



<b>POLICY:</b>	<b>ANAPHYLAXIS MANAGEMENT</b>
<b>DATE:</b>	Reviewed & Updated October 2021
<b>ENDORSED BY COLLEGE COUNCIL:</b>	
<b>AUTHOR &amp; POSITION</b>	Elisa Brasher: First Aid Co-Ordinator
<b>TO BE REVIEWED:</b>	As changes are made to DET POLICY

Strathmore Secondary College's Anaphylaxis Policy is based on DET Guidelines and will comply with Ministerial Order 706. It will be reviewed annually and amended in light of any changes issued by the Department.

### **BACKGROUND**

Anaphylaxis is a severe, rapidly progressive allergic reaction that is potentially life threatening. The most common allergens in school aged children are peanuts, eggs, tree nuts (e.g., cashews), cow's milk, fish and shellfish, wheat, soy, sesame, latex, certain insect stings and medication.

The key to prevention of anaphylaxis in schools is knowledge of those students who have been diagnosed at risk, awareness of triggers (allergens), and prevention of exposure to these triggers. Partnerships between schools and parents are important in ensuring that certain foods or items are kept away from the student while at the school. Adrenaline given through an EpiPen® auto-injector to the muscle of the outer mid -thigh is the most effective first aid treatment for anaphylaxis.

### **PURPOSE**

To provide, as far as practicable, a safe and supportive environment in which students at risk of anaphylaxis can participate equally in all aspects of schooling.

To raise awareness about anaphylaxis and the school's anaphylaxis management policy in the school community

To engage with parents/carers of students at risk of anaphylaxis in assessing risks, developing risk minimisation strategies and management strategies for the student.

To ensure that each staff member has adequate knowledge about allergies, anaphylaxis and the school's policy and procedures in responding to an anaphylactic reaction.

The key reference and support for the College regarding Anaphylaxis is contained in the DET Anaphylaxis Guidelines Feb 2016

### **1. INDIVIDUAL ANAPHYLAXIS MANGEMENT PLANS**

*See - SSC Anaphylaxis Plan – Appendix One*

The principal will ensure that an individual management plan is developed, in consultation with the student's parents, for any student who has been diagnosed by a medical practitioner as being at risk of anaphylaxis.

The individual anaphylaxis management plan will be in place as soon as practicable after the student enrolls and where possible before their first day at the school.

The individual anaphylaxis management plan will set out the following:

- Information about the diagnosis, including the type of allergy or allergies the Student has (based on a diagnosis from a medical practitioner).
- Strategies to minimise the risk of exposure to allergens while the student is under the care or supervision of school staff, for in-school and out of school settings including camps and excursions.

- The 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.
- An emergency procedures plan / ASCIA Action Plan (red, white & blue) provided by the parent, That:
  - Sets out the emergency procedures to be taken in the event of an allergic Reaction.
  - is signed by the current treating doctor.
  - includes an up-to-date photograph of the student.

The student's Management Plan will be kept in the general office. Copies will be given to the family, student coordinator, food technology coordinator where applicable & to staff attending camp. A copy will also be kept with the student's EpiPen®.

The student’s individual management plan will be reviewed in consultation with the student’s parents/ carers:

- Annually
- If the student’s condition changes, or
- Immediately after a student has an anaphylactic reaction at school.

It is the responsibility of the parent to:

- provide the ASCIA Action Plan
- inform the school if their child’s medical condition changes, and if relevant provide an updated ASCIA Action Plan
- provide an up to date photo for the ASCIA Action Plan

## 2. PREVENTION STRATEGIES

CLASSROOMS	
1.	Liaise with parents about food related activities prior to event.
2.	Avoid using food as rewards or prizes where possible.
3.	Discuss the prevalence of food allergies & consequences with students & discourage others from bringing food containing known allergens to class.
4.	Emphasis importance of hand washing & not sharing food.
5.	Encourage students to read labels& small print. Avoid foods labelled “may contain traces of nuts” (or egg .)
6.	Wipe tables after class party or activities involving food.
FOOD TECHNOLOGY	
1.	Follow student's individual management plan
2.	Student photos in Food Tech office to help teacher plan lesson without using allergen. Use substitute ingredients where possible.
3.	Avoid using eg. nut products in the class room where possible.
4.	Student may be at a separate work area depending on their individual plan
5.	Ensure cleanliness of benches & utensils to prevent cross contamination.
CAFETERIA	
1.	All staff have attended a Safe Food Handling Course & Anaphylaxis Management and are aware of the dangers of cross contamination.
2.	Separate cutting boards, knives and other utensils are used for foods known to be common allergens. ( eggs, seafood, nuts)
3.	Any foods containing nuts will be clearly labelled.
4.	Names and photos of students at risk of anaphylaxis are displayed in cafeteria office.

