



SOPHIA  
MUNDI

Steiner Education and IB World School

# **Anaphylaxis Management Policy**

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## Background

The *Education and Training Reform Act 2006* requires all schools to have an Anaphylaxis Management Policy, incorporating the steps outlined in Ministerial Order 706 (April 2014) to ensure the safety of students at risk of anaphylaxis. Ministerial Order 706 (School Anaphylaxis Management Policy) provides the regulatory framework for the management of anaphylaxis in all Victorian schools. The Sophia Mundi Anaphylaxis Management Policy is reviewed annually.

## Introduction

Anaphylaxis is a severe, rapidly progressive allergic reaction that is potentially life threatening and should always be treated as a medical emergency.

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.

A reaction can develop within minutes of exposure to the allergen, but with awareness, planning and training, a reaction can be treated effectively. Adrenaline given through an auto injector to the muscle of the outer mid-thigh is the most effective First Aid treatment for anaphylaxis.

The key to prevention of anaphylaxis at Sophia Mundi is:

- accurate and up to date knowledge of those students who have been diagnosed at risk;
- awareness of triggers (allergens); and,
- prevention of exposure to these triggers.

Partnerships between the school and parents/guardians are important in ensuring that certain foods or items are kept away from the student while at school.

Sophia Mundi recognises that it is difficult to achieve a completely allergen free environment in a school context.

## Relevant Legislation

Sophia Mundi has updated its policies and procedures relating to Anaphylaxis Management in order to fully comply with Ministerial Order 706 (See Link below) and the associated Guidelines. These policies and procedures will be regularly reviewed and updated to remain compliant with Guidelines published and amended by the Department from time to time.

- *Ministerial Order 706:*  
[https://www.education.vic.gov.au/Documents/school/teachers/health/Anaphylaxis\\_MinisterialOrder706.pdf](https://www.education.vic.gov.au/Documents/school/teachers/health/Anaphylaxis_MinisterialOrder706.pdf)
- *Education and Training Reform Act 2006*
- *Education and Training Reform Regulations 2007*
- *Children's Services and Education Legislation Amendment (Anaphylaxis Management) Act 2008*
- *Health Act 1958* (to be replaced by the *Public Health and Wellbeing Act 2008* from 1 January 2010)
- *Health Records Act 2001*
- *Information Privacy Act 2000*
- *Occupational Health and Safety Act 2004*
- *Occupational Health and Safety Regulations 2007*

## **Policy 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 the student's schooling.
- To raise awareness about allergies and anaphylaxis and Sophia Mundi's Anaphylaxis Management Policy in the school community.
- To actively engage with parents, guardians and carers of each student 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.
- To ensure all relevant staff members are trained to respond appropriately if a student has an anaphylactic reaction.
- To ensure the school complies with Ministerial Order 706 and the associated guidelines related to Anaphylaxis Management in schools as published and amended by The Department of Education and Early Childhood Development.

## **Individual Anaphylaxis Management Plans**

The Principal's delegate (typically the relevant Class Teacher/Guardian), will be responsible for ensuring that an Individual Anaphylaxis Management Plan is developed, in consultation with the student's parent(s)/guardian(s), 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 after the student enrolls, or as soon as practicable after the student attends the School.

The Individual Anaphylaxis Management Plan will set out the following:

- Information about the student's medical condition that relates to the type of allergy or allergies the student has (based on a written diagnosis from a medical practitioner) and the potential for anaphylactic reaction.
- 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 camps and excursions.
- Staff responsible for implementing the strategies.
- Information on where the student's medication will be stored.
- The student's emergency contact details.
- An Australasian Society of Clinical Immunology and Allergy Action Plan for Anaphylaxis (referred to in this document as the ASCIA Action Plan for Anaphylaxis).

The student's individual Anaphylaxis Management Plan will be reviewed by the Principal's delegate, in consultation with her parents/guardians/carers:

- Annually and as applicable (e.g. prior to a school Camp).
- If the student's medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, changes.
- As soon as possible following an anaphylactic reaction.
- When the student is to participate in an off-site activity or special event organised by the school.

It is the responsibility of the parent/guardian to:

- Provide the ASCIA Action Plan for Anaphylaxis
- Ensure that all details (especially contact details) are kept up-to-date and are correct and signed off
- Inform the school if their child's medical condition insofar as it relates to allergy and the potential for anaphylactic reaction changes, and if relevant provide an updated ASCIA Action Plan for Anaphylaxis.
- Provide an in-date Adrenaline auto-injector
- Provide anti-histamine if this is prescribed on the Action Plan.

## **Prevention Strategies**

School staff have a duty of care to protect a student in their care from risks of injury that are reasonably foreseeable. Implementation of appropriate prevention strategies will minimise the risk of incidents of anaphylaxis occurring.

