

Anaphylaxis Management Policy

Purpose

St Paul's Anglican Grammar School is committed to providing a safe learning environment for students and staff and complying with Ministerial Order No. 706: Anaphylaxis Management in Victorian Schools and School Boarding Premises, and the Department of Education and Training's Anaphylaxis Guidelines (DET Guidelines) as amended by the Department from time to time.

The School recognises that while policies and procedures to reduce the risk of an allergic reaction can be developed and maintained, the School cannot achieve a completely allergen-free environment. It is important to remember that minimisation strategies to help reduce the risk of anaphylaxis is the responsibility of school staff, parents/carers, students and the broader school community.

This policy aims 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 their schooling
- Raise awareness of allergies and the risk of anaphylaxis and the School's Anaphylaxis Management Policy in the school community
- Engage with parent/carers of each student at risk of anaphylaxis when assessing risks and developing risk minimisation strategies for the student
- Ensure that all staff have adequate knowledge of allergies, can recognise an allergic reaction including anaphylaxis and understand the School's policy and guidelines and emergency procedures in responding to anaphylaxis.

Scope

This policy applies to:

- All staff, including casual relief staff and volunteers
- All students who have been diagnosed with anaphylaxis, or who may require emergency treatment for an anaphylactic reaction, and their parents/carers

Policy

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

What is Anaphylaxis?

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

Signs and Symptoms

Mild to moderate allergic reaction can include:

- Swelling of lips, face and eyes
- Hives or welts
- Tingling mouth
- Abdominal pain and/or vomiting (these are signs of a severe allergic reaction in the case of insect allergy).

Anaphylaxis (severe allergic reaction) can include:

- Difficulty breathing or noisy breathing
- Swelling of tongue
- Swelling/tightness in throat
- Difficulty talking and/or a hoarse voice
- Wheezing or persistent cough
- Persistent dizziness or collapse
- Young students may appear pale and floppy
- Abdominal pain and/or vomiting are signs of a severe allergic reaction to insects.

Symptoms usually develop within ten minutes and up to two hours after exposure to an allergen, but can appear within a few minutes.

It is important to note that any student with a diagnosed allergy is at higher risk of their condition progressing to anaphylaxis and should be monitored carefully.

Treatment

Adrenaline given as an adrenaline (epinephrine) autoinjector into the muscle of the outer mid-thigh is the first aid treatment for anaphylaxis.

Individuals diagnosed as being at risk of anaphylaxis are prescribed an adrenaline autoinjector for use in an emergency. These adrenaline autoinjectors are designed so that anyone can use them in an emergency.

Students at risk of allergic reactions, including anaphylaxis, could be singled out or subjected to bullying behaviour. As part of the School's Bullying and Harassment Prevention Policy, the School maintains an environment of respectful relationships and actively develops and implements programs for bullying and harassment prevention. The School provides support for any student who is at risk of being bullied and empowers the school community to recognise and respond appropriately to bullying and harassment and behave as responsible bystanders.

Individual Anaphylaxis Management Plan (including ASCIA Action Plan for Anaphylaxis)

The Principal, through the Head of Enrolments and the Heads of School, will ensure that all students enrolled at the School will be required to detail any allergens that are known to cause anaphylaxis for any student who has been diagnosed by a medical practitioner as being at risk of anaphylaxis. This will form part of the enrolment process.

The parents/carers of all students with diagnosed anaphylaxis will be asked to provide a copy of the student's [ASCIA Action Plan for Anaphylaxis](#) (prepared and signed by a medical or nurse practitioner) prior to commencing at the School. The plan outlines the student's known severe allergies and the emergency procedures to be taken in the event of an allergic reaction.

An [Individual Anaphylaxis Management Plan](#) will be developed by the Principal or their nominee in consultation with the parents/carer and be informed by the ASCIA Action Plan for Anaphylaxis provided by the parent.

An Individual Anaphylaxis Management Plan will be in place as soon as practicable after a student enrolls at the School, and where possible, before the student's first day. Where it is not possible for this plan to be in place prior to the child starting at the School, the Principal or their nominee will ensure that an interim plan is developed in consultation with the parents/carers.