YARD	
1.	Students at risk of anaphylaxis are instructed not to share food.
2.	Staff on yard duty will have current anaphylaxis training and know how to recognise and respond to a moderate/ severe allergic reaction.
3.	Staff member will either phone the general office <i>or</i> send a student to collect Epipen® & ASCIA Plan from the general office. The staff member will stay with the student who is unwell.
SPECIAL EVENTS - Sausage Sizzle / Pancake Day	
1.	Students are instructed not to eat/handle food if they are unsure of ingredients
2.	Staff responsible for the event must display an ingredient list for all foods which is large and easy to read.
3.	Staff must be aware of students' dietary restrictions and have current Anaphylaxis training.
TRAVEL TO & FROM SCHOOL	
1.	The College recommends that students also carry their own personal Epipen® in their school bag, for use in an emergency while travelling to and from school. This is recommended in the Management Plan but not enforced.
2.	Families are encouraged to take home the expired Epipen®, and become familiar with how to use it.
3.	Families know that the Epipen® held in the general office is available between 8am – 4.30pm. If their son/daughter attends early morning swimming or late evening drama rehearsals the student will need to carry his own personal Epipen® .
EXCURSIONS	
1.	Teacher planning the excursion /sporting event must identify all students who are at risk of mod/severe allergy when planning the excursion.
2.	The teacher must have current Anaphylaxis training if a student at risk is attending.
3.	Teacher is responsible for collecting the student's Epipen® & ASCIA plan. The teacher with Epipen should remain in close proximity to the student at all times. Teacher should carry a mobile phone.
4.	If food is involved, the venue should be contacted ahead of time to alert them to the need for vigilance regarding a student with anaphylaxis.
5.	Other students may be requested not to bring along snacks containing nuts (or other) to help reduce the chance of accidental contact.
6.	Risk management. <i>Ask</i> - Will the student be within direct contact with the staff member at all times or will they require phone contact or a buddy system? Where is the nearest help? (Ambulance or hospital) Would it be prudent to take a second back- up Epipen® ? Will there be phone coverage?
7.	Staff member should always be aware of exact location in case there is a need to phone for an ambulance.
CAMPS	
1.	Staff member identifies students at risk of anaphylaxis & allergens at planning stage.
2.	Staff member to liaise with Camp Manager regarding the provision of appropriate /safe food and qualifications of staff.
3.	Teacher to liaise with parents.
4.	Families should provide a second EpiPen® to be taken on camp as back up.
5.	Teacher must bring a mobile phone & be aware of location at all times.
6.	Risk assessment would include locating whereabouts of medical assistance prior to going on camp & the amount of time an ambulance would take to arrive.
7.	Teacher can request other students do not bring along snacks or snacks which may contain nuts ( or other allergen)

## EXCURSIONS cont.

8. Anaphylaxis trained staff must attend camp and remain in close contact with student at all times. Epipen® & ASCIA plan must be within 5 minutes of the student at all times. Epipen must be stored correctly. Not in the fridge & out of direct sunlight.
9. A student may carry/wear their own Epipen® from home, however the supervising teacher still has a duty of care in relation to preventing accidental contact, administering the medication and phoning for an ambulance if an emergency occurs.
10. All staff should be aware of the student at risk of anaphylaxis and their own role should an emergency occur.
11. Activities should be examined. Look out for craft sessions which use food packaging which could be contaminated, or science sessions. e.g. : 'The Great Egg Drop'
12. The school cannot sign any disclaimer from the camp. Schools cannot delegate responsibility.

## OVERSEAS TRAVEL

1. All points included in Camps (above) should be adhered to. In addition..
2. Parents will be required to source:  
  
Flights - get advice from doctor regarding how many Epipens® to take  
- doctor's letter explaining that Epipens® are required to be taken on board in the cabin of the aircraft.  
- special meals  
- script from doctor in case adrenaline injector needs to be replaced while overseas  
  
Language  
- ASCIA Plan – translated into various languages/dialects  
- Prescriptions - translated into various languages/dialects  
- Dietary restrictions - translated
3. Staff - all staff will need copies of the student's emergency contact details and travel insurance,  
- will research and document the availability of medical facilities at each location prior to departure.  
- all staff attending will be aware of their role in an emergency situation.
4. Supervision - A delegated staff member with anaphylaxis training should be in close contact with the student at all times.  
- A plan should be in place for both supervision of the student suffering from the allergy as well as the remainder of students, should an emergency occur.
5. The College will keep written details of travel including airlines, times, accommodation, contact numbers, medical facilities on route, travel insurance and emergency contacts to help the College respond in an emergency situation.

## WORK EXPERIENCE

1. Schools should 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 Plan and how to use the Epipen® or Anapen

Note that banning foods or other products in the workplace is not recommended as it may lead to complacency and will not necessarily eliminate all sources of the allergen.