For each student at risk of anaphylaxis, a list of risk minimisation/prevention strategies will be identified, incorporated into the student anaphylaxis management plan and implemented by the School. These strategies cover the following:

- During all classroom related activities
- Between classes and other breaks
- In the Canteen
- Before and after school
- Special events including incursions, festivals, sports days or class parties,
- Excursions

## **School Management and Emergency Response**

### **a) Student Alerts**

All students at risk of anaphylaxis have a 'Medical Alert' pop up appear when a student search is conducted on the School Database – Edumate. The 'Medical Alert' also appears on every class list for these students.

### **b) ASCIA Action Plan for Anaphylaxis**

ASCIA Action Plan for students at risk of anaphylactic reactions can be downloaded from the School Database – Edumate (Student Profile Medical Conditions). Additionally, copies of the ASCIA plans are kept in the Sick Bay, Staff Room and Classroom (primary students only).

For a detailed description of the roles and responsibilities relating to Sophia Mundi's management of anaphylaxis, refer to Appendix 4.

### **c) Parents/guardians are required to supply a student Anaphylaxis Kit which includes:**

- a current Adrenaline Auto-injector, clearly labelled with the student's name
- anti-histamine if prescribed on the Action Plan
- the student's ASCIA Action Plan for Anaphylaxis.

#### **d) Storage and Location of Adrenaline Auto-injectors**

##### **At School**

The student's individual Anaphylaxis Kits are located in the School Sick Bay.

Adrenaline is light and heat sensitive and should be stored in the tube provided at room temperature. Do not refrigerate and protect from light.

##### **On school excursions or special event days away from school**

- Staff download the student ASCIA Action Plan for Anaphylaxis the School Database – Edumate (Student Profile Medical Conditions) or take a copy of the Action Plan from the School Sick Bay or Staffroom. Information must be carried by the staff member and can be in either hardcopy or digital format.
- Years (Prep – 6) - the student's Anaphylaxis Kit is to travel with the student's supervising teacher.
- Years (7 – 12) – the student's Anaphylaxis Kit may travel with the student's supervising teacher or with the student in the student's school bag.

##### **On school camps**

- Outdoor Education Staff download the student ASCIA Action Plan for Anaphylaxis the School Database – Edumate (Student Profile Medical Conditions) or take a copy of the Action Plan from the School Sick Bay or Staffroom. Information must be carried by the staff member and can be in either hardcopy or digital format.
- Years (3 – 6) - the student's Anaphylaxis Kit is to travel with the student's supervising Outdoor Education teacher.
- Years (7 – 12) – the student's Anaphylaxis Kit is to travel with the student's supervising Outdoor Education teacher; or by agreement with the parent/guardian, the student carries their Anaphylaxis Kit with them.
- A general use Adrenaline Auto-injector can be found in the First Aid kit accompanying the supervising staff member when a student with diagnosed anaphylaxis participates in the activity

##### **General use Adrenaline Auto-injectors**

Located around the School for emergency use in the following situations:

- In the event that it is not possible to gain access to the student's own Adrenaline Auto-injector/ in a timely manner.
- In the event that a student exhibits the signs and symptoms of anaphylaxis (and does not carry their own Adrenaline Auto-injector).
- In the event that a second or subsequent dose of adrenaline is required (given only on instruction of Registered Nurse, doctor, paramedic, 000 operator, unless at a remote camp site with appropriate First Aid training).

##### **Locations of general use Adrenaline Auto-injectors at Sophia Mundi**

- School Sick Bay (medications trolley)
- Outdoor Education
  - x 1 in Outdoor Education Office (Academic Staff Room)
  - x 1 carried in the First Aid Kit (Bus Box) with a member of staff when on camp

### **Emergency response to an Anaphylactic Reaction in the classroom, yard, or on excursion:**

In the situation where a student appears to be having an anaphylactic reaction, staff must:

- Commence First Aid, lay the person flat
- Refer to the student's ASCIA Action Plan for Anaphylaxis (if student has been diagnosed with anaphylaxis)
- Administer Adrenaline Auto-injector
- Immediately call an ambulance (000)
- Contact the student's parent(s)/guardian(s) or, if unavailable, the student's emergency contact.

### **Communication Plan**

Information regarding students with anaphylaxis is communicated in the following ways:

- The Principal will identify known anaphylactic students at a staff briefing at the beginning of each Term. The Principal will repeat this briefing with any new staff who commence throughout the course of the Term.
- ASCIA Action Plans for Anaphylaxis and Individual Anaphylaxis Management Plans are available on the School Database – Edumate (Student Profile Medical Conditions).
- Student medical alerts are available on the School Database – Edumate (Student Profile Medical Conditions).
- Emergency/casual teaching staff are provided with a class list which will include any relevant medical alerts including life threatening allergy. This list will be provided by the Administration/Human Resources Manager.
- Volunteers will be briefed by their supervisor about any students of concern in their care (including students at risk of anaphylaxis). Volunteers are not to be left in sole charge of a group of students; they must always have access to Sophia Mundi staff and support in case of an emergency.

