



1. Policy commitment

- 1.1 Anaphylaxis is a severe, rapidly progressive allergic reaction that is potentially life threatening. Although allergic reactions are common in children, severe life-threatening allergic reactions are uncommon and deaths are rare. However, deaths have occurred and anaphylaxis must therefore be regarded as a medical emergency requiring a rapid response.
- 1.2 The most common allergens in College aged children are peanuts, eggs, tree nuts (e.g. cashews), cow's milk, fish and shellfish, wheat, soy, sesame, certain insect stings (particularly bee stings). Less common allergens are wasp and jumper jack ant stings, tick bites, some medications (e.g. antibiotics and anaesthetic drugs) and latex.
- 1.3 Flinders Christian Community College (**College**) is committed to providing a safe learning environment for all our students and complying with the current Ministerial Order No. 706 (**MO 706**) and the Victorian Department of Education and Training's (**DET**) Anaphylaxis Guidelines (**Guidelines**).
- 1.4 The key to prevention of anaphylaxis in Colleges is knowledge of the student who has been diagnosed as at risk, awareness of allergens, and prevention of exposure to those allergens. Strong partnerships between the College and Parents/Guardians are important in helping students at risk of anaphylaxis to avoid exposure.
- 1.5 While it is not possible to achieve a completely allergen free environment, the College is committed to:
 - (a) providing, as far as practicable, a safe and supportive environment in which students at risk of anaphylaxis can participate equally in all aspects of their schooling.
 - (b) raising awareness about anaphylaxis and this Policy in the College community
 - (c) engaging with Parents/Guardians of each student at risk of anaphylaxis when assessing risks and developing risk minimisations strategies for that student
 - (d) ensuring that staff have knowledge about allergies, anaphylaxis and the College's procedures in responding to an anaphylactic rarefaction.

2. Scope

- 2.1 Minimising the risks of anaphylaxis is everyone's responsibility, including the Principal and all College staff, Parents/Guardians, students and the broader College community.
- 2.2 This Policy is communicated to the College community via Moodle and Knowledge base.

3. Definitions

- 3.1 For definition of terms, refer to **Annexure 1**.

4. Roles and responsibilities

College Principal

4.1 The Campus Principal:

- (a) actively seeks 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)
- (b) ensures that Parents/Guardians undertake their responsibilities as required under MO 706 and this Policy
- (c) ensures 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
- (d) ensures students' Individual Anaphylaxis Management Plans are appropriately communicated to all relevant staff
- (e) ensures that the canteen provider and all of its employees can demonstrate satisfactory training in the area of food allergy and anaphylaxis and its implications for food-handling practices
- (f) has implemented procedures 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
- (g) ensures that the student's Individual Anaphylaxis Management Plan is reviewed in consultation with parents
 - (i) Annually, at the beginning of each College year
 - (ii) When the student's medical condition changes
 - (iii) As soon as practicable after a student has an anaphylactic reaction at College
 - (iv) 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.
- (h) completes the *Annual risk management checklist* (available on the DET website) at the beginning of each College year.

Parents/Guardians

4.2 Parents/Guardians must:

- (a) inform the College in writing, either at enrolment or diagnosis, of the student's allergies, and whether the student has been diagnosed of being at risk of anaphylaxis
- (b) obtain and provide the College with an ASCIA Action Plan for Anaphylaxis from the student's medical practitioner that details:
 - (i) Their condition

- (ii) Any medications to be administered
- (iii) Any other relevant emergency procedures.
- (c) immediately inform College staff in writing of any changes to the student's medical condition and if necessary, obtain and provide an updated ASCIA Action Plan for Anaphylaxis
- (d) provide the College with an up to date photo for the student's ASCIA Action Plan for Anaphylaxis when the plan is reviewed
- (e) meet with and assist the College to develop the student's Individual Anaphylaxis Management Plan, including risk minimisation and management strategies
- (f) provide the College with an adrenaline autoinjector and any other medications that are current and not expired
- (g) replace the student's adrenaline autoinjector and any other medication as needed, before their expiry date or when used
- (h) assist College staff in planning and preparation for the student prior to camps, field trips, incursions, excursions or special events (e.g. class parties, cultural days, fetes or sport days)
- (i) if requested by College staff, assist in identifying and/or providing alternative food options for the student when needed
- (j) inform College staff in writing of any changes to the student's emergency contact details
- (k) participate in reviews of the student's Individual Anaphylaxis Management Plan.