### 3. SCHOOL MANAGEMENT AND EMERGENCY RESPONSE

The College currently has 41 students who are at risk of anaphylaxis and are therefore required to have their own EpiPens® or Anapen & ASCIA plans kept at school.

#### **EpiPens or Anapen**

Each student listed has an adrenaline auto injector supplied by their parents to be kept at the College for use in an emergency. Currently all our students have an EpiPen® or Anapen.

Each EpiPen & Anapen is labelled with the student's name and is kept with their Emergency Action Plan (ASCIA Plan) plus individual management plan, in a labelled plastic box. This is stored in the compact storage unit, in the general office which is secure and always accessible between 8am – 4.30pm.

When a student leaves the school to go on an excursion the accompanying teacher must collect that student's EpiPen or Anapen medibag & contents from the general office.

- EpiPen® or Anapen must be signed out.
- EpiPen or Anapen must be stored correctly in transit, ( not in the fridge/ not in direct sunlight)
- The teacher responsible for the student at risk will carry the EpiPen® or Anapen and stay in close proximity to the student during the excursion.
- On camps, all teachers should be aware of which students are at risk of anaphylaxis and each have access to and be familiar with the Management Plan.

All EpiPens & Anapens are registered with the Epi Club of Australia which notifies the school via email of the students epiPen's or Anapen expiry and reminders to renew their prescriptions are sent out 30 days before the expiry date.

#### **In the event of an anaphylactic reaction occurring:**

When a staff member suspects a student may be having a moderate or severe allergic reaction, they should stay calm and stay with the student.

- If the student is pale & floppy – lie the student down
  - If the student is having breathing difficulties – have them adopt a supported sitting position
  - Locate the student's EpiPen or Anapen & ASCIA plan. eg. Contact the general office by phone or send someone to fetch the student's EpiPen or Anapen and ASCIA plan. If out of the school, always know the whereabouts of the EpiPen or Anapen and have it close by.
- The EpiPen® or Anapen should be able to reach the student in less than 5 minutes.

Reassure the student & explain what you are going to do.

#### **Follow the steps on the ASCIA plan.**

1. Remove EpiPen from its outer container.
2. Check the expiry date and the clarity of the fluid in the 'window'.
3. Form a fist around EpiPen® and pull off the blue safety cap.
4. Place orange end against the student's outer mid-thigh (with or without clothing).
5. Push down hard until a click is heard or felt and hold in place for ten seconds.
6. Remove EpiPen®.
7. Injection site for 3 seconds.
8. Note the time you administered the EpiPen®.
9. The used auto-injector must be handed to the ambulance paramedics along with the time of administration.

## OR

Administer an Anapen® 500 or Anapen® 300

- Pull off the black needle shield
- Pull off grey safety cap (from the red button)
- Place needle end firmly against the student's outer mid-thigh at 90 degrees (with or without clothing)
- Press red button so it clicks and hold for 10 seconds
- Remove Anapen®
- Note the time the Anapen is administered

Retain the used Anapen to be handed to ambulance paramedics along with the time of administration

**When an Epipen® or Anapen is given, an ambulance must be called: '000' - Triple zero**

The staff member with the student is best placed to phone the ambulance as they can give valuable support and advice while waiting for the ambulance to arrive.

**Dial '000'** .

If you are using a mobile phone which is out of range or indicates is for emergency calls only – **dial 112**.

If directed by ambulance advice over the phone a second adrenaline injection may be administered.

If an Adrenaline Autoinjector is administered, the School must	
1.	<b>Immediately</b> 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 School Staff to move other students away and reassure them elsewhere.
4.	In the situation where there is no improvement or <b>severe symptoms</b> 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).
5.	<b>Then</b> contact the student's emergency contacts.
6.	<b>For government schools - later</b> , contact Security Services Unit, DET, 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).

**The student will always be taken to a hospital for observation.**

- Families will be required to replace the Epipen® or Anapen with a new one on the students return to school.
- Management Plan should be reviewed
- Students and staff may benefit from post- incident counselling from school psychologist and EAP respectively. (ph: 1300 361 008 = Employee Assistance Program)

*The school's first aid procedures and student's emergency procedures plan (ASCIA Action Plan) will be followed in responding to an anaphylactic reaction.*

### 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 if instructed to do so.

#### 4. GENERAL USE ADRENALINE AUTO- INJECTORS

The principal is responsible for the purchase of Adrenaline Auto-injector(s) for General Use, as a back-up to auto-injectors supplied by Parents.

The principal will also need to determine the number of additional Adrenaline Auto injector(s) required.

We currently have two Back-Up EpiPens®. For general use. These are used as back up for the students, staff and visitors to the College. The College may consider purchasing more if these are required to be taken out of the school on camps or excursions.

These are labelled 'Back-Up EpiPen 1' and 'Back-Up EpiPen 2'. They are stored in labelled containers along with the students containers. They also contain a non-specific ASCIA plan. This ASCIA plan does show how to administer the EpiPen®, but does not include any student details or emergency contact numbers.

