

Anaphylaxis Management Policy

Purpose:

The purpose of this policy is to ensure that Advance College of Education provides a safe and supportive environment for students diagnosed as being at risk of anaphylaxis and to outline the processes and procedures implemented to minimise risks and respond appropriately to an anaphylactic reaction.

This policy has been developed to ensure compliance with:

- Ministerial Order 706 – *Anaphylaxis Management in Victorian Schools*
- Victorian Department of Education Anaphylaxis Guidelines
- Education and Training Reform Act 2006 (Vic)
- Requirements applicable to Victorian independent schools registered with Victorian Registration and Qualifications Authority
- Governance and operational expectations relevant to schools associated with Independent Schools Victoria

This policy applies to all school environments and all school-related activities, including onsite learning, offsite activities, camps, excursions, sporting events, work experience, transport and special events organised, attended or approved by the College.

Policy Statement:

Advance College of Education recognises that anaphylaxis is a severe, rapidly progressive allergic reaction that is Advance College of Education will fully comply with Ministerial Order 706 (Anaphylaxis Management in Victorian Schools prescribes specific matters that schools applying for registration and registered schools in Victoria must contain in their anaphylaxis management policy for the purposes of section 4.3.19 (c) of the ACT) and the associated guidelines published by the Department of Education and Training.

The College is committed to:

- providing, as far as practicable, a safe and supportive environment in which students at risk of anaphylaxis can participate equally in all aspects of school life
- reducing the risk of accidental exposure to allergens
- ensuring staff are appropriately trained in anaphylaxis prevention, recognition and emergency response procedures
- ensuring effective communication processes are in place across the College community
- developing and maintaining Individual Anaphylaxis Management Plans for students diagnosed as being at risk of anaphylaxis
- ensuring all reasonable steps are taken to meet the College's duty of care obligations

The College acknowledges that while risk minimisation strategies can significantly reduce the likelihood of exposure to allergens, it is not possible to achieve a completely allergen-free environment.

Scope:

This policy applies to:

- all staff, including casual relief staff and contractors
- volunteers and visitors involved in school activities
- all students enrolled at the College
- parents/guardians of students diagnosed as being at risk of anaphylaxis
- all College activities and environments

Definitions:

Anaphylaxis

A severe, rapidly progressive allergic reaction that is potentially life-threatening.

Common Allergens

Common allergens include, but are not limited to:

- peanuts
- tree nuts
- eggs
- cow's milk
- fish
- shellfish
- wheat
- soy
- sesame
- latex
- insect stings and bites
- medications

Mild to Moderate Allergic Reaction

Symptoms may include:

- swelling of the lips, face or eyes
- hives or welts
- tingling mouth
- abdominal pain
- vomiting
- Signs of Anaphylaxis
- Symptoms may include:
 - difficult or noisy breathing
 - swelling of the tongue
 - swelling or tightness in the throat
 - difficulty talking or hoarse voice
 - wheeze or persistent cough
 - persistent dizziness or collapse
 - pale and floppy appearance in young children
 - abdominal pain and/or vomiting following an insect sting

ASCIA

Australasian Society of Clinical Immunology and Allergy.

ASCIA Action Plan for Anaphylaxis

A medically completed emergency response plan outlining a student's allergens, symptoms and emergency treatment.

Adrenaline Autoinjector

A prescribed device used to administer adrenaline in an emergency. Devices may include:

- EpiPen®
- Anapen®
- Jext®
- Neffy®

Individual Anaphylaxis Management Plan (IAMP)

A College-developed plan prepared in consultation with parents/guardians for each student diagnosed as being at risk of anaphylaxis.

Duty of Care:

ACE has a common law duty of care to put in place strategies to manage students at risk of anaphylaxis while they are at the College and engaged in school-related activities. When a student is diagnosed as being at risk of anaphylaxis, the exercise of the College's duty of care requires the development of an Individual Anaphylaxis Management Plan (that includes an ASCIA Action plan for Anaphylaxis which has been developed by their medical practitioner and provided to the College by the student's parent/guardian) and risk minimisation strategies. The key to prevention of anaphylaxis in school 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 College recognises that while policies and procedures to reduce the risk of an allergic reaction can be developed and maintained, they cannot achieve a completely allergen free environment. Minimisation strategies to help reduce the risk of anaphylaxis are everyone's responsibility, including the Principal, all College staff, parents/guardians, students and the broader College community. It is critical that all staff can recognise an allergic reaction and a potential anaphylaxis risk and treat it appropriately in an emergency.

