

ANAPHYLAXIS MANAGEMENT POLICY

Western Port Secondary College provides First Aid coverage for all students and staff throughout the year, and ensures that a safe environment is provided to all. Prevention of injury and illness is of paramount importance to providing a safe and healthy environment for all students, staff, parents, and visitors.

SCHOOL STATEMENT

Western Port Secondary College will abide and comply at all times with Ministerial Order 706 and the associated Guidelines on Anaphylaxis management as published and updated by Department of Education and Training from time to time. Western Port Secondary College also recognises that it is Western Port Secondary College's responsibility to maintain and review the college Anaphylaxis Management Policy annually.

INDIVIDUAL ANAPHYLAXIS MANAGEMENT PLANS

The principal is responsible to ensure that an Individual Anaphylaxis Management Plan is completed, 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 Individual Anaphylaxis Management Plan is to be implemented as soon as practicable after the student enrolls and where possible before their first day of school.

The Anaphylaxis Management plan is to provide the following key information;

- Information about the student's medical condition that relates to allergy and the potential for anaphylactic reaction, including the type of allergy/allergies the student has (based on a written diagnosis from a Medical Practitioner);
- Strategies to minimise the risk of exposure to known and notified allergens while the student is under the care or supervision of School Staff, for in-school and out-of-school settings including in the school yard, at camps and excursions, or at special events conducted, organised or attended by the School;
- The name of the person(s) responsible for implementing the strategies;
- Information on where the student's medication will be stored;
- The student's emergency contact details; and an ASCIA Action Plan.

Western Port Secondary College will implement and monitor the student's Individual Anaphylaxis Management Plan and review annually or, in consultation with the student's Parents in all of the following circumstances:

- Annually;
- If the student's medical condition, in so far as it relates to allergy and the potential for anaphylactic reaction, changes;
- As soon as practicable after the student has an anaphylactic reaction at School;
- When the student is to participate in an off-site activity, such as camps and excursions, or at special events conducted, organised or attended by the School (eg. Sports carnivals, elective subjects, cultural days).

It is the responsibility of the Parents to:

- Provide Western Port Secondary College with a current ASCIA Action Plan;
- Inform the School in writing if their child's medical condition, in so far 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 Auto injector that is current and not expired for their child.

Individual Anaphylaxis Management Plan

Parents' responsibility to provide the School with a copy of the student's ASCIA Action Plan for Anaphylaxis containing the emergency response 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 of their child's medical condition changes.

School		Phone	
Student			
DOB		Year level	
Severely allergic to:			
Other health conditions			
Medication at school			
EMERGENCY CONTACT DETAILS (PARENT)			
Name		Name	
Relationship		Relationship	
Home phone		Home phone	
Work phone		Work phone	
Mobile		Mobile	
Address		Address	
EMERGENCY CONTACT DETAILS (ALTERNATE)			
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 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.			
Name of environment/area:			
Risk identified	Actions required to minimise the risk	Who is responsible?	Completion date?
Name of environment/area:			
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Name of environment/area:			
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PREVENTION STRATEGIES

Anaphylaxis is the most severe form of allergic reaction and is potentially life threatening. Anaphylaxis should be treated as a medical emergency, requiring immediate treatment. Anaphylaxis occurs after exposure to an allergen (usually to foods, insect stings or medicines), to which a person is already extremely sensitive. It results in potentially life threatening symptoms.

Section 4.3.1(6)(c) of the Education and Training Reform Act 2006 applies to all Victorian Schools (government, Catholic and independent), and prescribes the circumstances under which a School is required to have a School Anaphylaxis Management Policy containing the matters required by the Order. Under the Order, a School's Policy must include prevention strategies used by the School to minimise the risk of an anaphylactic reaction. Western Port Secondary College and College Staff are reminded that they have a duty of care to take reasonable steps to protect a student in their care from risks of injury that are reasonably foreseeable. The development and implementation of appropriate prevention strategies to minimise the risk of incidents of anaphylaxis is an important step to be undertaken by College Staff when trying to satisfy this duty of care.

Classrooms

- Liaise with Parents about food-related activities ahead of time;
- Use non-food treats where possible, but if food treats are used in class it is recommended that parents of students with a food allergy provide a treat box with alternative treats. Treat boxes should be clearly labelled and only handled by the student;
- Never give food from outside sources to a student who is at risk of anaphylaxis;
- Treats for the other students in the class should not contain the substance to which the student is allergic. It is recommended to use non-food treats where possible;
- Products labelled 'may contain traces of nuts' should not be served to students allergic to nuts. Products labelled 'may contain milk or egg' should not be served to students with milk or egg allergy and so forth;
- Be aware of the possibility of hidden allergens in food and other substances used in cooking, food technology, science and art classes (e.g. egg or milk cartons, empty peanut butter jars);
- Ensure all cooking utensils, preparation dishes, plates, and knives and forks etc are washed and cleaned thoroughly after preparation of food and cooking;
- Have regular discussions with students about the importance of washing hands, eating their own food and not sharing food;
- A designated staff member should inform casual relief teachers, and volunteers of the names of any students at risk of anaphylaxis, the location of each student's Individual Anaphylaxis Management Plan and Adrenaline Auto injector, the School's Anaphylaxis Management Policy, and each individual person's responsibility in managing an incident. ie seeking a trained staff member.