Anaphylaxis Supervisors

4.3 In accordance with the Guidelines, the College has nominated staff members at each campus to undertake appropriate training to be able to verify the correct use of autoinjector (trainer) devices, and lead the twice-yearly briefings on this Policy. These staff members are the College Nurses at each campus of the College.

4.4 Responsibilities of the Anaphylaxis Supervisors include:

- (a) completing the DET College Anaphylaxis Supervisor Checklist, in conjunction with the Campus Principal and other College staff, annually.
- (b) providing access to the autoinjector (trainer) device for practice by College staff
- (c) sending reminders to staff or information to new staff about anaphylaxis training requirements
- (d) maintaining an up-to-date register of students at risk of anaphylaxis
- (e) maintaining a register of autoinjectors, including a record of when they are 'in' and 'out' from the central storage point (e.g. when they have been taken on excursions, camps)
- (f) working with the Principal, Parents/Guardians and students to develop, implement and review each Individual Anaphylaxis Management Plan in accordance with this Policy

- (g) providing advice and guidance to College staff about anaphylaxis management in the College, undertaking regular risk identification, and implementing appropriate minimisation strategies
- (h) working with College staff to develop strategies to raise their own, students' and College community awareness about severe allergies
- (i) providing or arranging post-incident support (e.g. counselling) to students and College staff, if appropriate.

All Staff

4.5 All staff are required to:

- (a) know and understand the requirements of this Policy
- (b) know the identity of students who are at risk of anaphylaxis, know their face and if possible what their specific allergy is;
- (c) understand the causes, symptoms, and treatment of anaphylaxis
- (d) obtain regular training in how to recognise and respond to an anaphylactic reaction, including administering an adrenaline autoinjector
- (e) know where to find a copy of each student's ASCIA Action Plan for Anaphylaxis quickly, and follow it in the event of an allergic reaction
- (f) know the College's general first aid and emergency response procedures, and understand their role in relation to responding to an anaphylactic reaction
- (g) know where students' adrenaline autoinjectors and the adrenaline autoinjectors for general use are kept
- (h) know and follow the risk minimisation strategies in the student's Individual Anaphylaxis Management Plan
- (i) plan ahead for special class activities (e.g. cooking, art and science classes), or special occasions (e.g. excursions, incursions, sport days, camp, cultural days, fetes and parties), either at the College, or away from the College
- (j) avoid the use of food treats in class or as rewards, as these may contain allergens
- (k) work with Parents/Guardians to provide appropriate treats for students at risk of anaphylaxis, or appropriate food for their child if the food the College/class is providing may present an allergy risk
- (l) be aware of the possibility of hidden allergens in foods and of traces of allergens when using items such as egg or milk cartons in art or cooking classes
- (m) be aware of the risk of cross-contamination when preparing, handling and displaying food
- (n) make sure that tables and surfaces are wiped down regularly and that students wash their hands before and after handling food

- (o) 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. Key messages that class teachers can discuss with students include:
 - (i) always take food allergies seriously – severe allergies are no joke
 - (ii) don't share your food with friends who have food allergies or pressure them to eat food that they are allergic to
 - (iii) not everyone has allergies – discuss common symptoms
 - (iv) wash your hands before and after eating
 - (v) know what your friends are allergic to
 - (vi) if a classmate becomes sick, get help immediately, even if the classmate doesn't want to
 - (vii) be respectful of a classmate's medical kit.

5. Autoinjectors

- 5.1 Adrenaline given as an injection into the muscle of the outer mid-thigh is the most effective first aid treatment for anaphylaxis.

General Use autoinjectors

- 5.2 Under direction of the Principal, the College maintains 42 at Carrum Downs and 26 at Tyabb adrenaline autoinjectors for general use to be part of the College's first aid kits, stored with a copy of the general ASCIA Action Plan for Anaphylaxis (orange). The following factors are considered, and reviewed annually, when determining the number of general use autoinjectors held by the College:

- (a) The number of students enrolled at risk of anaphylaxis
- (b) The accessibility of autoinjectors supplied by parents
- (c) The availability of a sufficient supply of autoinjectors for general use in specified locations of the College, including the yard, at excursions, camps and special events conducted, organised or attended by the College
- (d) That autoinjectors have a limited life, usually expire within 12-18 months, and need to be replaced at the College's expense, either at the time of use or expiry, whichever comes first.