It is our policy 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 College life.
- Raise awareness of food and insect allergy and the risk of anaphylaxis.
- Raise awareness of the College's anaphylaxis policy throughout the College community.
- Engage with parents/guardians of each student at risk of anaphylaxis when assessing risks and developing risk minimisation strategies for the student.
- Ensure that staff have knowledge about allergies, can recognise an allergic reaction including anaphylaxis and understand the College's policy and guidelines and emergency procedures in responding to anaphylaxis.
- Ensure that partnerships between the College and parents/guardians are established to help students to avoid exposure.

Responsibilities:

Principal

The Principal is responsible for:

- ensuring compliance with Ministerial Order 706 and Department of Education Guidelines
- ensuring the College maintains and implements this policy
- ensuring an annual **Appendix Two** Anaphylaxis Risk Management Checklist is completed
- appointing one or more suitably trained School Anaphylaxis Supervisors
- ensuring staff complete approved anaphylaxis training every two years
- ensuring staff competency checks are completed within required timeframes
- maintaining records of staff training and briefings
- ensuring twice-yearly anaphylaxis briefings occur
- ensuring Individual Anaphylaxis Management Plans are developed, implemented and reviewed
- ensuring risk minimisation strategies are implemented across all school settings
- ensuring emergency response procedures are in place for all onsite and offsite activities
- purchasing and maintaining general use adrenaline autoinjectors
- ensuring appropriate storage and accessibility of medication
- ensuring casual relief teachers and volunteers are informed of students at risk of anaphylaxis and emergency response procedures

School Anaphylaxis Supervisor

The School Anaphylaxis Supervisor is responsible for:

- maintaining approved anaphylaxis training qualifications and currency requirements
- completing:
 - ASCIA Anaphylaxis e-training for Victorian Schools every two years
 - Course in Verifying the Correct Use of Adrenaline Injector Devices 22579VIC every three years
- verifying staff competency in the use of adrenaline autoinjectors within 30 days of training completion
- maintaining staff training records
- coordinating development and annual review of Individual Anaphylaxis Management Plans
- ensuring ASCIA Action Plans are current and accessible
- liaising with parents/guardians regarding student medical information
- ensuring adrenaline autoinjectors are current and not expired
- organising twice-yearly anaphylaxis briefings
- providing staff with opportunities to practise using trainer devices
- supporting risk assessments for excursions, camps and special activities
- ensuring plans and medication accompany students during offsite activities
- ensuring relevant information is uploaded and maintained within Compass SMS
- communicating emergency procedures to staff

Staff Responsibilities

All staff are responsible for:

- completing required anaphylaxis training
- attending twice-yearly anaphylaxis briefings
- understanding and implementing this policy
- familiarising themselves with students diagnosed as being at risk of anaphylaxis
- knowing the location of student medication and emergency plans
- recognising the signs and symptoms of allergic reactions and anaphylaxis
- responding appropriately in an emergency
- implementing risk minimisation strategies
- supporting inclusive participation of students at risk of anaphylaxis
- ensuring food-related activities are appropriately planned
- supervising students appropriately during all school activities

Parents/Guardians

Parents/guardians are responsible for:

- informing the College if their child has been diagnosed as being at risk of anaphylaxis
- providing an up-to-date ASCIA Action Plan for Anaphylaxis completed by a medical practitioner
- supplying prescribed, in-date adrenaline autoinjectors
- ensuring medication is replaced prior to expiry
- informing the College of changes to their child's medical condition
- participating in the development and review of the student's Individual Anaphylaxis Management Plan
- working collaboratively with the College to support risk minimisation strategies

Individual Anaphylaxis Management Plans (IAMP):

The College will develop an Individual Anaphylaxis Management Plan for each student diagnosed as being at risk of anaphylaxis.

Plans will be developed:

- as soon as practicable following enrolment or diagnosis
- in consultation with parents/guardians
- with reference to the student's ASCIA Action Plan

Each plan will include:

- details of the student's diagnosed allergies
- signs and symptoms of allergic reactions and anaphylaxis
- risk minimisation strategies
- emergency response procedures
- storage arrangements for medication
- emergency contact information
- details of staff responsibilities

The Plan will be reviewed:

- annually
- following an anaphylactic reaction
- when medical information changes
- before camps, excursions or special events
- where there is an increased risk of allergen exposure

Storage and Accessibility of Medication and Plans:

Individual Anaphylaxis Management Plans and ASCIA Action Plans are stored at:

- Rosebud Campus – Staff Office Downstairs and Kitchen Upstairs
- Hastings Campus – Staff Office on the Stage
- Compass SMS student health profile
- excursion and camp first aid kits