Canteen

- Canteen staff (whether internal or external) should be able to demonstrate satisfactory training in food allergen management and its implications on food-handling practices, including knowledge of the major food allergens triggering anaphylaxis, cross-contamination issues specific to food allergy, label reading, etc;
- Canteen staff, including volunteers, should be briefed about students at risk of anaphylaxis and, where the Principal determines in accordance with clause 12.1.2 of the Order, have up to date training in an Anaphylaxis Management Training Course as soon as practical after a student enrolls;
- Display the student's name and photo in the canteen as a reminder to School Staff;
- Products labelled 'may contain traces of nuts' should not be served to students allergic to nuts;
- Canteens should provide a range of healthy meals/products that exclude peanut or other nut products in the ingredient list or a 'may contain...' statement;

- Make sure that tables and surfaces are wiped down with warm soapy water regularly;
- Food banning is not generally recommended. Instead, a 'no-sharing' with the students with food allergy approach is recommended for food, utensils and food containers. However, school communities can agree to not stock peanut and tree nut products (e.g. hazelnuts, cashews, almonds, etc.), including chocolate/hazelnut spreads;
- Be wary of contamination of other foods when preparing, handling or displaying food. For example, a tiny amount of butter or peanut butter left on a knife and used elsewhere may be enough to cause a severe reaction in someone who is at risk of anaphylaxis from cow's milk products or peanuts.

School Yard

- If a School has a student who is at risk of anaphylaxis, sufficient School Staff on yard duty must be trained in the administration of the Adrenaline Auto injector (i.e. EpiPen) to be able to respond quickly to an anaphylactic reaction if needed;
- The Adrenaline Auto injector and each student's Individual Anaphylaxis Management Plan are easily accessible from the yard, and staff should be aware of their exact location. **(Remember that an anaphylactic reaction can occur in as little as a few minutes);**
- Schools must have a Communication Plan in place so the student's medical information and medication can be retrieved quickly if a reaction occurs in the yard. This may include options of all yard duty staff carrying emergency cards in yard-duty bags, walkie talkies or yard-duty mobile phones. All staff on yard duty must be aware of the School's Emergency Response Procedures and how to notify the general office/first aid team of an anaphylactic reaction in the yard;
- Yard duty staff must also be able to identify, by face, those students at risk of anaphylaxis;
- Students with anaphylactic responses to insects should be encouraged to stay away from water or flowering plants. School Staff should liaise with Parents to encourage students to wear light or dark rather than bright colours, as well as closed shoes and long-sleeved garments when outdoors;
- Keep lawns and clover mowed and outdoor bins covered;
- Students should keep drinks and food covered while outdoors.

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

- If a School has a student at risk of anaphylaxis, sufficient School Staff supervising the special event must be trained in the administration of an Adrenaline Auto injector to be able to respond quickly to an anaphylactic reaction if required;
- School Staff should avoid using food in activities or games, including as rewards;
- For special occasions, School Staff should consult Parents in advance to either develop an alternative food menu or request the Parents to send a meal for the student;
- Parents of other students should be informed in advance about foods that may cause allergic reactions in students at risk of anaphylaxis and request that they avoid providing students with treats whilst they are at School or at a special School event;
- Party balloons should not be used if any student is allergic to latex.

Travel to and from School by Bus

School Staff should consult with Parents of students at risk of anaphylaxis and the bus service provider to ensure that appropriate risk minimisation and prevention strategies and processes are in place to address an anaphylactic reaction should it occur on the way to and from School on the bus. This includes the availability and administration of an Adrenaline Auto injector. The Adrenaline Auto injector and ASCIA Action Plan for Anaphylaxis must be with the student even if this child is deemed too young to carry an Adrenaline Auto injector on their person at School.

Field trips/excursions/sporting events

- If a School has a student at risk of anaphylaxis, sufficient School Staff supervising the special event must be trained in the administration of an Adrenaline Auto injector and be able to respond quickly to an anaphylactic reaction if required;
- A School Staff member or team of School Staff trained in the recognition of anaphylaxis and the administration of the Adrenaline Auto injector must accompany any student at risk of anaphylaxis on field trips or excursions;
- School Staff should avoid using food in activities or games, including as rewards;
- The Adrenaline Auto injector and a copy of the Individual Anaphylaxis Management Plan for each student at risk of anaphylaxis should be easily accessible and School Staff must be aware of their exact location. Students **are not** to attend any event where they do not have their Adrenaline Auto injector and a copy of the Individual Anaphylaxis Management Plan with them on the day of the event;
- For each field trip, excursion etc, a risk assessment should be undertaken for each individual student attending who is at risk of anaphylaxis. The risks may vary according to the number of anaphylactic students attending, the nature of the excursion/sporting event, size of venue, distance from medical assistance, the structure of excursion and corresponding staff-student ratio;
- All School Staff members present during the field trip or excursion need to be aware of the identity of any students attending who are at risk of anaphylaxis and be able to identify them by face;
- The School should consult Parents of anaphylactic students in advance to discuss issues that may arise; to develop an alternative food menu; or request the Parents provide a meal (if required);
- Parents may wish to accompany their child on field trips and/or excursions. This should be discussed with Parents as another strategy for supporting the student who is at risk of anaphylaxis;
- Prior to the excursion taking place School Staff should consult with the student's Parents and Medical Practitioner (if necessary) to review the student's Individual Anaphylaxis Management Plan to ensure that it is up to date and relevant to the particular excursion activity.