- 5.3 General use autoinjectors are used when:

- (a) a student's prescribed autoinjector does not work, is misplaced, is out of date or has already been used
- (b) a student is having a suspected first time anaphylactic reaction and does not have a medical diagnosis for anaphylaxis
- (c) when instructed by a medical officer after calling 000.

Storage of autoinjectors

- 5.4 All 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.
- 5.5 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.
- 5.6 The following procedures will be followed for storage of autoinjectors:
- (a) autoinjectors for individual students, or for general use, are stored correctly and able to be accessed quickly
 - (b) autoinjectors are stored in an unlocked, easily accessible place away from direct light and heat but not in a refrigerator or freezer
 - (c) each autoinjector is clearly labelled with the student's name and stored with a copy of the student's ASCIA Action Plan for Anaphylaxis
 - (d) autoinjectors for general use are clearly labelled and distinguishable from those for students at risk of anaphylaxis and stored with a general ASCIA Action Plan for Anaphylaxis (orange)
 - (e) autoinjector trainer devices (which do not contain adrenaline or a needle) are not stored in the same location due to the risk of confusion.
- 5.7 Whenever autoinjectors are taken and returned to/from their usual location, such as for camps and excursions, this is clearly recorded

Review of autoinjectors

- 5.8 The College undertakes regular reviews of students' autoinjectors and those for general use. If the staff member undertaking the review identifies that any autoinjectors are out of date or cloudy/discoloured, they:
- (a) immediately send a written reminder to the student's Parent/Guardian to replace the autoinjector as soon as possible
 - (b) advise the College Nurse and Campus Principal that an autoinjector needs to be replaced
- 5.9 work with the College Nurse and Campus Principal to prepare an interim Individual Anaphylaxis Management Plan pending receipt of the replacement autoinjector.

6. Communication Plan

- 6.1 The College has developed a Communication Plan which includes the following information:
- (a) The College's method to provide information to all staff, students and Parents/Guardians about anaphylaxis, including provision of and access to this Policy
 - (b) The College's strategy for advising staff, students and Parents/Guardians about how to respond to an anaphylactic reaction:

- (i) during on-site activities (in the classroom, in the yard, in all College buildings and sites including gyms and halls)
- (ii) during off-site activities (excursions, camps, special events conducted, organised or attended by the College)
- (c) Procedures to inform volunteers, canteen staff and casual relief staff of students with a medical condition that relates to allergy and the potential for an anaphylactic reaction of a student in their care
- (d) Information on the College's compliance with MO 706 and the training undertaken by staff as outlined in section 9 of this Policy.

6.2 Awareness of anaphylaxis is raised within the College community through the display of fact sheets and posters in the following locations:

Carrum Downs Locations

6.3 Student health, first aid room, food technology classroom, café, staff room, administration staff lounge, music centre, gymnasium, learning resource centre (library) and applicable classrooms and common rooms, and through discussions with class teachers (refer section 4.5(o) of this Policy).

Tyabb Locations

6.4 Sub-school reception offices, first aid room, food technology classroom, science department, Agriculture studies, administration staff lounge, music centre, main gymnasium, learning resource centre (library) and applicable classrooms and common rooms, and through discussions with class teachers (refer section 4.5(o) of this Policy).

7. Prevention Strategies

7.1 The Principal ensures that while any student at risk of anaphylaxis is under the care of the College, including on excursions, camps or 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.

In the classroom

7.2 In the classroom, teachers should:

- (a) Keep a copy of the student's Individual Anaphylaxis Management Plan in the classroom. Be sure the ASCIA Action Plan is easily accessible even if the autoinjector is kept in another location
- (b) Liaise with Parents/Guardians about food-related activities ahead of time
- (c) Use non-food treats where possible, but if food treats are used in class it is recommended that Parents/Guardians of students with food allergy provide a treat box with alternative treats. Treat boxes should be clearly labelled and only handled by the student
- (d) Never give food from outside sources to a student who is at risk of anaphylaxis
- (e) 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

- (f) 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
- (g) 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)
- (h) Ensure all cooking utensils, preparation dishes, plates, and cutlery are washed and cleaned thoroughly after preparation of food and cooking
- (i) Have regular discussions with students about the importance of washing hands, eating their own food and not sharing food.