Adrenaline autoinjectors:

- may be carried by students where appropriate and approved
- will otherwise be securely stored in accessible locations known to staff
- will be clearly labelled with the student's name
- will be accessible during all school activities
- will include general use devices maintained by the College

General use adrenaline autoinjectors will be available:

- at each campus
- within first aid kits
- during excursions, camps and special events

Risk Minimisation Strategies:

All ACE staff have a duty of care to take reasonable steps to protect a student in their care from risks of injury that are reasonably foreseeable. The development and implementation of prevention strategies to minimise the risk of incidents of anaphylaxis is an important step in satisfying this duty of care.

At ACE the risk minimisation strategies include:

- All staff to be trained in the administration of the following:
 - EpiPen®
 - Anapen®
 - Jext®
 - Neffy®
- All staff to be familiar with the policy and related procedures
- All staff to be familiar with the names of any ACE students that are at risk of anaphylaxis, the location of each student's IAMP and Adrenaline Autoinjector and each person's responsibility in managing an anaphylaxis incident.

Precautions that ACE staff will take in specific settings are listed below:

- Peanuts and nuts are the most common trigger for an anaphylactic reaction or fatality due to food-induced anaphylaxis. It is recommended that school activities don't place pressure on students to try foods, whether they contain a known allergen or not. Blanket banning of nuts or other foods associated with anaphylaxis and allergies is not recommended because:
 - It can create complacency amongst staff and students
 - It cannot eliminate the presence of all allergens.
- Staff and students are regularly reminded to wash their hands after eating
- Students are discouraged from sharing food
- Gloves must be worn when picking up rubbish
- Class groups are informed of allergens that must be avoided in advance
- Planning for off-site activities will include risk minimisation strategies for students at risk of anaphylaxis including supervision requirements, appropriate number of trained staff, emergency response procedures and other risk controls appropriate to the activity and students attending

During all activities (onsite and offsite), including usual classroom activities:

- In the event of an anaphylaxis emergency, ACE's emergency response procedures, general first aid procedures, and the student's ASCIA Action Plan must be followed. Ensuring this is complied with is the responsibility of the Principal.
- All staff will be trained in the administration of an Adrenaline Auto-injector and be able to respond to an anaphylactic reaction if required. Ensuring this is complied with is the responsibility of the Principal.
- A copy of the student's IAMP is kept in the classroom.
- The ASCIA Action Plan must be easily accessible even if the Adrenaline Auto-injector is kept in another location.
- Liaise with parents/guardians of students who have ***been diagnosed by a medical practitioner*** as being at risk of anaphylaxis about food-related activities ahead of time.
- Use non-food treats where possible, but if food treats are used in class it is recommended that Parents/Guardian/Carers of students with food allergy provide a treat box with alternative treats. Treat boxes should be clearly labelled and only handled by the student.
- Never give food from outside sources to a student who is at risk of anaphylaxis.
- Treats for the other students in the class should not contain the substance to which the student is allergic. It is recommended to use non-food treats where possible.
- Products labelled 'may contain traces of nuts' should not be served to students allergic to nuts. Products labelled 'may contain milk or egg' should not be served to students with milk or egg allergy and so forth.
- Be aware of the possibility of hidden allergens when using recycled materials (egg cartons, peanut butter jars).
- Ensure all cooking and preparation utensils etc. are washed and cleaned thoroughly after use.
- Remind students about the importance of washing hands, eating their own food and not sharing food.

Outside of class time (including between classes and before and after school):

- Each student's Adrenaline Auto-injector and Individual Anaphylaxis Management Plan will be easily accessible from outside, and all ACE Staff will be aware of their exact location for an immediate response.
- A Communication Plan will be in place to enable quick access to the student's medical information and medication if a reaction occurs outside.
- All ACE Staff will be aware of ACE's Emergency Response Procedures.
- ACE Supervising Staff will be able to identify, by face, students who are at risk of anaphylaxis.
- Students with anaphylactic responses to insects will be encouraged to stay away from water or flowering plants and be encouraged to wear closed shoes, long-sleeved garments and avoid wearing bright colours when outdoors.
- ACE will keep lawns and clover mowed and outdoor bins covered.
- Staff and students will be encouraged to have drinks and food covered while outdoors.