Camps and Remote Settings

- Prior to engaging a camp owner/operators services the School should make enquiries as to whether it can provide food that is safe for anaphylactic students. If a camp owner/operator cannot provide this confirmation to the School, then the School should consider using an alternative service provider;
- The camp cook should be able to demonstrate satisfactory training in food allergen management and its implications on food-handling practices, including knowledge of the major food allergens triggering anaphylaxis, cross-contamination issues specific to food allergy, label reading, etc;
- Schools must not sign any written disclaimer or statement from a camp owner/operator that indicates that the owner/operator is unable to provide food which is safe for students at risk of anaphylaxis. Schools have a duty of care to protect students in their care from reasonably foreseeable injury and this duty cannot be delegated to any third party;
- Schools should conduct a risk assessment and develop a risk management strategy for students at risk of anaphylaxis. This should be developed in consultation with Parents of students at risk of anaphylaxis and camp owners/operators prior to the camp dates;
- School Staff should consult with Parents of students at risk of anaphylaxis and the camp owner/operator to ensure that appropriate risk minimisation and prevention strategies and processes are in place to address

an anaphylactic reaction should it occur; **If these procedures are deemed to be inadequate, further discussions, planning and implementation will need to be undertaken;**

- If the School has concerns about whether the food provided on a camp will be safe for students at risk of anaphylaxis, it should also consider alternative means for providing food for those students;
- Use of substances containing allergens should be avoided where possible;
- Camps should avoid stocking peanut or tree nut products, including nut spreads. Products that 'may contain' traces of nuts may be served, but not to students who are known to be allergic to nuts;
- The student's Adrenaline Auto injector, Individual Anaphylaxis Management Plan, including the ASCIA Action Plan for Anaphylaxis and a mobile phone must be taken on camp. Student **cannot attend** if these items are not available. If mobile phone access is not available, an alternative method of communication in an emergency must be considered, e.g. a satellite phone;
- Prior to the camp taking place School Staff should consult with the student's Parents to review the students Individual Anaphylaxis Management Plan to ensure that it is up to date and relevant to the circumstances of the particular camp;
- School Staff participating in the camp should be clear about their roles and responsibilities in the event of an anaphylactic reaction. Check the emergency response procedures that the camp provider has in place. Ensure that these are sufficient in the event of an anaphylactic reaction and ensure all School Staff participating in the camp are clear about their roles and responsibilities;
- Contact local emergency services and hospitals well prior to the camp. Advise full medical conditions of students at risk, location of camp and location of any off camp activities. Ensure contact details of emergency services are distributed to all School Staff as part of the emergency response procedures developed for the camp;
- Schools should consider taking an Adrenaline Auto injector for General Use on a school camp, even if there is no student at risk of anaphylaxis, as a backup device in the event of an emergency;
- Schools should consider purchasing an Adrenaline Auto injector for General Use to be kept in the first aid kit and including this as part of the Emergency Response Procedures;
- The Adrenaline Auto injector should remain close to the student and School Staff must be aware of its location at all times;
- The Adrenaline Auto injector should be carried in the school first aid kit; however, Schools can consider allowing students, particularly adolescents, to carry their Adrenaline Auto injector on camp. Remember that all School Staff members still have a duty of care towards the student even if they do carry their own Adrenaline Auto injector;
- 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 or flowering plants;
- 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.

Overseas Travel

Review and consider the strategies listed under "Field Trips/Excursions/Sporting Events", "Camps and Remote Settings". Where an excursion or camp is occurring overseas, Schools should involve Parents in discussions regarding risk management well in advance.

Investigate the potential risks at all stages of the overseas travel such as:

- Travel to and from the airport/port;
- Travel to and from Australia (via aeroplane, ship etc);
- Various accommodation venues;