Cafe

- 7.3 Cafe staff (whether internal or external) must 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.
- 7.4 Cafe staff, including volunteers, are to 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.
- 7.5 With Parent/Guardian permission, 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.
- 7.6 Products labelled 'may contain traces of nuts' should not be served to students allergic to nuts.
- 7.7 Cafe has provide a range of healthy meals/products that exclude peanut or other nut products in the ingredient list or a 'may contain...' statement.
- 7.8 Staff must wipe down tables and surfaces with warm soapy water regularly.
- 7.9 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.
- 7.10 Canteen staff are 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.

Yard

- 7.11 Sufficient College staff on yard duty are trained in the administration of the autoinjector to be able to respond quickly to an anaphylactic reaction if needed.
- 7.12 The autoinjector and each student's Individual Anaphylaxis Management Plan are easily accessible from the yard, and staff are aware of their exact location. (Remember that an anaphylactic reaction can occur in as little as a few minutes).
- 7.13 The College's Communication Plan is followed to enable a student's medical information and medication can be retrieved quickly if a reaction occurs in the yard. All staff on yard duty must

be aware of the College's Critical Incident and Emergency Response Procedures and how to notify the general office/first aid team of an anaphylactic reaction in the yard.

- 7.14 Yard duty staff must be able to identify, by face, those students at risk of anaphylaxis. If identification cannot be made by facial recognition yard duty staff must make all reasonable attempts to determine the identification of the child by asking nearby students or in discussion with other staff where applicable. If no identification can be made a general purpose autoinjector must be applied.
- 7.15 Staff should be aware of students who may have anaphylactic responses to insects and liaise with Parents/Guardians in regard to appropriate risk mitigation strategies when outdoors.
- 7.16 The College keeps lawns and clover mowed and outdoor bins covered.
- 7.17 Students are asked to keep drinks and food covered while outdoors.

Special Events

- 7.18 Sufficient College staff or volunteers supervising the special event must be trained in the administration of an autoinjector to enable a prompt response to an anaphylactic reaction if required.
- 7.19 College staff should avoid using food in activities or games, including as rewards.
- 7.20 For special occasions, College staff should consult Parents/Guardians in advance to either develop an alternative food menu or request the Parents/Guardians to send a meal for the student.
- 7.21 Parents/Guardians 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 the College or at a special College event.
- 7.22 Party balloons should not be used if any student is allergic to latex.

Travel to and from the College

- 7.23 College staff should consult with Parents/Guardians 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 the College on the bus, and that the Parents/Guardians and bus service provider are aware of the limitations of the College's duty of care while travelling before and after College.

Field trips/excursions/sporting events

- 7.24 Sufficient College staff or volunteers supervising the event must be trained in the administration of an autoinjector to enable a prompt response to an anaphylactic reaction if required.
- 7.25 A College staff member or team of College staff trained in the recognition of anaphylaxis and the administration of the autoinjector must accompany any student at risk of anaphylaxis on field trips or excursions.
- 7.26 College staff should avoid using food in activities or games, including as rewards.

- 7.27 The autoinjector and a copy of the Individual Anaphylaxis Management Plan for each student at risk of anaphylaxis should be easily accessible and College staff must be aware of their exact location.
- 7.28 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.
- 7.29 All College 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.
- 7.30 The College will consult Parents/Guardians of anaphylactic students in advance to discuss issues that may arise, to develop an alternative food menu, or request the Parents/Guardians provide a meal (if required).
- 7.31 The organiser (typically Year Level Co-ordinator) should give due consideration to an alternative food or excursion venue if the risk of allergen exposure cannot be reduced to a sufficient level.
- 7.32 Parents/Guardians may wish to accompany their child on field trips and/or excursions. This should be discussed with Parents/Guardians as another strategy for supporting the student who is at risk of anaphylaxis.
- 7.33 Prior to the excursion taking place College staff should consult with the student's Parents/Guardians 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