The back-up EpiPen® may be used on the advice of ambulance personal if the initial injection has not had the desired effect *or* if there is a delay in an ambulance attending.

It may also be used, if directed by ambulance authorities, on another person who has not previously been diagnosed & is having a reaction for the first time.

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.

#### 5. COMMUNICATION PLAN

The principal will be responsible for ensuring that a communication plan is developed to provide information to all staff, students and parents about anaphylaxis and the school's anaphylaxis management policy.

The communication plan will include information about what steps will be taken to respond to an anaphylactic reaction by a student in a classroom, in the school yard, on school excursions, on school camps and special event days.

Volunteers and casual relief staff of students at risk of anaphylaxis will be informed of students at risk of anaphylaxis and their role in responding to a reaction.

New staff receive written information about Anaphylaxis and how to respond to an emergency situation in a variety of in school and out of school settings.

Team Coordinators and staff attending camps receive copies of individual students' Management Plans

Photo boards in various locations around the school – general staff room, plus offices in the cafeteria, food technology, science and the library.

Power Point presentation on the staff server is available online at any time.

*Server /staff server/staff volume/AAA staff/Anaphylaxis*

#### Casual Relief Teachers

CRTs receive a printed booklet outlining their responsibilities in the event of a student having an anaphylactic reaction. It also shows photos of students at risk, and foods/triggers to be avoided.

CRTs can also be directed to the photo boards around the school & be made aware of annotations on the class rolls.

( A = Anaphylaxis which is shown in Compass when marking the class rolls)

#### Volunteers

Volunteers currently report to the staff member in charge of Students with Special Needs. She will inform them of the students at risk of anaphylaxis plus their role in responding to an allergic reaction by a student in their care.

## **Twice-Yearly Briefing**

*In addition, all staff are to participate in a briefing, to occur twice per calendar year - with the first briefing to be held at the beginning of Term 1 the school year & second briefing in Term 3*

- \* Title and legal requirements are outlined in Ministerial Order 706
- \* pictures of the students at our school at risk of anaphylaxis, their allergens, year levels and risk management plans that are in place
- \* Signs and symptoms of anaphylaxis
- \* ASCIA Anaphylaxis e-training
- \* ASCIA Action Plan for Anaphylaxis and how to administer an EpiPen® or Anapen
- \* Your school's First Aid policy and emergency response procedures
- \* on-going support and training.

The briefing must be conducted by a member of the school staff, preferably the person nominated as the School Anaphylaxis Supervisor, who has successfully completed an approved anaphylaxis management-training course in the last 2 years.

The principal will ensure that while the student is under the care or supervision of the school, including excursions, yard duty, camps and special event days, there is a sufficient number of school staff present who have successfully completed an anaphylaxis management-training course.

## **Parents**

Families are contacted by phone following the receipt of the student's enrolment if the family has indicated their child is at risk of anaphylaxis.

- This is followed by written material outlining both the family's & College's roles and responsibilities in caring for the student, information about Ministerial Order 90 & 706, a request for the ASCIA plan and a 'draft' Management Plan.
- Prior to the student commencing the parent meets with first aid officer, often with the student, to discuss the individual management plan.
- Arrangements are made for the parent to bring in EpiPen® and emergency ASCIA plan on orientation day.
- Parents are encouraged to contact the first aid officer at any time but must do so if there are any changes to the student's condition in regard to their allergy.
- Parents are contacted by mail to remind them one month prior to the EpiPen's expiry date. If oral antihistamines have been prescribed, they will also be kept with the EpiPen and checked monthly.
- Parent Update which is published weekly will announce Anaphylaxis Awareness Week (May ) and also advertises Community Education Sessions run by the Royal Children's Hospital.

## **Students**

Students at risk of anaphylaxis are encouraged to read and sign their management plan as they have some specific responsibilities. eg – not sharing food and reading the fine print on packaged foods.

Families are also encouraged to take home the expired EpiPens so that they can give their son/daughter the opportunity to become familiar with the EpiPen.

Other students will be made aware of the need for care by their classroom teachers when food is involved and at other times by strategically placed posters around the school.

## 6. STAFF TRAINING

All School Staff will be appropriately trained:

- school staff who conduct classes that students attend who are at risk of anaphylaxis  
&
- any further school staff that are determined by the Principal, specifically first aid trained staff, team coordinators & PE staff.

The Department of Education and Training is moving to an online model for anaphylaxis training in schools. This forms part of Victoria's ongoing commitment to providing a safe and supportive learning environment for all students.

Under the new online model, it is recommended that **all Victorian school staff** undertake the new Australasian Society of Clinical Immunology and Allergy (ASCIA) e-training course once **every two years**. This course is free of charge for all Victorian school staff and can be assessed at <https://etrainingvic.allergy.org.au> it will take approximately one hour to complete.