### **Staff Training**

All Sophia Mundi staff will participate in briefing twice per calendar year. The first to occur at the beginning of the year by an approved external Registered Training Organisation. The second will be delivered by a staff member at a full staff meeting. These briefings will include:

- The School Anaphylaxis Management Policy
- The causes, symptoms and treatment of anaphylaxis
- The identities of students diagnosed as at risk of anaphylaxis and where their medication is located
- How to use an adrenaline auto-injecting device (Adrenaline Auto-injector)
- The School First Aid and Calling an Ambulance procedures
- The location of Adrenaline Auto-injectors that have been provided by parents/guardians and are not carried by the student
- The location of Adrenaline Auto-injectors for general use

Staff who are absent at the beginning of the year training, will be required to attend an external training session with a Registered Training Organisation and provide evidence of successful completion.

The following staff will undertake formal training:

- All teaching staff
- Administration staff who have responsibility for students with a medical condition that relates to allergy and the potential for anaphylactic reaction
- Any further staff as determined by the Principal

Training will be one of the following two options:

1. an Anaphylaxis Management Training Course in the three years prior (22099VIC, 103113NAT)
2. an online anaphylaxis management training course in the two years prior (ASCIA e-training for Victorian Schools and verified by staff that have completed Course in Verifying the Correct Use of Adrenaline Auto-injector Devices 22303VIC, valid for three years).

A register of staff qualifications and expiry dates will be maintained by the Administration Manager on the School Database – Edumate (Qualifications).

In the event that the briefing or training has not occurred as required, the Principal will ensure an interim plan is put in place to provide appropriate Duty of Care for all students. A plan for briefing and training to occur as soon as possible will be put in place.

### **Annual Risk Management Checklist**

The Principal's (or the Principal's delegate), will monitor compliance with Ministerial Order 706 by completing an Annual Risk Management Checklist (Refer to Appendix 3) published by the Victorian Department of Education and Early Childhood Development). This annual checklist will be conducted before the end of Term 1 and copies will be kept by the Administration Manager.



## APPENDIX 1: Student Individual Anaphylaxis Management Plan Template

*Individual Anaphylaxis Management Plans are completed by on the basis of information from the student's medical practitioner (ASCIA Action Plan for Anaphylaxis) provided by the parent/guardian carer.*






*It is the parent/guardian/carer's responsibility to provide the School with a copy of the student's ASCIA Action Plan for Anaphylaxis containing the emergency procedures plan (signed by the student's medical practitioner) and to inform the School if their child's medical condition changes.*

*Once an Individual Anaphylaxis Management Plan is complete, the plan stored on the School Database – Edumate (Student Profile Medical Conditions) for staff to access.*

### **Details included in the plan:**

<b>School:</b>	
<b>Student's name:</b>	
<b>Date of birth:</b>	
<b>Severely allergic to:</b>	
<b>Other health conditions are documented:</b>	
<b>Medication at school:</b>	
<b>Emergency Contact Details (Parent / Guardian):</b>	
<b>Emergency Contact Details (Alternate):</b>	
<b>Medical Practitioner Contact Details:</b>	
<b>Emergency Care Storage and Plans:</b>	
<b>Environment— schoolyard, canteen, <del>classrooms</del>, offsite activities, excursions, camps</b>	
In each of the above areas, the risks are identified, and actions required to minimise the risk are documented:	