Special Events Including Excursions, Incursions and Sports:

- All staff are trained in the recognition of anaphylaxis and the administration of an Adrenaline Autoinjector and be able to respond to an anaphylactic reaction if required.
- A general use Adrenaline Autoinjector will be available on off-site excursions and trips
- Each student's Adrenaline Autoinjector and IAMP will be easily accessible and staff will be aware of their exact location for an immediate response
- Appropriate risk minimisation and prevention strategies and processes are in place to address an anaphylactic reaction should it occur while travelling on an excursion bus. This includes the availability and administration of an Adrenaline autoinjector and a copy of the student's IAMP.
- For each excursion etc an assessment of risk will be undertaken for each individual student attending who is at risk of anaphylaxis. Some factors considered will be the number of anaphylactic students attending, the nature/structure of the excursion, staff-student ratios, size of the venue and distance from medical assistance.
- Supervising Staff will be able to identify anaphylactic students at risk of anaphylaxis by face.
- Prior to an excursion taking place, the School Anaphylaxis Supervisor will consult with the student's Parents/Guardians to confirm that the student's Individual Anaphylaxis Management Plan is up to date and relevant to the particular excursion.
- Staff will avoid using food in activities or games, including as rewards.

Camps and Remote Settings:

- In the event of an anaphylaxis emergency at a camp or remote setting, the ACE or remote site's emergency response procedures, general first aid procedures, and the student's ASCIA Action Plan must be followed. Ensuring this is complied with is the responsibility of the Principal.
- If ACE has a student at risk of anaphylaxis, sufficient staff supervising a camp will be trained in the administration of an Adrenaline Auto-injector and be able to respond to an anaphylactic reaction if required. Ensuring this is complied with is the responsibility of the Principal.
- Prior to booking a camp, ACE staff will confirm that the camp owner/operator can provide food that is safe for anaphylactic students. If not, an alternative venue will be sought.
- Staff cooking for students whilst on camp must demonstrate satisfactory training in food allergen management and food-handling practices, including knowledge of the major food allergens triggering anaphylaxis, cross-contamination issues specific to food allergy, label reading, etc.
- ACE staff will not sign any written disclaimer or statement from a camp provider that indicates they are unable to provide food which is safe for students at risk of anaphylaxis. The duty of care to protect students from reasonably foreseeable injury cannot be delegated.
- The Principal is responsible for ensuring that a risk assessment is conducted and a risk management strategy is developed for students at risk of anaphylaxis in consultation with Parents/Guardian of students at risk of anaphylaxis and the camp provider prior to the camp. A risk management strategy will identify the processes in place to address an anaphylactic reaction should it occur.
- Use of substances containing allergens will be avoided, particularly in cooking or art and craft games. A student's Adrenaline Auto-injector (i.e. EpiPen® Anapen® Jext® Neffy®), Individual Anaphylaxis Management Plan and ASCIA Action Plan and a mobile phone must be taken on camp. If mobile phone access is not available, an alternative method of communication in an emergency must be considered, e.g. a satellite phone.
- Prior to the camp, ACE staff should consult with the student's Parents/Guardians/Carers to review the students Individual Anaphylaxis Plan.
- ACE staff participating in the camp will be clear about their roles and responsibilities in the event of an anaphylactic reaction, and ensure the camp provider has appropriate emergency response procedures in place.
- ACE staff will contact local emergency services and hospitals prior to the camp. They will advise the full medical conditions of students at risk, the location of the camp and the location of any off-camp activities. They will ensure contact details of emergency services are distributed to all staff as part of the emergency response procedures developed for the camp.
ACE staff will always take a back-up Adrenaline Auto-injector (i.e. EpiPen® Anapen® Jext® Neffy®) for General Use

on a camp.

The Adrenaline Auto-injector (i.e. EpiPen® Anapen® Jext® Neffy®) for General Use will be carried in the first aid kit; however, students at risk may carry their own Adrenaline Auto-injector on camp.

- Students with anaphylactic responses to insects will be encouraged to always wear closed shoes and long-sleeved garments when outdoors and should be encouraged to stay away from water or flowering plants.
- As no ACE sites have a canteen, the suggested precautions for canteens have not been included.

Where required, additional control measures may be implemented based on the specific activity and student needs.

Emergency Response Procedures:

In the event of a suspected anaphylactic reaction:

1. Administer the student's adrenaline autoinjector immediately.
2. Call 000 and request an ambulance.
3. Follow the student's ASCIA Action Plan.
4. Contact parents/guardians.
5. If there is no improvement after 5 minutes and another autoinjector is available, administer a second dose.
6. Keep the student lying flat unless breathing difficulties require an alternative position.
7. The student must be transported to hospital following an anaphylactic reaction, even if symptoms improve.