An Individual Anaphylaxis Management Plan must include:

- Information about the student's medical condition that relates to allergy and the potential for anaphylactic reaction, including the type of allergy/allergies the student has and the signs or symptoms the student might exhibit in the event of an allergic reaction (based on a written diagnosis from a medical practitioner)
- Strategies to minimise the risk of exposure to known and notified allergens while the student is under the care or supervision of school staff, for in-school and out-of-school settings including the school yard, at camps and excursions, or at special events conducted, organised or attended by the School
- The name of the person/position responsible for implementing the risk minimisation strategies which have been identified in the Plan
- Information on where the student's medication will be stored
- The student's emergency contact details
- A current ASCIA Action Plan for Anaphylaxis completed by the student's medical practitioner and provided by the parent.

The Individual Anaphylaxis Management Plan must be signed off by the parent/carer and the Principal or their nominee.

The Principal or their nominee will review an Individual Anaphylaxis Management Plan in consultation with the student's parents/carers in each of the following circumstances:

- Annually (at the start of each school year)
- If the student's medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, changes
- As soon as practicable after a student has an anaphylactic reaction at school
- When the student is to participate in an off-site activity, such as camps, excursions or activities or at special events conducted, organised or attended by the School (e.g. class parties, elective subjects and work experience, cultural days, fetes, concerts, events at other schools, competitions or incursions)

The school may also consider reviewing a student's Individual Anaphylaxis Management Plan if there is an identified and significant increase in the student's potential risk of exposure to allergens at school.

It is the responsibility of the parent to:

- Obtain the ASCIA Action Plan for Anaphylaxis from the student's medical practitioner and provide a copy to the School as soon as practicable
- Immediately inform the School in writing if there is a change in their child's medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, and if relevant, provide an updated ASCIA Action Plan for Anaphylaxis
- Provide an up-to-date photo of the student for the ASCIA Action Plan for Anaphylaxis when that Plan is provided to the School and each time it is reviewed
- Provide the School with an Adrenaline Autoinjector that is current and not expired, for their child
- Participate in annual reviews of their child's plan.

A copy of each student's ASCIA Action Plan for Anaphylaxis and Individual Anaphylaxis Management Plan will be kept with the student's labelled Adrenaline Autoinjector (EpiPen or Anapen) and a copy added to the student's electronic profile in Synergetic and Consent2Go.

Students who are at risk of an allergic reaction but not diagnosed with anaphylaxis should obtain an ASCIA Action Plan for Allergic Reactions from the student's medical practitioner and provide a copy to the School. The School will then develop an Individual Allergic Reactions Management Plan. Further information about the management of allergies can be found in the School's Allergy Policy.

Risk Minimisation Strategies

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

The School requests that parents, students and members of staff do not provide foods with known allergens for consumption at school and out-of-school activities. Families will be notified of particular allergens of concern.

Classrooms (including class rotations, specialist and elective studies)

Staff should:

- Ensure they are aware of the identity of any students who are a high risk of having an anaphylactic reaction and be familiar with:
 - the location of the student's ASCIA Action Plan for Anaphylaxis and Individual Anaphylaxis Management Plan
 - the location of the student's individual Adrenaline Autoinjector
 - the location of general use Adrenaline Autoinjectors
 - staff who are trained to deal with an anaphylactic reaction, if they are not
- Liaise with parents/carers about food related activities ahead of time
- Use non-food treats where possible. If food treats are used in class, it is recommended that parents/carers provide a box of safe treats for the student at risk of anaphylaxis
- Never give food from outside sources to a student who is at risk of anaphylaxis without parent/carer permission
- Be aware of the possibility of hidden allergens in cooking, food technology, science and art classes (e.g. egg or milk cartons, empty jars)
- Consider whether to have a student's Adrenaline Autoinjector in class, depending on the speed or severity of previous anaphylactic reactions
- Have regular discussions with students about the importance of washing hands, eating their own food and not sharing food
- Ensure that Food Technology classes for Year 7 – 10 do not use recipes that contain peanuts or tree nuts
- Consider the requirement for nut usage in VCE Food Technology classes, taking into consideration the student composition of the class. If used, all appropriate safety processes and procedures will be strictly followed
- Students with food allergies need special care when doing food technology. An appointment may be required with the student's parents/carers prior to the student undertaking this subject
- Ensure all cooking utensils, preparation dishes, plates, bowls and cutlery are washed and cleaned thoroughly after preparation of food and cooking