## APPENDIX 2: ASCIA Action Plan for Anaphylaxis template

 <p>ascia australian society of clinical immunology and allergy www.allergy.org.au</p>	<h1 style="text-align: center;">ACTION PLAN FOR Anaphylaxis</h1>
<p>Name: _____ Date of birth: _____</p>	<p style="text-align: right;"><b>For use with EpiPen® adrenaline autoinjectors</b></p>
<div style="border: 1px solid black; height: 100px; width: 100%; text-align: center; line-height: 100px;">Photo</div>	<h3 style="background-color: #0056b3; color: white; padding: 5px;">MILD TO MODERATE ALLERGIC REACTION</h3> <ul style="list-style-type: none"> <li>Swelling of lips, face, eyes</li> <li>Hives or welts</li> <li>Tingling mouth</li> <li>Abdominal pain, vomiting (these are signs of anaphylaxis for insect allergy)</li> </ul>
<p>Confirmed allergens: _____</p>	<h3 style="background-color: #0056b3; color: white; padding: 5px;">ACTION FOR MILD TO MODERATE ALLERGIC REACTION</h3> <ul style="list-style-type: none"> <li>For insect allergy, flick out sting if visible. Do not remove ticks.</li> <li>Stay with person and call for help.</li> <li>Locate EpiPen® or EpiPen® Jr adrenaline autoinjector.</li> <li>Give other medications (if prescribed).....</li> <li>Phone family/emergency contact.</li> </ul>
<p>Family/emergency contact name(s): _____</p> <p>Work Ph: _____ Home Ph: _____ Mobile Ph: _____</p>	<div style="border: 1px solid red; padding: 10px; text-align: center; color: red;"> <b>Mild to moderate allergic reactions may not always occur before anaphylaxis</b> </div> <p style="text-align: center;"><b>Watch for <u>ANY ONE</u> of the following signs of anaphylaxis</b></p>
<p>Plan prepared by: _____ Dr: _____</p> <p><small>I hereby authorise medications specified on this plan to be administered according to the plan.</small></p> <p>Signed: </p> <p>Date: _____ Date of next review: _____</p>	<h3 style="background-color: #ff0000; color: white; padding: 5px;">ANAPHYLAXIS (SEVERE ALLERGIC REACTION)</h3> <ul style="list-style-type: none"> <li>Difficult/noisy breathing</li> <li>Swelling of tongue</li> <li>Swelling/tightness in throat</li> <li>Difficulty talking and/or hoarse voice</li> <li>Wheeze or persistent cough</li> <li>Persistent dizziness or collapse</li> <li>Pale and floppy (young children)</li> </ul>
<h3 style="color: #0056b3;">How to give EpiPen®</h3> <div style="display: flex; align-items: flex-start;"> <div style="flex: 1;">  <p><b>1</b> Form fist around EpiPen® and PULL OFF BLUE SAFETY RELEASE.</p> </div> <div style="flex: 1;">  <p><b>2</b> PLACE ORANGE END against outer mid-thigh (with or without clothing).</p> </div> <div style="flex: 1;">  <p><b>3</b> PUSH DOWN HARD until a click is heard or felt and hold in place for 10 seconds. REMOVE EpiPen®. Massage injection site for 10 seconds.</p> </div> </div> <p><small>Instructions are also on the device label and at: <a href="http://www.allergy.org.au/anaphylaxis">www.allergy.org.au/anaphylaxis</a></small></p>	<h3 style="background-color: #ff0000; color: white; padding: 5px;">ACTION FOR ANAPHYLAXIS</h3> <ol style="list-style-type: none"> <li><b>1 Lay person flat. Do not allow them to stand or walk.</b> If breathing is difficult allow them to sit.</li> <li><b>2 Give EpiPen® or EpiPen® Jr adrenaline autoinjector.</b></li> <li><b>3 Phone ambulance*: 000 (AU) or 111 (NZ).</b></li> <li><b>4 Phone family/emergency contact.</b></li> <li><b>5 Further adrenaline doses may be given if no response after 5 minutes, if another adrenaline autoinjector is available.</b></li> </ol> <p style="color: red;"><b>If in doubt, give adrenaline autoinjector</b></p> <p><b>Commence CPR at any time if person is unresponsive and not breathing normally.</b></p> <p><small>EpiPen® is generally prescribed for adults and children over 5 years. EpiPen® Jr is generally prescribed for children aged 1-5 years. *Medical observation in hospital for at least 4 hours is recommended after anaphylaxis.</small></p> <div style="border: 1px solid red; padding: 5px; margin-top: 10px;"> <h4 style="margin: 0;">IF UNCERTAIN WHETHER IT IS ANAPHYLAXIS OR ASTHMA</h4> <ul style="list-style-type: none"> <li>Give adrenaline autoinjector FIRST, then asthma reliever.</li> <li>If someone with known food or insect allergy suddenly develops severe asthma like symptoms, give adrenaline autoinjector FIRST, then asthma reliever.</li> </ul> <p>Asthma: Y <input type="checkbox"/> N <input type="checkbox"/> Medication: _____</p> </div>

© ASCIA 2015. This plan was developed as a medical document that can only be completed and signed by the patient's treating medical doctor and cannot be altered without their permission.