In order to meet legislative requirements staff will also need to have their competency in using an auto injector (Epipen) or Anapen tested in person within 30 days of completing the ASCIA e training.

Every government school has now been contacted by the Asthma Foundation and has been invited to nominate **two staff members** from each campus to undertake face to face training to skill them in providing competency checks, at no cost to the school. These staff will perform the role of School Anaphylaxis Supervisor and be the contact for anaphylaxis management requirement in the school, including the twice yearly school briefings.

- participate in a briefing, to occur twice per calendar year (with the first briefing to be held at the beginning of the school year) on:
  - the School's Anaphylaxis Management Policy;
  - the causes, symptoms and treatment of anaphylaxis;
  - the identities of the students with a medical condition that relates to an allergy and the potential for anaphylactic reaction, and where their medication is located
  - how to use an Adrenaline Autoinjector, including hands on practise with a trainer Adrenaline Autoinjector device;
  - the School's general first aid and emergency response procedures; and
  - the location of, and access to, Adrenaline Autoinjector that have been provided by parents or purchased by the college for general use.

The Principal will ensure that while the student is under the care or supervision of the School, including excursions, yard duty, camps and special event days, there is a sufficient number of School Staff present who have successfully completed an Anaphylaxis Management Training Course in the three years prior.

## 7. ANNUAL RISK MANAGEMENT CHECKLIST

*See Appendix Two*

The Principal will complete an annual Risk Management Checklist to ensure the obligations of the College are being met.

Appendices:

- Anaphylaxis Risk Management Check list
- Anaphylaxis Management Plan

References:

- [DET Anaphylaxis Policy](#)
  - [DET Health Support Planning Policy](#)

**Appendix One:**

**STRATHMORE SECONDARY COLLEGE**

**INDIVIDUAL ANAPHYLAXIS MANAGEMENT PLAN**

*student photo*

**FOR:**

**YEAR:**

**FORM :**

Current subjects -

<b>Student Name</b>		
<b>Date of Birth</b>		
<b>Severely Allergic to</b>	<b>No PEANUTS No NUTS</b> (or eggs or dairy or kiwi or latex etc )	
<b>Other Health Conditions</b>		
<b>Medication kept at school</b>	EpiPen® -Adrenaline auto injector	Stored in general office, in container labelled with student's name. General office is open 8am – 4.30 pm
<b>Parent Contact Details</b>	Parent - 1	Parent -2
<b>Name</b>		
<b>Relationship</b>		
<b>Mobile phone number</b>		
<b>Work phone number</b>		
<b>Home phone number</b>		
<b>Address</b>		

<b>EMERGENCY CONTACTS</b>	<b>Contact One</b>	<b>Contact Two</b>
<b>Name</b>		
<b>Relationship</b>		
<b>Mobile phone number</b>		
<b>Home phone number</b>		
<b>Work phone number</b>		
<b>DOCTOR</b>	<b>Name</b>	
	<b>Address</b>	
	<b>Contact phone number</b>	
<b>AMBULANCE COVER</b>	<b>YES / NO</b>	<b>MEDICARE NUMBER</b>
<b>Does - carry a spare EpiPen® &amp; ASCIA plan in his schoolbag?</b> (this is recommended)		
<b>Does - wear any medical identification? Eg SOS</b>		
<b>Is - able to self-administer the EpiPen?</b> (not required while at school))		
<b>Emergency care to be provided at school :</b>	Action taken as per student's ASCIA Action Plan: Administer EpiPen	
<b>Storage for Adrenaline Autoinjector (EpiPen® / Anapen®)</b>	Student's EpiPen® to be stored in <u>front office</u> in the compacter. It is in a labelled box with the student's ASCIA plan. The office is open between 8.00 am – 4.30pm. The EpiPen® needs to be stored at room temperature: ie under 26° and not exposed to sunlight. The school back-up EpiPens® are also stored in the compacter.	
<b>This plan will be reviewed :</b> • annually • when the student's condition changes • following an anaphylactic reaction		
<b>Parent Signature</b>		Date-
<b>Student Signature</b>		Date-
<b>Principals nominee signature</b>		Date-