Canteen

Canteen staff, including volunteers, should:

- Be briefed about all students at risk of anaphylaxis, prevention strategies in place and the information in their ACSIA Action Plans for Anaphylaxis
- Be aware that each student's Individual Anaphylaxis Management Plan, ACSIA Action Plan for Anaphylaxis and their Adrenaline Autoinjector are easily accessible from Student Services/First Aid
- Be aware of the location of general use Adrenaline Autoinjectors
- Have up to date training in an anaphylaxis management training course as soon as practical
- Have a display of all students at risk of anaphylaxis including student's name, photo and the foods they are allergic to
- Not use, provide nor prepare foods containing nuts and nut products for consumption or use at school
- Be aware of the potential for cross contamination when storing, preparing, handling or displaying food
- Ensure tables and surfaces are wiped clean regularly

- Ensure that suppliers provide ingredient lists for the products supplied. If a supplier does not provide ingredient lists an alternate supplier should be found
- Use non-latex gloves whilst preparing food.

Yard

- Sufficient staff on yard duty must have completed the relevant ASCIA Anaphylaxis eTraining Course and be competent in the administration of an Adrenaline Autoinjector to be able to respond quickly should an anaphylactic reaction occur
- Staff on yard duty will be aware that each student's Individual Anaphylaxis Management Plan, ACSIA Action Plan for Anaphylaxis and their Adrenaline Autoinjector are easily accessible from Student Services/First Aid/Junior School Classrooms
- Staff on yard duty will be aware of the location of general use Adrenaline Autoinjectors
- Staff on yard duty will carry a first aid bag which includes an emergency Adrenaline Autoinjector and a key ring of relevant student photos with the allergen and general use instructions
- All staff must be aware of the School's Emergency Response Procedures and how to notify the School Nurse/First Aid Officer if a student has an anaphylactic reaction in the yard. Staff should not leave the child experiencing the reaction unattended
- Students who are at risk of anaphylaxis from insect stings should always be wearing shoes and should be encouraged to stay away from areas that may have bees, jack-jumper ants or other insects
- Maintenance staff should complete formal inspections to locate any beehives or ant nests, and should keep lawns and clover mowed and outdoor bins covered.

On-Site Special Events

- At least one supervising staff member supervising the special event will have completed the relevant ASCIA Anaphylaxis eTraining Course and be competent in the administration of an Adrenaline Autoinjector to be able to respond quickly should an anaphylactic reaction occur
- Staff supervising the special event will be aware that each student's Individual Anaphylaxis Management Plan, ACSIA Action Plan for Anaphylaxis and their Adrenaline Autoinjector are easily accessible from Student Services/First Aid/Junior School Classrooms
- Staff supervising the special event will be aware of the location of general use Adrenaline Autoinjectors
- All staff should be aware of the most common allergens during on-site events
- The School will liaise with parents/carers about food related activities ahead of time to either develop an alternative food menu or request parents/carers to provide a meal for the student
- Staff should consider using non-food treats where possible. If food treats are used, it is recommended that parents/carers provide a box of safe treats for the student at risk of anaphylaxis
- Party balloons should not be used if a student is allergic to latex

General Off-Site Management

For any off-site excursion, sporting event or overnight camp, parents/carers will be asked to confirm their child's attendance via Consent2Go. As part of this process parents/carers must update or confirm their child's medical information. Where anaphylaxis is indicated, the following procedure will then apply to all off-site activities:

- The Individual Anaphylaxis Management Plan will be reviewed and included in the excursion documentation and the risk documented on the excursion Risk Assessment Register
- All accompanying staff will be briefed on the students with anaphylaxis and be able to identify them by face, prior to the excursion departing
- At least one supervising staff member will have undertaken the relevant ASCIA Anaphylaxis eTraining Course and be competent in the administration of an Adrenaline Autoinjector
- All supervising staff will be made aware of the potential for anaphylaxis, the location of the Individual Anaphylaxis Management Plans, ACSIA Action Plans for Anaphylaxis and the general use Adrenaline Autoinjector.