- All towns and other locations to be visited;
- Sourcing safe foods at all of these locations; and
- Risks of cross contamination, including: -
 - ❖ Exposure to the foods of the other students;
 - ❖ Hidden allergens in foods;
 - ❖ Whether the table and surfaces that the student may use will be adequately cleaned to prevent a reaction;
 - ❖ Whether the other students will wash their hands when handling food.
- Assess where each of these risks can be managed using minimisation strategies such as the following:
 - Translation of the student's Individual Anaphylaxis Management Plan and ASCIA Action Plan;
 - Sourcing of safe foods at all stages;
 - Obtaining the names, address and contact details of the nearest hospital and Medical Practitioners at each location that may be visited;
 - Obtaining emergency contact details; and
 - Sourcing the ability to purchase additional auto injectors.
- Record details of travel insurance, including contact details for the insurer. Determine how any costs associated with medication, treatment and/or alteration to the travel plans as a result of an anaphylactic reaction can be paid.
- Plan for appropriate supervision of students at risk of anaphylaxis at all times, including that:
 - There are sufficient School Staff attending the excursion who have been trained in accordance with current regulations;
 - There is an appropriate level of supervision of anaphylactic students throughout the trip, particularly at times when they are taking medication and eating food;
 - There will be capacity for adequate supervision of any affected student(s) requiring medical treatment, and that adequate supervision of other students will be available; and
 - Staff/student ratios should be maintained during the trip, including in the event of an emergency where the students may need to be separated.
 - The School should re-assess its Emergency Response Procedures, and if necessary adapt it to the particular circumstances of the overseas trip. Keep a record of relevant information such as the following:
 - Dates of travel;
 - Name of airline, and relevant contact details;
 - Itinerary detailing the proposed destinations, flight information and the duration of the stay in each location;
 - Hotel addresses and telephone numbers;
 - Proposed means of travel within the overseas country;
 - List of students and each of their medical conditions, medication and other treatment (if any);
 - Emergency contact details of hospitals, ambulances, and medical practitioners in each location;
 - Details of travel insurance;
 - Plans to respond to any foreseeable emergency including who will be responsible for the implementation of each part of the plans;
 - Possession of a mobile phone or other communication device that would enable the school staff to contact emergency services in the overseas country if assistance is required.

Work Experience

Western Port Secondary College will involve Parents, the student and the employer in discussions regarding risk management prior to a student at risk of anaphylaxis attending work experience. Staff must be shown the ASCIA Action Plan for Anaphylaxis and how to use the Adrenaline Auto injector in case the work experience student shows signs of an allergic reaction whilst at work experience.

It is important to note that it is not recommended that banning of food or other products is used as a risk minimisation and prevention strategy. The reasons for this are as follows:

- It can create complacency among staff and students;

- It does not eliminate the presence of hidden allergens; and
- It is difficult to "ban" all triggers (allergens) because these are not necessarily limited to peanuts and nuts. Triggers and common allergens can also include eggs, dairy, soy, wheat, sesame, seeds, fish and shellfish.

Storage of Adrenaline Auto injectors and Review;

Western Port Secondary College consists School Adrenaline auto injectors are to be kept marked "Epi Pens" in a cool position mounted to the wall in the main general office area of the college. They are to be clearly marked with students name and the student's Individual management plan must be attached. Auto injectors are to be regularly checked by First aid officer who is one of the Colleges designated School Anaphylaxis Supervisor to ensure auto injectors are stored correctly and clearly labelled, that they are in date and have not expired, and that the sign in, sign out, register is kept up to date, e.g. for camps or excursions.

Two spare Epi-Pens are to be purchased by the college each year as a backup supply.

If the designated staff member identifies any Adrenaline Auto injectors which are out of date, s/he should consider:

- Contacting by phone or if not available, sending a written reminder to the student's Parents to replace the Adrenaline Auto injector;
- Advising the Principal that an Adrenaline Auto injector needs to be replaced by a Parent; and
- Working with the Principal to prepare an interim Individual Anaphylaxis Management Plan pending the receipt of the replacement Adrenaline Auto injector.

SCHOOL MANAGEMENT AND EMERGENCY RESPONSE

Emergency Response

It is important for Schools to have in place first aid and emergency response procedures that allow staff to react quickly if an anaphylactic reaction occurs, for both in-school and out-of-school settings. Drills to test the effectiveness of these procedures should be undertaken. Western Port Secondary College employs approximately 70 staff, and all staff are trained in the course 'Management of Anaphylaxis'.

Current list of college students with Anaphylaxis as of the; 09/2017

Lily Burns Year 10 - Latex
Rebekah Weafer Year 10 - Unknown

Self-administration of the Adrenaline Auto injector

The decision whether a student can carry their own Adrenaline Auto injector should be made when developing the student's Individual Anaphylaxis Management Plan, in consultation with the student, the student's Parents and the student's Medical Practitioner.

It is important to note that students who ordinarily self-administer their Adrenaline Auto injector may not physically be able to self-administer due to the effects of a reaction. In relation to these circumstances, School Staff must administer an Adrenaline Auto injector to the student, in line with their duty of care for that student. If a student self-administers an Adrenaline Auto injector, one member of the School Staff member should supervise and monitor the student, and another member of the School Staff should contact an ambulance (on emergency number 000/112).

If a student carries their own Adrenaline Auto injector, it may be prudent to keep a second Adrenaline Auto injector (provided by the Parent) on-site in an easily accessible, unlocked location that is known to all School Staff.

Responding to an incident

An Ambulance is to be called to any incident where an anaphylactic reaction is suspected.