- 7.34 Prior to engaging a camp owner/operator's services the College will 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 College, then the organiser will consider using an alternative service provider.
- 7.35 The organiser (typically Year Level Co-ordinator) or any other officer of the College 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. The College has a duty of care to protect students in their care from reasonably foreseeable injury and this duty cannot be delegated to any third party.
- 7.36 The organiser (typically Year Level Co-ordinator) must conduct a risk assessment and develop a risk management strategy for students at risk of anaphylaxis. This should be developed in consultation with Parents/Guardians of students at risk of anaphylaxis and camp owners/operators prior to the camp dates.
- 7.37 College staff must consult with Parents/Guardians 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.
- 7.38 Use of substances containing allergens should be avoided where possible.

- 7.39 Products that 'may contain' traces of nuts may be served, but not to students who are known to be allergic to nuts.
- 7.40 The student's autoinjector, Individual Anaphylaxis Management Plan, including the ASCIA Action Plan for Anaphylaxis and a mobile phone must be taken on camp. If mobile phone access is not available, an alternative method of communication in an emergency must be considered, e.g. a satellite phone.
- 7.41 Prior to the camp taking place the School Nurse and Year Level Co-ordinator consult with the student's Parents/Guardians to review the student's Individual Anaphylaxis Management Plan to ensure that it is up to date and relevant to the circumstances of the particular camp.
- 7.42 College staff participating in the camp should be clear about their roles and responsibilities in the event of an anaphylactic reaction. These should include but not be limited to a primary first aid officer and a secondary first aid officer in the event of more than one emergency.
- 7.43 Local emergency services and hospitals are contacted well prior to the camp where appropriate (e.g. remote locations, higher risk activities). The College advises full medical conditions of students at risk, location of camp and location of any off camp activities. Contact details of emergency services are distributed to all College staff as part of the emergency response procedures developed for the camp.
- 7.44 An autoinjector for general use is taken on camps, even if there is no student at risk of anaphylaxis, as a back-up device in the event of an emergency. Autoinjectors for general use are included in all yard duty kits and emergency boxes.
- 7.45 The autoinjector must remain close to the student and College staff must be aware of its location at all times. Depending on the age of the student, the student may carry their own autoinjector on camp. However, College staff members still have a duty of care towards the student if they do carry their own autoinjector.
- 7.46 Students with anaphylactic responses to insects must always wear closed shoes and long-sleeved garments when outdoors and should be encouraged to stay away from water or flowering plants.
- 7.47 Cooking and art and craft games must not involve the use of known allergens.
- 7.48 Potential exposure to allergens when consuming food on buses and in cabins must be considered.

Overseas Travel

- 7.49 The College must review and consider the strategies listed under "Field Trips/Excursions/Sporting Events" and "Camps and Remote Settings". Where an excursion or camp is occurring overseas, the organiser must involve Parents/Guardians in discussions regarding risk management well in advance.
- 7.50 Potential risks at all stages of the overseas travel must be investigated, such as:
- (a) travel to and from the airport/port
 - (b) travel to and from Australia (via aeroplane, ship etc.)
 - (c) various accommodation venues
 - (d) all towns and other locations to be visited

- (e) sourcing safe foods at all of these locations
 - (f) risks of cross contamination, including:
 - (i) exposure to the foods of the other students
 - (ii) hidden allergens in foods
 - (iii) whether the table and surfaces that the student may use will be adequately cleaned to prevent a reaction
 - (iv) whether the other students will wash their hands when handling food.
- 7.51 The College will employ appropriate minimisation strategies to reduce the risks outlined above that may include but not be limited to:
- (a) translation of the student's Individual Anaphylaxis Management Plan and ASCIA Action Plan
 - (b) sourcing of safe foods at all stages
 - (c) obtaining the names, address and contact details of the nearest hospital and Medical Practitioners at each location that may be visited
 - (d) obtaining emergency contact details
 - (e) understanding the ability to purchase additional autoinjectors.
- 7.52 The College will record details of travel insurance, including contact details for the insurer, and 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.
- 7.53 The College will plan for appropriate supervision of students at risk of anaphylaxis at all times, including that:
- (a) there are sufficient College staff attending the excursion who have been trained in accordance with the training requirements of this Policy
 - (b) there is an appropriate level of supervision of anaphylactic students throughout the trip, particularly at times when they are taking medication and eating food
 - (c) 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
 - (d) staff/student ratios should be maintained during the trip, including in the event of an emergency where the students may need to be separated.
- 7.54 The organiser must re-assess its Emergency Response Procedures, and if necessary adapt it to the particular circumstances of the overseas trip. A record of relevant information such as the following is retained:
- (a) dates of travel
 - (b) name of airline, and relevant contact details