<b>AREA / ENVIRONMENT</b> <i>General Classroom</i>		<b>ALLERGEN</b> <i>Nuts &amp; Peanuts</i>	
<b>Risk identified</b>	<b>Actions required to minimise the risk</b>	<b>Responsible person</b>	<b>Completion date</b>
<i>Accidental exposure to nuts/peanuts</i>  <i>via other students or furniture</i>	Teachers are encouraged to be familiar with the names and faces of students who are at risk of anaphylaxis.  Food rewards should not be used in class.  Teacher should discuss the serious nature of food allergies & importance of not sharing foods.	Class teacher	Ongoing
	Students who are risk of anaphylaxis have their photos displayed in the main staff room.  Students at risk of anaphylaxis have their name annotated on the roll ( digital), along with details of their allergy.	First Aid	First day of school plus ongoing.
	Information about student is given to Casual Relief Teachers. Info booklet includes photos of students at risk of anaphylaxis and teacher's responsibilities.	Daily Organizer	Daily
	Class party or special event. Teacher running the session should discuss allergies with the class prior to the event and request that food containing the allergen (eg. nuts) not be brought along.  Tables should be wiped down before and after the event.	Class Teacher	As required
<b>AREA</b> <i>Food Technology</i>		<b>ALLERGEN</b> <i>Nuts &amp; Peanuts</i>	
<i>Accidental exposure to nuts/peanuts</i>	Students at risk of anaphylaxis (& other students with food allergies & dietary restrictions ) have a photo displayed on the medical board in food tech office.	First Aid Officer	Names – 1 <sup>st</sup> day of term Photos – as soon photos are available
	Teacher may plan the lesson by substituting another food for nuts <u>or</u> by omitting the nuts.	Class teacher	Weekly review of lesson plans
	Student may prepare food at a separate work station.	Class Teacher	As Required
	Parent will be contacted if there is any concern regarding the student's participation.	Class teacher	As Required
	Teaching staff and assistants are Epipen trained & have current Anaphylaxis Management training.	Class teacher	Anaphylaxis training every 3 years

<b>Restricted Foods</b>	<b>How are the foods restricted?</b>	<b>Usual /Possible Symptoms</b>	<b>Usual Treatment</b>
Eg. nuts			

<b>AREA / ENVIRONMENT</b> <i>Science</i>		<b>ALLERGEN</b> <i>Nuts &amp; Peanuts</i>	
<b>Risk identified</b>	<b>Actions required to minimise the risk</b>	<b>Responsible person</b>	<b>Completion date</b>
<i>Accidental contact with allergens - nuts &amp; peanuts</i>	Students who are risk of anaphylaxis have their photos displayed in the science prep room. Students at risk of anaphylaxis have their name annotated on the roll ( digital), along with details of their allergy.	First Aid	Start of school year.
( or latex, egg or other allergen)	Nuts are no longer used in the science area. If other allergens are to be used in an experiment, other materials can be substituted if there is a student at risk of allergy in that class. Laboratory assistants have anaphylaxis / EpiPen training.	Classroom teacher	Ongoing
	Information about student is given to Casual Relief Teachers. Info booklet with photos of students at risk of anaphylaxis and teacher's responsibilities.	Daily Organizer	Daily
<b>AREA</b> <i>VSSEC</i> Victorian Space Science Education Centre		<b>ALLERGEN</b> <i>Nuts &amp; Peanuts</i>	
<i>Accidental exposure to nuts/peanuts</i>	Students visiting from outside schools complete a medical questionnaire prior to arriving. They are accompanied by staff from their own school.	Laboratory technicians	Ongoing
	A 'back-up' EpiPen® & generic ASCIA plan is kept in VSSEC.	First Aid Officer	Ongoing
	VSSEC lab technicians are EpiPen & Anaphylaxis trained.	Lab technicians	Ongoing
<b>AREA</b> <i>Cafeteria</i>		<b>ALLERGEN</b> <i>Nuts &amp; Peanuts</i>	
<i>Accidental exposure to nuts/peanuts</i>	Any foods containing nut/ peanuts/ nut products are labelled. Students may ask serving staff if they are unsure.	Cafeteria manager	Daily
	Photos of students at risk of anaphylaxis/ allergy are displayed on photo board in cafe office . Anaphylaxis guidelines displayed in cafeteria office.	First Aid Officer	Commencement of the school year & ongoing
	All staff working in the cafeteria have : - anaphylaxis training . - food handling certificate and are aware of the risks of cross	Staff	Ongoing

	contamination. Separate cutting boards & utensils are used for foods which may contain allergens ( eg. nuts)		
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<b>AREA</b> <i>Lunch time &amp; Recess</i>	<b>ALLERGEN</b> <i>Peanuts and Nuts</i>
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<b>Risk identified</b>	<b>Actions required to minimise the risk</b>	<b>Responsible person</b>	<b>Completion date</b>
<i>Accidental exposure to nuts/peanuts</i>	Students are advised not to share food & to wash hands prior to eating. Students should not try new foods while at school.	Student	Daily
	Staff should be familiar with students who are at risk of anaphylaxis as their names & faces are displayed on the medical board in the main staff room.	All staff	Ongoing
	Teachers are rostered to do yard duty in pairs; one to stay with the student who is unwell and one to send for help.	Teaching staff	Daily
	Teachers are advised to carry a mobile phone on yard duty.	Teaching staff	Daily