Where possible, only School Staff with training in the administration of the Adrenaline Auto injector should administer the student's Adrenaline Auto injector. However, it is imperative that an Adrenaline Auto injector is administered as soon as possible after an anaphylactic reaction. Therefore, if necessary, the Adrenaline Auto injector is designed to be administered by any person following the instructions in the student's ASCIA Action Plan.

It is important that in responding to an incident, the student does not stand and is not moved unless in further danger (e.g. the anaphylactic reaction was caused by a bee sting and the bee hive is close by).

In-School Environment

- **Classrooms** – Where a student has an anaphylactic reaction in the class room the teacher will use school phone/personal mobile phones to call administration to raise the alarm that a reaction has occurred;
- **Yard** - Staff will use mobile phones whilst on yard duty. Where a student has an anaphylactic reaction in the yard the teacher will use mobile phone to call administration to raise the alarm that a reaction has occurred if a mobile phone is not available they will send a student or another staff member to the general office;
- Administration staff will inform the first aid officer (Susan Illes) who will attend with Epi-pen and student's ASCIA action plan;
- Office staff will print off CASES21 student information for Paramedics;
- Staff member witnessing incident is to call Ambulance they are to remain on the phone with the emergency call taker until Ambulance arrives or told to hang up by emergency centre call taker;
- A nominated staff member is to wait for ambulance at a designated school entrance.

Out of School Environments

Excursions and Camps - Each individual camp and excursion requires risk assessment for each individual student attending who is at risk of anaphylaxis. Therefore emergency procedures will vary accordingly. A team of School Staff trained in anaphylaxis need to attend each event, and appropriate methods of communication need to be discussed, depending on the size of excursion/camp/venue. It is imperative that the process also addresses:

- The location of Adrenaline Auto injectors i.e. who will be carrying them. Is there a second medical kit? Who has it?
- 'How' to get the Adrenaline Auto injector to a student; and
- 'Who' will call for ambulance response, including giving detailed location address. E.g. Melway reference if city excursion, and best access point or camp address/GPS location.

Students at Risk of Anaphylaxis

A member of the School Staff should remain with the student who is displaying symptoms of anaphylaxis at all times. As per instructions on the ASCIA Action Plan:

- 'Lay the person flat. Do not allow them to stand or walk. If breathing is difficult allow them to sit';
- A member of the School Staff should immediately locate the student's Adrenaline Auto injector and the student's Individual Anaphylaxis Management Plan, which includes the student's ASCIA Action Plan;
- The Adrenaline Auto injector should then be administered following the instructions in the student's ASCIA Action Plan.

How to administer an EpiPen®

Remove from plastic container.

Form a fist around EpiPen® and pull off the blue safety cap.

Place orange end against the student's 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®.

Note the time you administered the EpiPen®.

The used auto injector must be handed to the ambulance paramedics along with the time of administration.

If an Adrenaline Auto injector is administered, the School must

- **Immediately** call an ambulance (000/112);
- Lay the student flat and elevate their legs. Do not allow the student to stand or walk. If breathing is difficult for them, allow them to sit but not to stand;
- Reassure the student experiencing the reaction as they are likely to be feeling anxious and frightened as a result of the reaction and the side-effects of the adrenaline. Watch the student closely in case of a worsening condition. Ask another member of the School Staff to move other students away and reassure them elsewhere;
- In the situation where there is no improvement or **severe symptoms** progress (as described in the ASCIA Action Plan), a second injection (of the same dosage) may be administered after five minutes, if a second auto injector is available (such as the Adrenaline Auto injector for General Use);
- **Then** contact the student's emergency contacts;
- **For government and Catholic schools - later**, contact Security Services Unit, Department of Education and Early Childhood Development to report the incident on 9589 6266 (available 24 hours a day, 7 days a week). A report will then be lodged on IRIS (Incident Reporting Information System);
- **Always call an ambulance as soon as possible (000)**
- When using a standard phone call 000 (triple zero) for an ambulance;
- If you are using a GSM digital mobile phone which is out of range of your service provider, displays a message indicating emergency calls only, or does not have a SIM card, call 112.

First-time reactions

If a student has a severe allergic reaction, but has not been previously diagnosed with an allergy or being at risk of anaphylaxis, the School Staff should follow the school's first aid procedures.

This should include immediately contacting an ambulance using 000.

It may also include locating and administering an Adrenaline Auto injector for General Use.

Post-incident support

An anaphylactic reaction can be a very traumatic experience for the student, others witnessing the reaction, and Parents. In the event of an anaphylactic reaction, students and School Staff may benefit from post-incident counselling, provided by the school nurse, guidance officer, student welfare coordinator or School psychologist.

Review

After an anaphylactic reaction has taken place that has involved a student in the School's care and supervision, it is important that the following review processes take place:

- The Adrenaline Auto injector must be replaced by the Parent as soon as possible;
- In the meantime, the Principal should ensure that there is an interim Individual Anaphylaxis Management Plan should another anaphylactic reaction occur prior to the replacement Adrenaline Auto injector being provided;
- If the Adrenaline Auto injector for General Use has been used this should be replaced as soon as possible;

- The School's Anaphylaxis Management Policy should be reviewed to ensure that it adequately responds to anaphylactic reactions by students who are in the care of School Staff.