### APPENDIX 3: Annual Risk Management Checklist (reviewed at the start of each year)

*This checklist is produced by the Department of Education and Training (VIC) for use by schools to monitor compliance with Ministerial Order 706*

<b>School Name:</b>		
<b>Date of Review:</b>		
<b>Who completed this checklist?</b>	Name:	
	Position:	
<b>Review given to:</b>	Name	
	Position	
<b>Comments:</b>		
<b>General information</b>		
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="radio"/> Yes <input type="radio"/> No	
a. If Yes, how many times?		
4. Have any students ever had an anaphylactic reaction at school?	<input type="radio"/> Yes <input type="radio"/> 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="radio"/> Yes <input type="radio"/> No	
a. If Yes, how many times?		
6. If your school is a government school, was every incident in which a student suffered an anaphylactic reaction reported via the Incident Reporting and Information System (IRIS)?	<input type="radio"/> Yes <input type="radio"/> No	

SECTION 1: Training	
7. 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 approved Anaphylaxis Management Training Course, either: <ul style="list-style-type: none"> <li>• ASCIA e-training within the last 2 years, or</li> <li>• accredited face to face training (22300VIC or 10313NAT) within the last 3 years?</li> </ul>	<input type="radio"/> Yes <input type="radio"/> No
8. Does your school conduct twice yearly briefings annually? If no, why not as this is a requirement for school registration?	<input type="radio"/> Yes <input type="radio"/> No
9. Do all school staff participate in a twice-yearly briefing? If no, why as this is a requirement for school registration?	<input type="radio"/> Yes <input type="radio"/> No
10. Has your school trained a minimum of 2 school staff (School Anaphylaxis Supervisors) to conduct competency checks of Adrenaline Auto-injectors (EpiPen®)?	<input type="radio"/> Yes <input type="radio"/> No
11. Are your school staff being assessed for their competency in using Adrenaline Auto-injectors (EpiPen®) within 30 day of completing the ASCIA Anaphylaxis e-training for Victorian Schools?	<input type="radio"/> Yes <input type="radio"/> No
SECTION 2: Individual Anaphylaxis Management Plans	
12. 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 which includes an ASCIA Action Plan for Anaphylaxis completed and signed by a prescribed medical practitioner?	<input type="radio"/> Yes <input type="radio"/> No
13. Are all Individual Anaphylaxis Management Plans reviewed regularly with parents/guardians (at least annually)?	<input type="radio"/> Yes <input type="radio"/> No
14. 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="radio"/> Yes <input type="radio"/> No
b. In canteens or during lunch or snack times	<input type="radio"/> Yes <input type="radio"/> No
c. Before and after school, in the school yard and during breaks	<input type="radio"/> Yes <input type="radio"/> No
d. For special events, such as sports days, class parties and extra-curricular activities	<input type="radio"/> Yes <input type="radio"/> No
e. For excursions and camps	<input type="radio"/> Yes <input type="radio"/> No
f. Other	<input type="radio"/> Yes <input type="radio"/> No
15. Do all students who carry an Adrenaline Auto-injector on their person have a copy of their ASCIA Action Plan for Anaphylaxis kept at the school (provided by the parent/guardian)?	<input type="radio"/> Yes <input type="radio"/> No
a. Where are the Action Plans kept?	
16. Does the ASCIA Action Plan for Anaphylaxis include a recent photo of the student?	<input type="radio"/> Yes <input type="radio"/> No
17. Have the Individual Management Plans (for students at risk of anaphylaxis) been reviewed prior to any off site activities (such as sport, camps or special events), and where appropriate reviewed in consultation with the student's parent(s)/guardian(s)?	<input type="radio"/> Yes <input type="radio"/> No

### SECTION 3: Storage and accessibility of Adrenaline Auto-injectors

18. Where are the student(s) Adrenaline Auto-injectors stored?	
19. Do all school staff know where the school's Adrenaline Auto-injectors for general use are stored?	<input type="radio"/> Yes <input type="radio"/> No
20. Are the Adrenaline Auto-injectors stored at room temperature (not refrigerated)?	<input type="radio"/> Yes <input type="radio"/> No
21. Is the storage safe?	<input type="radio"/> Yes <input type="radio"/> No
22. Is the storage unlocked and accessible to school staff at all times?  Comments:	<input type="radio"/> Yes <input type="radio"/> No
23. Are the Adrenaline Auto-injectors easy to find?  Comments:	<input type="radio"/> Yes <input type="radio"/> No
24. Is a copy of student's individual ASCIA Action Plan for Anaphylaxis kept together with the student's Adrenaline Auto-injector?	<input type="radio"/> Yes <input type="radio"/> No
25. Are the Adrenaline Auto-injectors and Individual Anaphylaxis Management Plans (including the ASCIA Action Plans) clearly labelled with the student's names?	<input type="radio"/> Yes <input type="radio"/> No
26. Has someone been designated to check the Adrenaline Auto-injector expiry dates on a regular basis?  Who? .....	<input type="radio"/> Yes <input type="radio"/> No
27. Are there Adrenaline Auto-injectors which are currently in the possession of the school and which have expired?	<input type="radio"/> Yes <input type="radio"/> No
28. Has the school signed up to EpiClub or ANA-alert (optional free reminder services)?	<input type="radio"/> Yes <input type="radio"/> No
29. Do all school staff know where the Adrenaline Auto-injectors, the ASCIA Action Plans for Anaphylaxis and the Individual Anaphylaxis Management Plans are stored?	<input type="radio"/> Yes <input type="radio"/> No
30. 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="radio"/> Yes <input type="radio"/> No
31. Where are these First Aid kits located?     Do staff know where they are located?	<input type="radio"/> Yes <input type="radio"/> No
32. Is the Adrenaline Auto-injector for general use clearly labelled as the 'General Use' Adrenaline Auto-injector?	<input type="radio"/> Yes <input type="radio"/> No
33. Is there a register for signing Adrenaline Auto-injectors in and out when taken for excursions, camps etc?	<input type="radio"/> Yes <input type="radio"/> No