<b>AREA</b> <i>Excursions and Sport</i>	<b>ALLERGEN</b> <i>Nuts &amp; Peanuts</i>
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<b>Risk identified</b>	<b>Actions required to minimise the risk</b>	<b>Responsible person</b>	<b>Completion date</b>
<i>Accidental exposure to nuts/peanuts</i>	Student will be identified at the planning stage by the teacher in charge - annotation on roll - photo board in staffroom.	Teaching staff	Prior to the event
	Family will indicate the risk of anaphylaxis on the permission form.	Family	Prior to the event
	Risk assessment of location & transport arrangements. eg. Is food taken or purchased? Is the area remote? What activities are involved? How to contact '000' Other medical conditions. How long would medical help take to arrive? How many Epipens to take / Will designated teacher be in continual contact with student or will mobile phone contact be necessary.	Teacher in charge	Prior to the event
	Teacher to collect the student's Epipen® & ASCIA plan from the general office prior to the excursion.  The school's 'Backup' Epipen may be taken if the area is out of the metropolitan area.	Teacher organising the excursion	Prior to leaving.
	Epipen® trained teacher to accompany student on excursion and remain in close contact.	Teacher	Day of excursion
	The Epipen® must be close & accessible at all times. Keep out of direct sunlight.	Teacher	Day of excursion

	Do not leave EpiPen on the bus.		
	Teacher must carry a mobile phone .	Teacher	Day of excursion
	Teacher must be aware of specific location at all times. This is required if 000/ambulance 'is called.	Teacher	Day of excursion
	Teacher should bring it to the attention of the students that due to some students having serious allergies, certain foods should not be brought along. eg nuts. This cannot be enforced but it may reduce the chances of accidental contact occurring.	Teacher	Prior to excursion
<b>AREA School Camps</b>		<b>ALLERGEN Nuts &amp; Peanuts</b>	
<i>Accidental exposure to nuts/peanuts</i>	Student will be identified at the planning stage by the teacher in charge – annotation on roll / photo board in staff room.	Teacher in charge	Prior to camp
	Family will indicate the risk of anaphylaxis on the permission form.	Family	Prior to camp
	Teacher to liaise with camp regarding food availability & anaphylaxis awareness. Family may be asked to supply some meals/food.	Teacher in charge	Prior to camp
	Risk assessment of location – research the activities / meals / medical help -proximity / mobile phone coverage.	Teacher in charge	Prior to camp
	Teacher to collect the student's EpiPen® & ASCIA plan from the general office prior to the camp.  The school's 'BackUp' EpiPen should also be taken.  If the camp is in a remote location or plane travel is involved, the family will be asked to supply another EpiPen from home ( total of 3 EpiPens)	Teacher in charge   Family	Prior to camp
	EpiPen® trained teacher to accompany student on camp and remain in close contact always. If out of visual contact, phone contact must be possible.	Teacher in charge	During camp period
	The EpiPen® must be close & accessible at all times. Keep out of direct sunlight.	Teacher in charge	During camp period
	Teacher must carry a mobile phone. (or satellite phone )	Teacher in charge	During camp period
	Teacher must be aware of specific location at all times. This is required if 000/ambulance needs to be called.	Teacher in charge	During camp period
	Teacher should bring it to the attention of the students that due to some students having	Teacher in charge	Prior to camp

	serious allergies, certain foods should not be brought along. eg nuts. This cannot be enforced but may reduce the chances of accidental contact occurring.		
<b>AREA</b> Special Events – <i>Sausage Sizzle &amp; Pancake Day</i>			
<b>ALLERGEN</b> <i>Nuts &amp; Peanuts</i>			
<i>Accidental exposure to nuts/peanuts</i>	Staff member responsible for organising the event must display a list of ingredients at the point of purchase. This will enable student to make an informed decision about what they may or may not eat.  This should include oils/ sauces and spreads as well as bread and meat.	Teacher organising the event	Prior to & during the event.
<b>Student's Responsibilities</b>			
Student should :	wash hands prior to eating always read the fine print on packaged foods		
Student should <u>not</u> :	- share foods with others - eat foods if unsure of the ingredients		
<b>Parent's Responsibilities</b>			
Provide the EpiPen® and any other medication to the school. Replace the EpiPen® before its expiry date.			
Provide an ASCIA Action Plan, or copies of the plan to the school that is signed by the student's medical practitioner and has an up to date photograph attached.			
Inform staff of any changes to the student's emergency contact details.			
Assist school staff in planning and preparation for the student prior to school camps, field trips, incursions, excursions, sport days or special events.			
Supply alternative food options for the student when needed.			
Inform staff of any changes to the student's emergency contact details.			
Participate in reviews of the student's Anaphylaxis Management Plan, e.g. when there is a change to the student's condition or at an annual review.			
Notify the college in writing if the EpiPen is no longer required.			

The current ASCIA Plan should be attached to this Anaphylaxis Management Plan.