Purchasing Adrenaline Auto injectors

The Principal of the School is responsible for arranging for the purchase of additional Adrenaline Auto injector(s) for General Use, and as a back up to Adrenaline Auto injectors supplied by Parents of students who have been diagnosed as being at risk of anaphylaxis.

Adrenaline Auto injectors for General Use are available for purchase at any chemist. No prescription is necessary. These devices are to be purchased by a School at its own expense, and in the same way that supplies for School first aid kits are purchased.

Number of back up Adrenaline Auto injectors to purchase

The Principal will also need to determine the **number** of additional Adrenaline Auto injector(s) required. In doing so, the Principal should take into account the following relevant considerations:

- The number of students enrolled at the School who have been diagnosed as being at risk of anaphylaxis;
- The accessibility of Adrenaline Auto injectors that have been provided by Parents of students who have been diagnosed as being at risk of anaphylaxis;
- The availability and sufficient supply of Adrenaline Auto injectors for General Use in specified locations at the School including in the school yard, and at excursions, camps and special events conducted, organised or attended by the School; and
- The Adrenaline Auto injectors for General Use have a limited life, and will usually expire within 12-18 months, and will need to be replaced at the School's expense either at the time of use or expiry, whichever is first.

When to use Adrenaline Auto injectors for General Use

It is recommended that Adrenaline Auto injectors for General Use be used when:

- A student's prescribed Adrenaline Auto injector does not work, is misplaced, out of date or has already been used; or
- When instructed by a medical officer after calling 000;
- ASCIA advises that no serious harm is likely to occur from mistakenly administering adrenaline to an individual who is not experiencing anaphylaxis.

Raising staff awareness

All Western Port Secondary College staff members are to have completed the "Management of Anaphylaxis Course" and all staff are to be briefed twice yearly on the management of anaphylaxis and responding to an anaphylactic emergency, including briefing on the Anaphylaxis Management Policy. It is recommended that the college 'School Anaphylaxis Supervisor' be responsible for briefing all volunteers and casual relief staff, and new School Staff (including administration and office staff, canteen staff, sessional teachers, specialist teachers) of the above information and their role in responding to an anaphylactic reaction by a student in their care.

Raising student awareness

Peer support is an important element of support for students at risk of anaphylaxis.

School Staff can raise awareness in School through fact sheets or posters displayed in hallways, canteens and classrooms. Class teachers can discuss the topic with students in class, with a few simple key messages, outlined in the following:

Student messages about anaphylaxis

- Always take food allergies seriously – severe allergies are no joke;
- Don't share your food with friends who have food allergies;

- Wash your hands after eating;
- Know what your friends are allergic to;
- If a school friend becomes sick, get help immediately even if the friend does not want to;
- Be respectful of a school friend's Adrenaline Auto injector;
- Don't pressure your friends to eat food that they are allergic to.

It is important to be aware that a student at risk of anaphylaxis may not want to be singled out or be seen to be treated differently. Also be aware that bullying of students at risk of anaphylaxis can occur in the form of teasing, tricking a student into eating a particular food or threatening a student with the substance that they are allergic to, such as peanuts. Talk to the students involved so they are aware of the seriousness of an anaphylactic reaction. Any attempt to harm a student diagnosed at risk of anaphylaxis must be treated as a serious and dangerous incident and dealt with in line with the School's anti-bullying policy.

Work with Parents

Western Port Secondary College is aware that Parents of a child 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.

Aside from implementing practical prevention strategies in Schools, the anxiety that Parents and students may feel can be considerably reduced by regular communication and increased education, awareness and support from the school community.

Raising school community awareness

Western Port Secondary College is encouraged to raise awareness about anaphylaxis in the school community so that there is an increased understanding of the condition. This can be done by providing information in the school newsletter.

Training and Briefing Requirements

All Western Port Secondary College staff must have successfully completed an Anaphylaxis Management Training Course in the previous three years and participate in a briefing, to occur twice each calendar year, with the first briefing to be held at the beginning of the school year, on:

- The School's Anaphylaxis Management Policy;
- Causes, symptoms and treatment of anaphylaxis;
- The identities of students diagnosed with a medical condition that relates to allergy and the potential for anaphylactic reaction and where their medication is located;
- How to use an Adrenaline Auto injector, including hands on practise with a trainer Adrenaline Auto injector;
- The School's general first aid and emergency response procedures; and
- The location of, and access to, Adrenaline Auto injectors that have been provided by Parents or purchased by the School for general use.

This briefing must be conducted by a member of the School Staff who has current anaphylaxis training. For the purposes of these Guidelines, and the Order, this means that the member of the School Staff has successfully completed an Anaphylaxis Management Training Course in the previous 12 months.

Identifying School Staff for Training and Briefing

The following School Staff must be trained and briefed as required above:

- Those who conduct classes that students with a medical condition relating to allergy and the potential for anaphylactic reaction attend and any further School Staff that the Principal identifies, based on an assessment of the risk of an anaphylactic reaction occurring while a student is under the care or supervision of the School.