SECTION 4: Prevention strategies	
34. 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="radio"/> Yes <input type="radio"/> No
35. Have you implemented any of the prevention strategies in the Anaphylaxis Guidelines? If not record why not as this is a requirement for school registration?	<input type="radio"/> Yes <input type="radio"/> No
36. Are there always sufficient school staff members on yard duty who have current Anaphylaxis Management Training?	<input type="radio"/> Yes <input type="radio"/> No
SECTION 5: School management and emergency response	
37. Does the school have procedures for emergency responses to anaphylactic reactions? Are they clearly documented and communicated to all staff?	<input type="radio"/> Yes <input type="radio"/> No
38. Do school staff know when their training needs to be renewed?	<input type="radio"/> Yes <input type="radio"/> No
39. Have you developed Emergency Response Procedures for when an allergic reaction occurs?	<input type="radio"/> Yes <input type="radio"/> No
a. In the class room?	<input type="radio"/> Yes <input type="radio"/> No
b. In the school yard?	<input type="radio"/> Yes <input type="radio"/> No
c. In all school buildings and sites, including gymnasiums and halls?	<input type="radio"/> Yes <input type="radio"/> No
d. At school camps and excursions?	<input type="radio"/> Yes <input type="radio"/> No
e. On special event days (such as sports days) conducted, organised or attended by the school?	<input type="radio"/> Yes <input type="radio"/> No
40. Does your plan include who will call the ambulance?	<input type="radio"/> Yes <input type="radio"/> No
41. Is there a designated person who will be sent to collect the student's Adrenaline Auto-injector and individual ASCIA Action Plan for Anaphylaxis?	<input type="radio"/> Yes <input type="radio"/> No
42. Have you checked how long it will take to get to the Adrenaline Auto-injector and the individual ASCIA Action Plan for Anaphylaxis to a student from various areas of the school including:	<input type="radio"/> Yes <input type="radio"/> No
a. The class room?	<input type="radio"/> Yes <input type="radio"/> No
b. The school yard?	<input type="radio"/> Yes <input type="radio"/> No
c. The sports field?	<input type="radio"/> Yes <input type="radio"/> No
43. 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="radio"/> Yes <input type="radio"/> No
44. Who will make these arrangements during excursions?	
45. Who will make these arrangements during camps?	
46. Who will make these arrangements during sporting activities?	

47. Is there a process for post incident support in place?	<input type="radio"/> Yes <input type="radio"/> No
48. Have all school staff who conduct classes that students with a medical condition that relates to allergy and the potential for an anaphylactic reaction attend, and any other staff identified by the principal, been briefed on:	
a. The school's Anaphylaxis Management Policy?	<input type="radio"/> Yes <input type="radio"/> No
b. The causes, symptoms and treatment of anaphylaxis?	<input type="radio"/> Yes <input type="radio"/> 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="radio"/> Yes <input type="radio"/> No
d. How to use an Adrenaline Auto-injector, including hands on practise with a trainer Adrenaline Auto-injector?	<input type="radio"/> Yes <input type="radio"/> No
e. The school's general First Aid and emergency response procedures for all in-school and out-of-school environments?	<input type="radio"/> Yes <input type="radio"/> No
f. Where the Adrenaline Auto-injector(s) for general use is kept?	<input type="radio"/> Yes <input type="radio"/> No
g. Where the Adrenaline Auto-injectors for individual students are located including if they carry it on their person?	<input type="radio"/> Yes <input type="radio"/> No
<b>SECTION 6: Communication Plan</b>	
49. Is there a Communication Plan in place to provide information about anaphylaxis and the school's policies?	
a. To school staff?	<input type="radio"/> Yes <input type="radio"/> No
b. To students?	<input type="radio"/> Yes <input type="radio"/> No
c. To parents/guardians?	<input type="radio"/> Yes <input type="radio"/> No
d. To volunteers?	<input type="radio"/> Yes <input type="radio"/> No
e. To casual relief staff?	<input type="radio"/> Yes <input type="radio"/> No
50. Is there a process for distributing this information to the relevant school staff?	<input type="radio"/> Yes <input type="radio"/> No
a. What is it?	
51. How is this information kept up to date?	
52. Are there strategies in place to increase awareness about severe allergies among students for all in-school and out-of-school environments?	<input type="radio"/> Yes <input type="radio"/> No
53. What are they?	