Off-Site Excursions/Sporting Events

- Staff supervising the excursion/sporting event will take a mobile first aid kit and spare Adrenaline Autoinjectors for general use
- Student Adrenaline Autoinjectors, Individual Anaphylaxis Management Plans and ACSIA Action Plans for Anaphylaxis will be taken on the excursion/sporting event. Students may be asked to carry their own personal Adrenaline Autoinjector especially if they will be separated from staff at any time. Staff still have a duty of care towards the student even if they do carry their own Adrenaline Autoinjector
- The School will liaise with parents/carers in advance to discuss issues that may arise, to develop an alternative food menu or request parents/carers to provide a meal (if required)
- Parents/carers may wish to accompany their child on excursions/sporting events as another strategy for supporting the student
- Staff will consider the potential exposure to allergens when consuming food on buses.

Off-Site Camps and Remote Settings

- Staff supervising the camp/event will take a mobile first aid kit and spare Adrenaline Autoinjectors for general use as well as an emergency mobile phone or satellite phone
- Student Adrenaline Autoinjectors x 2, Individual Anaphylaxis Management Plans and ACSIA Action Plans for Anaphylaxis will be taken on the camp/event. Students may be asked to carry their own personal Adrenaline Autoinjectors especially if they will be separated from staff at any time. Staff still have a duty of care towards the student even if they do carry their own Adrenaline Autoinjector
- Prior to engaging a camp operator's services, the School will make enquiries as to whether it can cater for food and provide a safe environment for anaphylactic students
- Camp sites/accommodation providers will be advised in advance of any students at risk of anaphylaxis. Risk management plans will be developed in consultation with parents/carers and camp managers
- If the School has concerns about the food provided on a camp not being safe for students at risk of anaphylaxis, the School will liaise with parents/carers to develop alternative menus or allow students to bring their own meals
- Camp providers should avoid stocking peanut or tree nut products, including nut spreads. Products that 'may contain' traces of peanuts/tree nuts may be served, but not to the student who is known to be allergic to peanuts/tree nuts
- Staff supervising the camp/event should be clear about their roles and responsibilities in the event of an anaphylactic reaction. Staff should also be familiar with the emergency response procedures that the camp provider has in place
- As part of the emergency procedures developed for the camp, contact details of local emergency services and hospitals should be distributed to supervising staff
- Students with anaphylactic responses to insects should always wear closed shoes when outdoors
- Cooking and art and craft games should not involve the use of known allergens
- Staff will consider the potential exposure to allergens when consuming food on buses.

Volunteers and Casual Relief Teachers (CRTs)

The School will ensure that there are procedures in place to inform volunteers and casual relief teachers of students at risk of anaphylaxis and the location of the Individual Anaphylaxis Management Plans and ACSIA Action Plans for Anaphylaxis. Those procedures will include:

- The inclusion of appropriate Action/Management Plans in CRT folders
- Ensuring that all CRT staff have current Anaphylaxis Management Training
- Keeping a register of this training for CRT staff (as well as regular staff)
- Briefing these staff on the School's emergency response procedures and the location of the students and general use Adrenaline Autoinjectors.

Management and Emergency Response

In the event of an anaphylactic reaction, the emergency response procedures in this policy must be followed, together with the School's general first aid and emergency response procedures and the student's ASCIA Action Plan for Anaphylaxis.

St Paul's Anglican Grammar School maintains a complete and up to date list of students identified as having a medical condition that relates to allergy and the potential for anaphylactic reaction. It is the responsibility of the School Nurse/First Aid Officer to keep this list up to date.