Copies of the signed Management Plan will be:

- with the student's EpiPen
- with team coordinators
- sent home to family
- kept on file in general office

**Appendix Two:**

**Annual Risk Management Checklist**

School Name:	<b>Strathmore Secondary College</b>
Date of Review:	
Who completed this check list?	Name:
	Position:
Review given to:	Name
	Position
Comments:	

**General Information**

1. How many current students have been diagnosed as being at risk of anaphylaxis, and have been prescribed an Adrenaline Auto injector?	
2. How many of these students carry their Adrenaline Auto injector on their person?	
3. Have any students ever had an allergic reaction requiring medical intervention at school?	<input type="checkbox"/> Yes <input type="checkbox"/> No
a. If Yes, how many times?	
4. Have any students ever had an Anaphylactic Reaction at school?	<input type="checkbox"/> Yes <input type="checkbox"/> No
a. If Yes, how many students?	
b. If Yes, how many times	
5. Has a staff member been required to administer an Adrenaline Auto injector to a student?	<input type="checkbox"/> Yes <input type="checkbox"/> No
a. If Yes, how many times?	
6. 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**

7. 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
8. Are all Individual Anaphylaxis Management Plans reviewed regularly with Parents (at least annually)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9. 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?	

a. During classroom activities, including elective classes	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. In canteens or during lunch or snack times	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. Before and after School, in the school yard and during breaks	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. For special events, such as sports days, class parties and extra-curricular activities	<input type="checkbox"/> Yes <input type="checkbox"/> No
e. For excursions and camps	<input type="checkbox"/> Yes <input type="checkbox"/> No
f. Other	<input type="checkbox"/> Yes <input type="checkbox"/> No
10. 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
a. Where are they kept?	
11. Does the ASCIA Action Plan include a recent photo of the student?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>SECTION 2: Storage and Accessibility of Adrenaline Auto injectors</b>	
12. Where are the student(s) Adrenaline Auto injectors stored?	
13. 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
14. Are the Adrenaline Auto injectors stored at room temperature (not refrigerated)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
15. Is the storage safe?	<input type="checkbox"/> Yes <input type="checkbox"/> No
16. Is the storage unlocked and accessible to School Staff at all times? Comments:	<input type="checkbox"/> Yes <input type="checkbox"/> No
17. Are the Adrenaline Auto injectors easy to find? Comments:	<input type="checkbox"/> Yes <input type="checkbox"/> No
18. 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
19. 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
20. 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

21. 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
22. Has the School signed up to EpiClub or ANA-alert (optional free reminder services)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
23. 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
24. 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
25. Where are these first aid kits located?	
26. 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
27. Is there a register for signing Adrenaline Auto injectors in and out when taken for excursions, camps etc?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>SECTION 3: Prevention Strategies</b>	
28. 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
29. Have you implemented any of the prevention strategies in the Anaphylaxis Guidelines? If not record why?	<input type="checkbox"/> Yes <input type="checkbox"/> No
30. 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
31. 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
<b>SECTION 4: School Management and Emergency Response</b>	
32. 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
33. Do School Staff know when their training needs to be renewed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
34. Have you developed Emergency Response Procedures for when an allergic reaction occurs?	<input type="checkbox"/> Yes <input type="checkbox"/> No
a. In the class room?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. In the school yard?	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. In all School buildings and sites, including gymnasiums and halls?	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. At school camps and excursions?	<input type="checkbox"/> Yes <input type="checkbox"/> No

e. On special event days (such as sports days) conducted, organised or attended by the School?	<input type="checkbox"/> Yes <input type="checkbox"/> No
35. Does your plan include who will call the Ambulance?	<input type="checkbox"/> Yes <input type="checkbox"/> No
36. 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
37. 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
a. The class room?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. The school yard?	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. The sports field?	<input type="checkbox"/> Yes <input type="checkbox"/> No
38. 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
39. Who will make these arrangements during excursions? .....	
40. Who will make these arrangements during camps? .....	
41. Who will make these arrangements during sporting activities? .....	
42. Is there a process for post incident support in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No
43. 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:	
a. The School's Anaphylaxis Management Policy?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. The causes, symptoms and treatment of anaphylaxis?	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. 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
d. 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
e. 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
f. Where the Adrenaline Auto injector(s) for General Use is kept?	<input type="checkbox"/> Yes <input type="checkbox"/> No
g. 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
<b>SECTION 4: Communication Plan</b>	
44. Is there a Communication Plan in place to provide information about anaphylaxis and the School's policies?	

a. To School Staff?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. To students?	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. To Parents?	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. To volunteers?	<input type="checkbox"/> Yes <input type="checkbox"/> No
e. To casual relief staff?	<input type="checkbox"/> Yes <input type="checkbox"/> No
45. Is there a process for distributing this information to the relevant School Staff?	<input type="checkbox"/> Yes <input type="checkbox"/> No
a. What is it?	
46. How this information is kept up to date?	
47. 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
48. What are they?	