In the event that a student suffers anaphylaxis, the student will be managed in accordance with the individual’s ASICA Action Plan for Anaphylaxis.

In the event of a student is displaying signs of anaphylaxis the staff member should:

- Stay with anaphylactic student
- Lay the student flat and do not allow them to stand or walk
- If the student is carrying their adrenaline auto-injector (EpiPen) following instructions on ASICA Action Plan and give the adrenaline auto-injector accordingly
- If the student is not carrying their adrenaline auto-injector (EpiPen), send a staff member or reliable students to retrieve adrenaline auto-injector (EpiPen) from the student’s adrenaline auto-injector pack, or College First Aid Kit or if available the nearest stock of emergency adrenaline auto-injectors (EpiPen)
- Whilst administering the adrenaline auto-injector (EpiPen) send a staff member/student to inform Teacher in Charge of the incident and clearly state;
  - the name of student; and
  - location of student.
- Teacher in Charge to:
  - Ring for ambulance (000) stating a student has suffered an anaphylactic reaction
  - Contact the student's emergency contacts
  - Send a staff member or student to meet the ambulance and direct them to the student location

Please note:

Individual Anaphylaxis management plans and ASICA plans are located within each of the student’s adrenaline auto-injector packs (packs can be used when on or off site). Two of the student’s

Adrenaline Autoinjector, Individual Anaphylaxis Management Plan, ASCIA Action Plan for Anaphylaxis are recommended and a reliable means of contacting emergency assistance must be taken.

One or more staff members who have been trained in the recognition of anaphylaxis and administration of the Adrenaline Autoinjector should accompany the student on excursions or overnight camps. All staff present during the excursion/camp need to be aware if there is a student at risk of anaphylaxis.

### **Review Procedures**

After an anaphylactic reaction has taken place that has involved a student in the College's care and supervision, the College's critical incident review will also include the following procedures:

- the Adrenaline Autoinjector must be replaced as soon as possible, by either the parent/carer or the College if the Adrenaline Autoinjector for general use has been used
- the Principal should ensure that there is an interim Individual Anaphylaxis Management Plan should another anaphylactic reaction occur prior to the replacement Adrenaline Autoinjector being provided
- the student's Individual Anaphylaxis Management Plan should be reviewed in consultation with the student's parent/carer
- this Policy should be reviewed to ascertain whether there are any issues which require clarification or modification.

## Communication Plan – Anaphylaxis

The Principal will be responsible for developing a Communication Plan that provide information to all staff, students and parents/guardians about anaphylaxis and the development of the College's anaphylaxis management strategies.

The College's *Anaphylaxis Management Policy* (this Policy) and Appendices includes information on strategies to reduce the risk of an allergic reaction and information on who needs to be trained, how often they are trained and what training to access/complete

### How to respond to an anaphylactic reaction:

- During normal school activities including in the classroom, in the school yard, in school buildings and sites including gymnasiums and halls (Refer to procedures *Appendix 3 & 4*)
- During off-site or out of school activities, including on excursions, school camps and at special events conducted, organised or attended by the school (Refer to procedures *Appendix 3 & 4*).

### Anaphylaxis Supervisors will:

- inform parents/guardians, via email each year, to provide an update of their child's medical information including allergies, asthma and anaphylaxis management plan as diagnosed
- Inform staff of the identities of students diagnosed at risk of anaphylaxis and where their *Individual Anaphylaxis Management Plan* (including ASICA Action Plan) and medication is located and at the start of each year and after receiving update of anaphylaxis management plan.
- Inform staff through regular information sessions, emails (at least once a term or as any student conditions change) and notices in staff rooms and the Health Centre
- Providing information and training to all staff on how to use an adrenaline auto-injection device through twice yearly staff briefings
- Communicate the College's *Risk Minimisation Strategies – Anaphylaxis (Appendix 3)* and *Emergency Response Procedures – Anaphylaxis (Appendix 4)* to staff at regular staff meetings, information sessions or via email
- Provide parents/guardians and the community with general guidelines on how they can help in managing and preventing allergic or anaphylactic reactions (refer to *Appendix 2. Anaphylaxis and Allergies – information for the College Community*).

### The Class/Form teacher of a student at risk of anaphylaxis will:

- Receive email notification of student has an allergy or is anaphylactic; and
- Access the students *Individual Anaphylaxis Management Plan* and *ASICA Action plan* on Synergetic , Operoo or via the Health Centre
- Promote student awareness of allergies (including food and insect allergy) and the risk of anaphylaxis. (Being aware that a student at risk of anaphylaxis may not want to be singled out or treated differently)
- Be aware of where their students Adrenaline Auto-injector (EpiPen) is kept and sign in and out any Adrenaline Auto-injector (EpiPen)s taken from the Health Centre
- Read and understand how to respond to an allergic or anaphylactic reaction:
  - During normal school activities including in the classroom, in the school yard, in school buildings and sites including gymnasiums and halls (Refer to procedures *Appendix 3 & 4*)

- During off-site or out of school activities, including on excursions, school camps and at special events conducted, organised or attended by the school (Refer to procedures *Appendix 3 & 4*)
- Inform volunteers and/or casual relief staff of students with a medical condition that relates to an allergy and the potential for an anaphylactic reaction and their role in responding to an anaphylactic reaction of a student in their care.

### **Raising Staff Awareness**

The College's Anaphylaxis Supervisors, Director of Operations or other designated staff member(s) should brief all volunteers and casual relief staff, and new College staff (including administration and office staff, canteen staff, sessional teachers, and specialist teachers) on the above information and their role in responding to an anaphylactic reaction experienced by a student in their care.

### **Raising Student Awareness**

The College Staff will promote student awareness of the risk of anaphylaxis. The following methods may be used as appropriate:

- displaying fact sheets or posters in hallways, canteens and classrooms
- discussion by class/form teachers
- acknowledging that a student at risk of anaphylaxis may not want to be singled out or seen to be treated differently
- dealing with any bullying or attempt to harm a student in accordance with the College's *Behaviour Management Policy* and *Bullying and Unacceptable Behaviour Policy*.

### **Raising Awareness Among Parents and College Community**

The Anaphylaxis Supervisors or designated officers will provide parents/guardians and the community with general guidelines on how they can help in managing and preventing allergic or anaphylactic reactions (refer to *Appendix 2. Anaphylaxis and Allergies – information for the College Community*)

The College is aware that the parents/guardians of a student who is at risk of anaphylaxis may experience considerable anxiety about sending their child to school. It is important to develop an open and cooperative relationship with them so that they can feel confident that appropriate management strategies are in place at the College. In addition, the anxiety that parents/guardians and students may feel can be considerably reduced by regular communication and increased education, awareness and support from the College community.

Raising awareness about anaphylaxis in the College community will lead to increased understanding of the condition. This can be done by providing information in the College newsletter, on the College website, at assemblies and parent information sessions.