When a student at risk of an anaphylactic reaction is under the care or supervision of the school outside normal class activities, including in the school yard, at camps and excursions, or at special events conducted, organised or attended by the School, the Principal or their nominee will ensure that there are a sufficient number of school staff present who have been appropriately trained in anaphylaxis management.

All teachers of a child with a significant allergen causing anaphylaxis must be familiar with the student's ASCIA Action Plan for Anaphylaxis and Individual Anaphylaxis Management Plan, be familiar with the location and use of the Adrenaline Autoinjectors and have undertaken Anaphylaxis Management Training.

Location of Individual Anaphylaxis Management Plans and ASCIA Action Plans for Anaphylaxis

A copy of each student's Individual Anaphylaxis Management Plan will be stored with their ASCIA Action Plan for Anaphylaxis at Student Services/First Aid. Copies will also be added to the student's electronic profile in Consent2Go and Synergetic.

Alert sheets, Individual Anaphylaxis Management Plans and/or ASCIA Action Plans, including a photo of the child and a summary of his/her condition, will be placed in the following locations, as appropriate:

- In Student Services/First Aid at each campus
- On the walls of the main staffroom of each campus
- On the walls of the appropriate Junior School classrooms
- Key-ring photos and notes in the yard duty first aid bags carried by yard duty staff
- In each of the School Gymnasium staffrooms
- Medical contact details and records carried by excursion staff
- Medical contact details and records carried by camp staff
- Medical contact details and records carried by the staff organising special events.

Location and Storage of Adrenaline Autoinjectors

A student's Adrenaline Autoinjector will be stored in a personal pouch at Student Services/First Aid/Junior School Classrooms or on person alongside the student's ASCIA Action Plan for Anaphylaxis and Individual Anaphylaxis Management Plan. Each personal medical pouch will be easily accessible, clearly labelled with the student's name, year level and allergen. Pouches will be stored away from direct heat and light. The School Nurse/First Aid Officer will be responsible for informing parents/carers when personal adrenaline autoinjectors are due to expire.

Students may choose to keep another extra personal adrenaline autoinjector in their possession, in addition to the one kept at Student Services/First Aid/Junior School Classroom. This is particularly encouraged for bus travellers. This is at the discretion of the student, parent/carer and their doctor.

Each campus will keep at least one Adrenaline Autoinjector for general use on campus at all times. They will be stored in a medical pouch away from direct heat and light, in an unlocked place, inaccessible to students.

In the Event of an Anaphylactic Reaction

If a student experiences an anaphylactic reaction at school, during a school activity or on off-site activities the supervising staff member must:

- Lay the student flat or if breathing is difficult allow them to sit upright. Do not allow the student to stand up or walk, do not relocate them unless they are in further danger (e.g. the anaphylactic reaction was caused by a bee sting and the bee hive is close by)
- **If an EpiPen or Anapen is immediately available**
 - Administer the device making note of the time the EpiPen or Anapen is administered and retain the used device for paramedics
 - Call 000 and request an ambulance
- **If an EpiPen or Anapen is not immediately available, seek assistance**
 - **On-site** – contact Student Services/First Aid and provide the name of the student, alert them to the anaphylaxis diagnoses of the child and the area of school where assistance is required. Request the immediate attendance of the School Nurse/First Aid Officer with the student's Adrenaline Autoinjector and Individual Anaphylaxis Management Plan/ASCIA Action Plan for Anaphylaxis. Alternatively, access the closest general use Adrenaline Autoinjector (see following pages for locations at each campus). If the student's plan is not immediately available, or they appear to be experiencing a first time reaction, continue with the following steps
 - **Off-site** – access the students or the closest general use Adrenaline Autoinjecting device and the student's ASCIA Action Plan for Anaphylaxis contained in the first aid kit carried for the excursion. If the student's plan is not immediately available, or they appear to be experiencing a first time reaction, continue with the following steps
- Administer EpiPen or Anapen. Note the time the EpiPen or Anapen is administered and retain the used device for paramedics
- Call 000 and request an ambulance
- Seek further assistance from nearby staff or students
- Remain with the student and monitor their condition until help arrives. Be calm and reassuring and do not leave student alone
- Notify the student's parent/carer or emergency contact
- If there is no improvement or severe symptoms remain, further adrenaline doses may be administered every 5 minutes, if further adrenaline autoinjectors are available
- Student must be transported to hospital. A staff member is to accompany the student in the ambulance and remain with the student at hospital until a family member or emergency contact arrives
- An incident report is to be completed by the staff member first on the scene
- Debrief with staff and students as required

When an Adrenaline Autoinjector is used an ambulance must be called. Ideally one staff member tends to the student whilst another staff member calls 000 and follows the operator's instructions.