- (c) itinerary detailing the proposed destinations, flight information and the duration of the stay in each location
- (d) hotel addresses and telephone numbers
- (e) proposed means of travel within the overseas country
- (f) list of students and each of their medical conditions, medication and other treatment (if any)
- (g) emergency contact details of hospitals, ambulances, and Medical Practitioners in each location
- (h) details of travel insurance
- (i) plans to respond to any foreseeable emergency including who will be responsible for the implementation of each part of the plan
- (j) possession of a mobile phone or other communication device that would enable College staff to contact emergency services in the overseas country if assistance is required.

Work Placement

7.55 The Work Placement Co-ordinator must involve Parents/Guardians, the student and the Employer in discussions regarding risk management prior to a student at risk of anaphylaxis attending work placement. Employers must be shown the ASCIA Action Plan for Anaphylaxis and how to use the autoinjector in the event that student shows signs of an allergic reaction whilst on work placement.

8. Emergency Response

- 8.1 In the event that a student suffers an anaphylactic reaction, the student will be managed in accordance with the ASCIA Action Plan for Anaphylaxis which sets out how to respond to an incident. Student health incidents which do not require treatment for anaphylaxis are managed through our *First Aid Policy*.
- 8.2 The procedures set out in the *Critical Incident Policy* and a student's ASCIA Action Plan for Anaphylaxis will be followed when responding to an anaphylactic reaction.
- 8.3 Supplementary to this Policy, the College has documented a number of procedures to be undertaken should an incident occur. These are outlined at **Annexure 2**, and are covered during the twice-yearly briefing provided to all staff (per section 9.5 of this Policy).

9. Training Requirements

- 9.1 Anaphylaxis Supervisors must successfully complete (at least every 3 years) *Course in Verifying the Correct Use of Adrenaline Autoinjector Devices 22303VIC*.
- 9.2 All College teaching staff are required to successfully complete:
 - (a) the ASCIA *Anaphylaxis e-training for Victorian Colleges* every 2 years; or
 - (b) a face-to-face anaphylaxis management course (*22300VIC - Course in First Aid Management of Anaphylaxis*) at least every 3 years.

- 9.3 Within 30 days of completing the e-training course, staff members are assessed by the Anaphylaxis Supervisor as being capable of correctly using the adrenaline autoinjector (trainer).
- 9.4 Anaphylaxis Supervisors ensure an accurate record of all anaphylaxis training completed by staff is maintained, kept secure and that staff training remains current.
- 9.5 Briefing sessions are hosted by the Anaphylaxis Supervisors twice per year (one held at the beginning of the College year). These sessions are attended by all relevant staff, and cover:
- (a) the contents of this Policy
 - (b) the causes, symptoms and treatment of anaphylaxis
 - (c) the identities of students at risk of anaphylaxis, the details of their medical condition, and where their medication is located
 - (d) how to use an adrenaline autoinjector, including practising with a trainer adrenaline autoinjector
 - (e) the College's first aid and emergency response procedures, and associated policies
 - (f) the location of, and access to, adrenaline autoinjectors that have been provided by parents or purchase by the College for general use
 - (g) College-specific scenarios to familiarise staff with responding to an emergency situation requiring anaphylaxis treatment.
- 9.6 The Principal regularly allocates time during staff meetings and staff days to discuss, practise and review this Policy.

10. Review process

- 10.1 This policy will be reviewed at least annually by the College or when there have been changes in the relevant laws and regulations which may affect the content of this Policy.
- 10.2 If you would like to provide the College with any feedback or suggestions to improve this Policy, please contact the Chief Financial Officer or Executive Principal.