## APPENDIX 4: Roles & Responsibilities

	Role or Responsibility	Nominee(s)
1.	Review of the School's Anaphylaxis Management Policy.	Principal
2.	Actively seek information to identify students with severe life-threatening allergies or those who have been diagnosed as at risk of anaphylaxis, either at enrolment or at the time of diagnosis (whichever is earlier).	Registrar
3.	Request that parents/carers provide an ASCIA Action Plan for Anaphylaxis, which has been signed by the student's medical practitioner and that contains an up-to-date photograph of the student.	Registrar
4.	Communicate with parents/carers to develop an Individual Anaphylaxis Management Plan for the student. This includes documenting practical strategies for in-school and out-of-school settings to minimise the risk of exposure to allergens, and nominating staff who are responsible for their implementation. The risk minimisation plan should be customised to the particular student, assessing and participating with school activities (e.g. during home economics classes), at external events (e.g. school events, sports, camps, excursions and exchanges).	Relevant Class Guardian
5.	Ensure that parents/carers provide the school with the student's Auto-injector and that it is 'in date'. Parents are required to provide two (2) Auto-injector's for overnight trips/tours/exchanges.	Registrar/ School Administration Staff Outdoor Education Staff Exchange Co-ordinator
6.	Develop a communication plan to provide information to all staff, students and volunteers about anaphylaxis and the School's Anaphylaxis Management Policy.	Principal/ Registrar/ Administration Manager
7.	Ensure there are procedures in place for providing volunteers and casual relief staff with the following information:  The School's Anaphylaxis Management Policy, the causes, symptoms and treatment of anaphylaxis, the identities of students at risk of anaphylaxis, their role in responding to an anaphylactic reaction for a student in their care, the location of the students' Individual Anaphylaxis Action Plans, the location of Adrenaline Auto-injectors for individual students and for general use.	Principal/ Registrar/ Administration Manager
8.	Ensure that all school staff are briefed at least twice a year in accordance with Ministerial Order 706 by a trained health professional who has up-to-date anaphylaxis management training on: <ul style="list-style-type: none"> <li>the School Anaphylaxis Management Policy</li> <li>the causes, symptoms and treatment of anaphylaxis</li> <li>the identities of students diagnosed at risk and location of their medication</li> <li>how to use an Adrenaline auto-injecting device, including hands-on practice with a trainer Adrenaline auto-injecting device (which does not contain adrenaline)</li> <li>the Schools First Aid and emergency procedures</li> </ul>	Administration Manager
9.	Allocate time during Staff Meetings or Staff Conference Days to discuss, practice and review the School's Anaphylaxis Management Policy. Practice using the trainer Adrenaline Auto-injectors as a group.	Principal/ Administration Manager
10.	Encourage ongoing communication between parents/carers and staff about the current status of the student's allergies, the school's policies and their implementation.	Principal/ Registrar/ Administration Manager



	<b>Role or Responsibility</b>	<b>Nominee(s)</b>
11.	Ensure that the student's Anaphylaxis Management Plan is reviewed in consultation with parents annually and/or when <ul style="list-style-type: none"> <li>the student's medical condition changes</li> <li>immediately after a student has an anaphylactic reaction</li> </ul>	Registrar
12.	Ensure the Annual Risk Management Checklist is completed annually.	Principal/ Administration Manager
13.	Purchase and maintain an appropriate number of Adrenaline Auto-injector devices for 'general use' to be part of the School's First Aid kits.	Administration Manager/Outdoor Education Staff
14.	When using an external food provider ensure that the provider can demonstrate satisfactory training in the area of anaphylaxis and major food allergens that trigger anaphylaxis.	Administration Manager
15.	Ensure staff commencing employment at the School have the correct qualifications and expiry dates with regard to anaphylaxis management accreditation	Administration Manager
16.	Maintain a register of staff qualifications and expiry dates with regard to anaphylaxis management accreditation	Administration Manager