Additional staff should remove any students from the area, ensure the ambulance has a clear path to the student and assist the School Nurse/First Aid Officer including taking notes of actions taken.

Where possible, only staff with training in the administration of the Adrenaline Autoinjector should administer the Adrenaline Autoinjector. However, it is imperative that an Adrenaline Autoinjector is administered as soon as signs of anaphylaxis are recognised. The Adrenaline Autoinjector is designed for general use and in the event of an emergency it may be administered by any person following the instructions in the student's ASCIA Action Plan for Anaphylaxis.

Where a student's Adrenaline Autoinjector has been used, it must be replaced before the student returns to School.

Adrenaline Autoinjectors for General Use

St Paul's Anglican Grammar School will maintain a supply of Adrenaline Autoinjectors for general use as a back-up to those provided by parents/carers of students who have been diagnosed as being at risk of anaphylaxis. The additional Adrenaline Autoinjectors for general use can also be used on other students undiagnosed for anaphylaxis, where they have a first time reaction at school.

The Principal or nominee will ensure that additional Adrenaline Autoinjectors for general use are purchased and that they are replaced prior to the noted expiry dates. The number and type of Adrenaline Autoinjectors for general use will be determined by considering the following:

- The number of students enrolled at the school who have been diagnosed with a medical condition that relates to allergy and the potential anaphylactic reaction
- The weight of the students at risk of anaphylaxis to determine the correct dosage of Adrenaline Autoinjectors to purchase
- The accessibility of Adrenaline Autoinjectors that have been provided by parents
- The availability of a sufficient supply of Adrenaline Autoinjectors for general use in specified locations at the School, including in the school yard and at excursions, camps and special events conducted, organized or attended by the School
- The Adrenaline Autoinjectors have a limited life, and will usually expire within 12-18 months, and will need to be replaced at the School's expense, either at the time of use or expiry, whichever is first.

Adrenaline Autoinjectors for general use are located in each of the following buildings at each campus:

WSS: Student Services, Gymnasium, Food Technology, Staffrooms (in each building) and Yard Duty First Aid Kits

WJS: Sick Bay, Gymnasium, Library/Music Room, 3-6 Building, ELC and Yard Duty First Aid Kits

TSS: Main Staffroom, Gymnasium, Food Technology and Yard Duty First Aid Kits

TJS: Sick Bay, Gymnasium, Library, Music Room, ELC and Yard Duty First Aid Kits

Where possible, the School will use the correct dose of Adrenaline Autoinjector depending on the weight of the student. However, in an emergency if there is no other option available, any device available will be administered to the student.

ASCIA advises that no serious harm is likely to occur from mistakenly administering adrenaline to an individual who is not experiencing anaphylaxis.

Communication Plan

The Principal or nominee is responsible for ensuring that a communication plan is developed to provide information to all school staff, students and parents/carers about anaphylaxis and the School's Anaphylaxis Management Policy.

In addition to the advice stated in this policy the following methods of communication will be employed:

- Parents/carers will be advised, in writing at the start of each year, and at regular intervals throughout the year, that St Paul's Anglican Grammar School is an allergy aware school. The School requests that students, parents/carers and members of the staff do not provide foods with known allergens for shared consumption at school and that students avoid bringing them in school lunches. In the ELC and Junior Schools, they will be asked not to provide known allergens, such as nuts and eggs, in their child's lunch or at other school events.