11. Relevant legislative requirements and associated policies

- 11.1 This Policy must be read in conjunction with:
- (a) the law of the Commonwealth and Victoria including but not limited to:
 - (i) *Education and Training Reform Act (Vic) (s 4.3.1 (6)(c))*
 - (ii) Ministerial Order No. 706: Anaphylaxis Management in Victorian Colleges
 - (b) Victorian Department of Education and Training – *Guidelines for managing anaphylaxis*
 - (c) *“Student Work Placement Policy”*
 - (d) *“Excursions, Camps & Outdoor Activities Guidelines”*
 - (e) *“Excursions Policy – Overseas”*

- (f) *"First Aid Policy"*
- (g) *"Medication Policy"*
- (h) *"Critical Incident Policy"*
- (i) *"Healthy Food Policy"*
- (j) *"Food Safety Policy in the Food Technology Room"*

Annexure 1 – Definition of Terms

Term	Definition
Adrenaline autoinjector	means an adrenaline autoinjector device, approved for use by the Commonwealth Government Therapeutic Goods Administration, which can be used to administer a single pre-measured dose of adrenaline to those experiencing a severe allergic reaction (anaphylaxis). These may include EpiPen® or EpiPen® Jr.
ASCIA Action Plan for Anaphylaxis	means an action plan that is a nationally recognised action for anaphylaxis developed by ASCIA. These plans are device-specific; that is, they list the student's prescribed adrenaline autoinjector (EpiPen® or EpiPen® Jr) and must be completed by the student's medical practitioner. This plan is one of the components of the student's Individual Anaphylaxis Management Plan.
Individual Anaphylaxis Management Plan	means an individual plan for each student at risk of anaphylaxis, developed in consultation with the student's parents. The Individual Anaphylaxis Management Plan describes the student's allergies, symptoms, and the emergency response to administer the student's adrenaline autoinjector should the student display symptoms of an anaphylactic reaction. The Individual Anaphylaxis Management Plan also importantly includes age-appropriate strategies to reduce the risk of an allergic reaction occurring.

Policy Manager	Chief Financial Officer
Contact	Tristan Pham Tel: 03 5973 2000
Approval Authority	Executive Principal
Reviewed	Revised February 11, 2019

Annexure 2 – Anaphylaxis Communication Plan

Raising Staff Awareness

All staff to undertake e-training and demonstration, to be updated every two years.

<https://etrainingvic.allergy.org.au>

Staff briefings will be held twice yearly to include information on:

- The College's anaphylaxis management policy
- Causes, symptoms and treatment of anaphylaxis
- Identity of students diagnosed at risk of anaphylaxis and where medication is stored
- How to use an adrenaline auto-injector – EpiPen
- The College's emergency response procedures and ASCIA Action plan for Anaphylaxis
- Where lists and photos of students with severe medical conditions are displayed

Locations of these lists and photos

ASCIA Action Plan for Anaphylaxis are displayed in the following locations,

Carrum Downs

- Student health
- First aid room
- Food technology classroom
- Café
- Staff room
- Administration staff lounge
- Music centre
- Gymnasium
- Learning resource centre (library)
- Applicable classrooms for students with Anaphylaxis
- Common Rooms

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- Sub-school reception offices
- First aid room
- Food technology classroom
- Agriculture Studies
- Science department
- Administration staff lounge
- Music centre
- Main gymnasium
- Learning resource centre (library)
- Applicable classrooms for students with Anaphylaxis
- Yard duty bags

ALL STAFF in charge of students at risk of anaphylaxis need to read and be familiar with their student's ASCIA Action Plan and individual management plan.

The Principal will ensure casual relief teachers (CRTs), all seasonal sport coaches and staff are provided with a photograph folder identifying students diagnosed at risk of anaphylaxis, serious medical issues and the College's Emergency Response Procedures. CRTs and coaches are directed to complete the ASCIA online training in anaphylaxis management.

Raising Student Awareness

Classroom education from Student Health and teaching staff including during year level assembly will reinforce the importance of:

- Hand washing
- Not sharing food containing tree nuts and peanuts with other students
- Raising peer group awareness of serious allergic reactions
- Ensuring trip and excursion groups, sporting teams and crews are aware of peer needs in relation to people with severe medical alerts and those at risk of anaphylaxis.