If for any reason the training and briefing has not yet occurred, as detailed above, the Principal is responsible for developing an interim Individual Anaphylaxis Management Plan in consultation with the student's Parents. Preferably the training and briefing should take place as soon as practicable after the student at risk of anaphylaxis enrolls and preferably before the student's first day at School.

Staff Training

Ministerial Order 706 has been amended to allow for the new online training model. Under this model it is recommended that all Victorian school staff undertake the new Australasian Society of Clinical Immunology and Allergy (ASCIA) e-training course and have their competency in using an autoinjector tested in person by the School Anaphylaxis Supervisor within 30 days of completing the course. This course is provided by ASCIA, is free for all Victorian schools and valid for 2 years.

And

2 staff per school or per campus (School Anaphylaxis Supervisor) - Course in Verifying the Correct Use of Adrenaline Autoinjector Devices 22303VIC. This course is provided by the Asthma Foundation, is free to government schools and is valid for 3 years.

Please note: First aid training does NOT meet the requirements of anaphylaxis training requirements under MO706.

Twice-yearly anaphylaxis briefing requirements

All schools with a child or young person at risk of an anaphylactic reaction are required to undertake twice yearly briefings on anaphylaxis management under MO706.

A presentation has been developed to help schools ensure they are complying with the legislation. The briefing presentation incorporates information on how to administer an EpiPen and it is expected all staff will practice with the EpiPen trainer devices provided to your school. As part of the briefing, school staff should familiarise themselves with the children and young people in the school at risk of an anaphylactic reaction and their Individual Anaphylaxis Management Plans.

Any person who has completed Anaphylaxis Management Training in the last 2 years can lead the briefing. If your school has decided to choose the online option, your School Anaphylaxis Supervisor may be the most appropriate staff member for this role. A facilitation guide and speaking notes have also been developed,

Annual Risk Management Checklist

Under the School Anaphylaxis Management Policy the Principal must complete an annual anaphylaxis Risk Management Checklist to monitor their compliance with the Order, these Guidelines, and their legal obligations.

School Name:	
Date of Review:	
Who completed this checklist?	Name:
	Position:
Review given to:	Name
	Position
Comments:	

General Information	
How many current students have been diagnosed as being at risk of anaphylaxis, and have been prescribed an Adrenaline Auto injector?	
How many of these students carry their Adrenaline Auto injector on their person?	
Have any students ever had an allergic reaction requiring medical intervention at school?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, how many times?	
Have any students ever had an Anaphylactic Reaction at school?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, how many students?	
If Yes, how many times	
Has a staff member been required to administer an Adrenaline Auto injector to a student?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, how many times?	
Was every incident in which a student suffered an anaphylactic reaction reported via the Incident Reporting and Information System (IRIS)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
SECTION 1: Individual Anaphylaxis Management Plans	
Does every student who has been diagnosed as being at risk of anaphylaxis and prescribed an Adrenaline Auto injector have an Individual Anaphylaxis Management Plan and ASCIA Action Plan completed and signed by a prescribed Medical Practitioner?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are all Individual Anaphylaxis Management Plans reviewed regularly with Parents (at least annually)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do the Individual Anaphylaxis Management Plans set out strategies to minimise the risk of exposure to allergens for the following in-school and out of class settings?	
During classroom activities, including elective classes	<input type="checkbox"/> Yes <input type="checkbox"/> No
In canteens or during lunch or snack times	<input type="checkbox"/> Yes <input type="checkbox"/> No
Before and after School, in the school yard and during breaks	<input type="checkbox"/> Yes <input type="checkbox"/> No
For special events, such as sports days, class parties and extra-curricular activities	<input type="checkbox"/> Yes <input type="checkbox"/> No
For excursions and camps	<input type="checkbox"/> Yes <input type="checkbox"/> No
Other	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do all students who carry an Adrenaline Auto injector on their person have a copy of their ASCIA Action Plan kept at the School (provided by the Parent)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Where are they kept?	
Does the ASCIA Action Plan include a recent photo of the student?	<input type="checkbox"/> Yes <input type="checkbox"/> No
SECTION 2: Storage and Accessibility of Adrenaline Auto injectors	
Where are the student(s) Adrenaline Auto injectors stored?	
Do all School Staff know where the School's Adrenaline Auto injectors for General Use are stored?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are the Adrenaline Auto injectors stored at room temperature (not refrigerated)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the storage safe?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the storage unlocked and accessible to School Staff at all times?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Comments:	
Are the Adrenaline Auto injectors easy to find?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Comments:	
Is a copy of student's Individual Anaphylaxis Management Plan (including the ASCIA Action Plan) kept together with the student's Adrenaline Auto injector?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Are the Adrenaline Auto injectors and Individual Anaphylaxis Management Plans (including the ASCIA Action Plans) clearly labelled with the student's names?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has someone been designated to check the Adrenaline Auto injector expiry dates on a regular basis? Who?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are there Adrenaline Auto injectors which are currently in the possession of the School and which have expired?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has the School signed up to Epi Club or ANA-alert (optional free reminder services)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do all School Staff know where the Adrenaline Auto injectors and the Individual Anaphylaxis Management Plans are stored?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has the School purchased Adrenaline Auto injector(s) for General Use, and have they been placed in the School's first aid kit(s)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Where are these first aid kits located?	
Is the Adrenaline Auto injector for General Use clearly labelled as the 'General Use' Adrenaline Auto injector?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is there a register for signing Adrenaline Auto injectors in and out when taken for excursions, camps	<input type="checkbox"/> Yes <input type="checkbox"/> No
SECTION 3: Prevention Strategies	
Have you done a risk assessment to identify potential accidental exposure to allergens for all students who have been diagnosed as being at risk of anaphylaxis?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you implemented any of the prevention strategies in the Anaphylaxis Guidelines? If not record why?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have all School Staff who conduct classes with students with a medical condition that relates to allergy and the potential for anaphylactic reaction successfully completed an Anaphylaxis Management Training Course in the three years prior and participated in a twice yearly briefing?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are there always sufficient School Staff members on yard duty who have successfully completed an Anaphylaxis Management Training Course in the three years prior?	<input type="checkbox"/> Yes <input type="checkbox"/> No
SECTION 4: School Management and Emergency Response	
Does the School have procedures for emergency responses to anaphylactic reactions? Are they clearly documented and communicated to all staff?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do School Staff know when their training needs to be renewed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you developed Emergency Response Procedures for when an allergic reaction occurs?	<input type="checkbox"/> Yes <input type="checkbox"/> No
In the class room?	<input type="checkbox"/> Yes <input type="checkbox"/> No
In the school yard?	<input type="checkbox"/> Yes <input type="checkbox"/> No
In all School buildings and sites, including gymnasiums and halls?	<input type="checkbox"/> Yes <input type="checkbox"/> No
At school camps and excursions?	<input type="checkbox"/> Yes <input type="checkbox"/> No
On special event days (such as sports days) conducted, organised or attended by the School?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does your plan include who will call the Ambulance?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is there a designated person who will be sent to collect the student's Adrenaline Auto injector and Individual Anaphylaxis Management Plan (including the ASCIA Action Plan)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you checked how long it will take to get to the Adrenaline Auto injector and Individual Anaphylaxis Management Plan (including the ASCIA Action Plan) to a student from various areas of the School including:	<input type="checkbox"/> Yes <input type="checkbox"/> No
The class room?	<input type="checkbox"/> Yes <input type="checkbox"/> No
The school yard?	<input type="checkbox"/> Yes <input type="checkbox"/> No