## All Staff

	<b>Role or Responsibility</b>
1.	Know and understand the School's Anaphylaxis Management Policy.
2.	Know the identity of students whom they are responsible for who are at risk of anaphylaxis.
3.	Understand the causes, symptoms, and treatment of anaphylaxis.
4.	Obtain regular training in how to recognize and respond to an anaphylactic reaction, including administering an Adrenaline Auto-injector.
5.	(1) Know how and (2) be able to access a copy of each student's ASCIA Action Plan for Anaphylaxis, and follow it in the event of an allergic reaction.
6.	Know the School's First Aid emergency procedures and their role in relation to responding to an Anaphylactic reaction.
7.	Know and follow the prevention and risk minimisation strategies in a student's Individual Anaphylaxis Management Plan.
8.	Plan ahead for special class activities that may have a heightened risk relating to anaphylaxis. For example: <ul style="list-style-type: none"> <li>cooking, art and science classes</li> <li>special occasions (e.g. excursions, incursions, sport days, festivals, celebrations)</li> <li>School camps</li> </ul> <p>Work with parents/carer's to provide appropriate food for their child if the food the school/class is providing may present a risk.</p>
9	Avoid the use of food treats in class or as rewards, as these may contain hidden allergens. Work with parents/carer's to provide appropriate treats for anaphylactic students if necessary
10.	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.
11.	Be aware of the risk of cross-contamination when preparing, handling and displaying food.
12.	Make sure that tables and surfaces are wiped down regularly and that students wash their hands after handling food.
13.	Raise student awareness about severe allergies and the importance of their role in fostering a school environment that is safe and supportive for their peers.

## Parents

	Role or Responsibility
1.	Inform the School, either at enrolment or diagnosis, of the student's allergies, and whether the student has been diagnosed at the time as being at risk of anaphylaxis.
2.	<p>Obtain and provide to the School an ASCIA Action Plan for Anaphylaxis, signed by the student's medical practitioner that details:</p> <ul style="list-style-type: none"> <li>• their condition;</li> <li>• any medications to be administered;</li> <li>• any other emergency procedures; and,</li> <li>• includes an up to date photo of the student.</li> </ul> <p>Inform the School of any changes to the student's medical condition and if necessary, provide an updated ASCIA Action Plan for Anaphylaxis.</p>
3.	Communicate with the relevant Class Guardian to develop the student's Individual Anaphylaxis Management Plan.
4.	Provide the Adrenaline Auto-injector and any other medications specified in the ASCIA Action Plan for Anaphylaxis to the school.
5.	Replace the Adrenaline Auto-injector and any other medication as needed and before their expiry date.
6.	Assist school staff in planning and preparation for the student prior to any incursions, excursions or special events (e.g. class celebrations, festivals or sport days). Supply alternative food options for the student when required.
7.	Promptly update any changes to the student's emergency contact details either via the Edumate Parent Portal or in writing to the School Registrar.
8.	<p>Participate in reviews of the student's Individual Anaphylaxis Management Plan:</p> <ul style="list-style-type: none"> <li>• when there is a change to the student's condition</li> <li>• immediately after the student has an anaphylactic reaction at school or school related event</li> <li>• at its annual review.</li> </ul>

## APPENDIX 5: Glossary of Terms

<b>Adrenaline Auto-injector</b>	Any Adrenaline Auto-injector device that contains adrenaline and is used for anaphylactic reactions, such as EpiPen®, EpiPen®Jr, Anapen® or Anapen®Jr
<b>Adrenaline Auto-injector for general use</b>	A 'backup' or 'unassigned' Adrenaline Auto-injector that some schools may choose to purchase.
<b>Anaphylaxis Management Plan</b>	An individual plan for each student at risk of anaphylaxis, developed in consultation with the student's parents/guardians/carers, which must include an ASCIA Action Plan for Anaphylaxis (device specific) signed by their medical practitioner.
<b>ASCIA</b>	Australasian Society for Clinical Immunology and Allergy
<b>ASCIA Action Plan for Anaphylaxis</b>	This is a nationally recognised action plan for anaphylaxis management developed by the Australasian Society for Clinical Immunology and Allergy (ASCIA), the peak body of immunologists and allergists in Australia. These plans are device-specific; that is, they list the student's prescribed Adrenaline Auto-injector (e.g. EpiPen® or EpiPen®Jr).
<b>Ministerial Order 706 – School Anaphylaxis Management Policy</b>	Ministerial Order 706 came into effect on 22 April 2014 and replaces Ministerial Order 90 which had been in effect since July 2007. This Order outlines the steps a school must take to ensure the safety of students at risk of anaphylaxis. These requirements are a minimum standard for school registration. All registered schools in Victoria must by law have an Anaphylaxis Management Policy.
<b>Student's Emergency Procedure Plan</b>	ASCIA Action Plan for Anaphylaxis – which must be signed by the student's medical practitioner.