Working with Parents

The College requires Parents/Guardians to annually:

- Provide the College with an emergency procedures plan (ASCIA Action Plan for Anaphylaxis) which includes a current colour photo of their child.
- Supply the College with their child's adrenaline auto-injector and ensure it is within expiry date.
- Work with the College to develop an individual management plan and review it annually.
- Give permission for their child's photo to be displayed in areas around the College.

Responding to an anaphylactic incident

The up-to-date register of all students at risk of anaphylaxis is located in Synergetic

Individual Anaphylaxis Management Plans and ASCIA Action Plans can be located:

- in the classroom for primary students and in the homeroom for secondary students
- in the staff room
- in selected College buildings and sites including gymnasiums
- on excursions

- on camps
- at special events conducted, organised or attended by the College.

Details on the accessibility and storage of autoinjectors can be located alongside the Individual Anaphylaxis Management Plans as displayed.

Signs and symptoms

The following are an indication of symptoms of anaphylactic shock. A student's ASCIA Action Plan, outlining individual symptoms, should always be referred to.

Mild to moderate allergic reaction can include:

- swelling of the lips, face and eyes
- hives or welts
- tingling mouth
- abdominal pain and/or vomiting (these are signs of a severe allergic reaction to insects).

Anaphylaxis (severe allergic reaction) can include:

- difficult/noisy breathing
- swelling of tongue
- swelling/tightness in throat
- difficulty talking and/or hoarse voice
- wheeze or persistent cough
- persistent dizziness or collapse
- pale and floppy (young children).

In-College Environment

- Classrooms - a classroom phone/personal mobile phone is to be used to raise the alarm that a reaction has occurred. Alternatively another student may be sent to the student window to trigger a response.
- Yard - Staff may use mobile phones or walkie talkies whilst on yard duty to raise the alarm. Alternatively another student may be sent to the student window to trigger a response.

In addition:

- A nominated staff member must be in place at each campus to call an ambulance
- A maintenance department member or other nominated staff member must be in place at the entrance to the campus to direct the ambulance to the emergency site.

Out-of-College Environments

Excursions and Camps - Each individual camp and excursion requires a risk assessment to be performed to ensure appropriate steps are taken in the event of an emergency involving an allergic reaction. This must include:

- Ensuring that a team of College staff trained in anaphylaxis attend each event
- That appropriate methods of communication are discussed, depending on the size of excursion/camp/venue
- The location of autoinjectors (i.e. who will be carrying them). Is there a second medical kit? Who has it?
- How to get the autoinjector to a student
- Who will call for ambulance response, including giving detailed location and address, e.g. Melway reference for a city excursion, and best access point or camp address/GPS location.

Occurrence of an incident

A member of staff should immediately locate the student's autoinjector and the student's Individual Anaphylaxis Management Plan, which includes the student's ASCIA Action Plan.

The Adrenaline Autoinjector should then be administered following the instructions in the student's ASCIA Action Plan.

If an Adrenaline auto injector is administered the College must:

1. **Immediately** call an ambulance (000/112).
2. 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.
3. 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 College staff to move other students away and reassure them elsewhere.
4. 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 autoinjector is available (such as the autoinjector for general use).
5. **Then** contact the student's emergency contacts.
6. **Later**, enact the College's emergency and critical incident management plan.

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.

Where possible, only College staff with training in the administration of the autoinjector should administer the student's autoinjector. However, it is imperative that an autoinjector is administered as soon as possible after an anaphylactic reaction. Therefore, if necessary, the autoinjector 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 is placed in the recovery position unless there is further danger (e.g. the anaphylactic reaction was caused by a bee sting and the bee hive is close by).

First-time reactions

If a student has a severe allergic reaction (refer above for symptoms of an allergic reaction), but has not been previously diagnosed with an allergy or being at risk of anaphylaxis, College staff should follow the same procedures as outlined above for students known to be at risk for anaphylaxis. It may also include locating and administering an autoinjector for general use.

This should include immediately contacting an ambulance using 000.

Post-incident support

An anaphylactic reaction can be a very traumatic experience for the student, others witnessing the reaction, and Parents/Guardians. In the event of an anaphylactic reaction, students and College staff may benefit from post-incident counselling, provided by the College Nurse, Director of Wellbeing, College Counsellor and College Chaplain.