The sports field?	<input type="checkbox"/> Yes <input type="checkbox"/> No
On excursions or other out of school events is there a plan for who is responsible for ensuring the Adrenaline Auto injector(s) and Individual Anaphylaxis Management Plans (including the ASCIA Action Plan) and the Adrenaline Auto injector for General Use are correctly stored and available for use?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Who will make these arrangements during excursions?	
Who will make these arrangements during camps?	
Who will make these arrangements during sporting activities?	
Is there a process for post incident support in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have all School Staff who conduct classes that students with a medical condition that relates to allergy and the potential for an anaphylactic reaction and any other staff identified by the Principal, been briefed on:	
The School's Anaphylaxis Management Policy?	<input type="checkbox"/> Yes <input type="checkbox"/> No
The causes, symptoms and treatment of anaphylaxis?	<input type="checkbox"/> Yes <input type="checkbox"/> No
The identities of students with a medical condition that relates to allergy and the potential for an anaphylactic reaction, and who are prescribed an Adrenaline Auto injector, including where their medication is located?	<input type="checkbox"/> Yes <input type="checkbox"/> No
How to use an Adrenaline Auto injector, including hands on practise with a trainer Adrenaline Auto injector?	<input type="checkbox"/> Yes <input type="checkbox"/> No
The School's general first aid and emergency response procedures for all in-school and out-of-school environments?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Where the Adrenaline Auto injector(s) for General Use is kept?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Where the Adrenaline Auto injectors for individual students are located including if they carry it on their person?	<input type="checkbox"/> Yes <input type="checkbox"/> No
SECTION 4: Communication Plan	
Is there a Communication Plan in place to provide information about anaphylaxis and the School's policies?	
To School Staff?	<input type="checkbox"/> Yes <input type="checkbox"/> No
To students?	<input type="checkbox"/> Yes <input type="checkbox"/> No
To Parents?	<input type="checkbox"/> Yes <input type="checkbox"/> No
To volunteers?	<input type="checkbox"/> Yes <input type="checkbox"/> No
To casual relief staff?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is there a process for distributing this information to the relevant School Staff?	<input type="checkbox"/> Yes <input type="checkbox"/> No
What is it?	
How this information is kept up to date?	
Are there strategies in place to increase awareness about severe allergies among students for all in-school and out-of-school environments?	<input type="checkbox"/> Yes <input type="checkbox"/> No
What are they?	

EVALUATION: *This policy will be reviewed as part of the College's review cycle.*