- The School community is regularly reminded about anaphylaxis and the strategies in place to respond to an anaphylactic reaction during normal school activities and during off-site activities including on excursions, school camps and at special events conducted, organised or attended by the School. Methods of communication used include updates in The Grammarian and MyStPauls, notes to parents, reminders at parent information sessions and at staff briefings. This policy will be available on the St Paul's Anglican Grammar School website or provided upon request.
- All staff, including casual relief staff and volunteers are made aware of this policy and the School's procedures for anaphylaxis management. Casual relief staff and volunteers who are responsible for the care and/or supervision of students who are identified as being at risk of anaphylaxis will also receive a verbal briefing on this policy, their role in responding to an anaphylactic reaction and where required, the identity of students at risk.

The Principal or nominee is also responsible for ensuring that relevant staff are trained and briefed twice a year on the School's Anaphylaxis Management Policy by a staff member with up-to-date anaphylaxis training.

Staff Training

The Principal or their nominee will ensure that the following school staff are appropriately trained in anaphylaxis management:

- School staff who conduct classes attended by students with a medical condition relating to allergy and the potential for anaphylactic reaction
- Staff who are specifically identified by the Principal or nominee who have students at risk of anaphylaxis who are under their care, authority or supervision

Staff who are required to undertake training must have successfully completed:

- An approved face-to-face anaphylaxis management training course in the three years prior; or
- An approved online anaphylaxis management training course in the two years prior

The Principal or their nominee will identify 2 school staff per school or campus to become school anaphylaxis supervisors. These staff may include a School Nurse, First Aid Officer, health and wellbeing staff, or senior teachers. A key role of the supervisors will be to undertake competency checks on all staff that have successfully completed the online training course. These competency checks need to be undertaken by the supervisor within 30 days of a relevant member of the school staff completing the online training course.

To qualify as a school anaphylaxis supervisor, the nominated staff member(s) will need to complete an accredited short course that teaches them how to conduct a competency check on those who have completed the online training course.

In addition to the training outlined above, all staff will be briefed on anaphylaxis management twice per calendar year, with the first briefing to be held at the beginning of the school year and, where possible, before the student's first day at school. These briefings will be facilitated by the School Anaphylaxis Supervisor who has successfully completed an anaphylaxis management training course in the two years prior. The briefing is required for all teaching staff and for non-teaching staff who work with students. Regular volunteers and CRT staff will be invited. An accurate record of who has been trained and the date of the training will be kept.

Each briefing will address:

- The School's Anaphylaxis Management Policy and legal requirements as outlined in the Ministerial Order 706
- The causes, symptoms and treatment of anaphylaxis
- The identities of students with a medical condition that relates to allergy and the potential for anaphylactic reaction, and where their medication is located

- How to use an adrenaline autoinjector, including hands on practice with a trainer adrenaline autoinjector
- The School's general first aid and emergency response procedures
- The location of, and access to, adrenaline autoinjectors that have been provided by parents or purchased by the School for general use

If, for any reason, training and briefing has not occurred on the cycle specified above the Principal or nominee will develop an interim plan in consultation with the parents of any affected student with a medical condition that related to allergy and the potential for anaphylactic reaction, and training will occur as soon as possible thereafter.

Annual Risk Management Checklist

The Principal, through the Heads of School, will complete an [Annual Risk Management Checklist](#) to monitor the School's compliance with Ministerial Order 706, Department Guidelines and legal obligations. The checklist will be completed at the beginning of the school year at each campus of the School.

The annual risk management checklist for anaphylaxis contains questions relating to the following:

- Background information about the school and students identified at risk of anaphylaxis
- Details of individual anaphylaxis management plans and ASCIA Action Plans for Anaphylaxis
- Storage and accessibility of adrenaline autoinjectors (both student-specific adrenaline autoinjectors and adrenaline autoinjectors for general use)
- Strategies to be used by the school to minimise the risk of an anaphylactic reaction
- The School's general first aid and emergency response procedures for when an allergic reaction occurs at all on-site and off-site school activities
- Methods for appropriate communication with school staff, students and parents.

Related Policies and Procedures

- First Aid Policy
- Allergy Policy

Policy History and Schedule

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