Emergency response procedures apply at:

- school
- camps
- excursions
- sporting activities
- work experience
- all College-approved activities

ACTION

Emergency Response Procedures for Anaphylaxis

If a student experiences an anaphylactic reaction at school or during a school-related activity, College staff must immediately implement the following emergency response procedures.

Step	Action
1. Position the Student	<ul style="list-style-type: none"> • Lay the student flat. • Do not allow the student to stand or walk. • If breathing is difficult or the student is vomiting, allow them to sit upright. • Remain calm and reassuring. • Do not leave the student unattended.
2. Retrieve Medication and Student Plan	<ul style="list-style-type: none"> • Send another staff member or reliable student to obtain the student's prescribed adrenaline autoinjector or the College's general use adrenaline autoinjector and the student's Individual Anaphylaxis Management Plan (IAMP). <p>Locations include:</p> <ul style="list-style-type: none"> • Rosebud Campus – Staff Office Downstairs and Kitchen Upstairs • Hastings Campus – Staff Office on the Stage • Compass SMS – Student Profile Page (Health Category) <ul style="list-style-type: none"> • If the student's plan is unavailable, or if this appears to be a first-time anaphylactic reaction, staff must still proceed immediately with emergency treatment and follow Steps 3–6.
3. Administer Adrenaline Autoinjector	<p>Staff must administer the student's prescribed adrenaline autoinjector or a general use device immediately.</p> <p>### EpiPen® Instructions</p> <ul style="list-style-type: none"> • Remove the EpiPen® from its carry container.

Step	Action
	<ul style="list-style-type: none"> • Form a fist around the device and remove the blue safety cap. • Place the orange end against the student’s outer mid-thigh at a 90-degree angle (can be administered through clothing). • Push firmly until a click is heard or felt and hold in place for 3 seconds. • Remove the device. • Note the time of administration. • Retain the used device for ambulance paramedics. <p>### Anapen® Instructions</p> <ul style="list-style-type: none"> • Remove the Anapen® from its carry container. • Remove the black needle shield. • Remove the grey safety cap from the red button. • Place against the outer mid-thigh at a 90-degree angle. • Press the red button until a click is heard or felt and hold for 3 seconds. • Remove the device. • Note the time of administration. • Retain the used device for ambulance paramedics. <p>### Jext® Instructions</p> <ul style="list-style-type: none"> • Remove the yellow safety cap. • Place the black tip against the outer mid-thigh at a 90-degree angle. • Push firmly until a click is heard. • Hold in place for 10 seconds. • Remove the device and massage the injection area for 10 seconds. • Confirm administration by checking the inspection window. • Note the time of administration and retain the device for paramedics. <p>### Neffy® Nasal Spray Instructions</p> <ul style="list-style-type: none"> • Remove the device from the blister pack. • Hold the device with thumb on the plunger and fingers either side of the nozzle. • Insert the nozzle into one nostril until fingers touch the nose. • Press firmly until a click is heard or felt. • Remove immediately after administration. • Note the time of administration. • Retain the used device for ambulance paramedics.
4. Call Emergency Services	<ul style="list-style-type: none"> • Call 000 immediately and request an ambulance. • State that the student is experiencing “anaphylaxis”.
5. Monitor and Administer Additional Adrenaline if Required	<ul style="list-style-type: none"> • Closely monitor the student while awaiting ambulance arrival. • If there is no improvement or symptoms worsen, additional adrenaline doses may be administered every 5 minutes if another adrenaline autoinjector is available and in accordance with the student’s ASCIA Action Plan.
6. Contact Parents/Guardians	<ul style="list-style-type: none"> • Contact the student’s emergency contacts and advise them of the situation and actions taken.
7. Post-Incident Requirements	<ul style="list-style-type: none"> • The student must be transported to hospital following an anaphylactic reaction, even if symptoms appear to improve. • The incident must be documented in accordance with College procedures. • A review of the student’s Individual Anaphylaxis Management Plan and the College response procedures must occur following the incident.

Communication Plan:

See **Appendix One** for the full **Communication Plan**.

This Plan will be available on the ACE website so that parents and other members of the school community can easily access information about anaphylaxis management procedures. The parents and carers of students who are enrolled at ACE and are identified as being at risk of anaphylaxis will also be provided with a copy.

The Principal is responsible for ensuring that all relevant staff, including casual relief staff, and volunteers are aware of this Plan and ACE'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 Plan, their role in responding to an anaphylactic reaction and where required, the identity of students at risk.

The Principal is also responsible for ensuring relevant staff are trained and briefed in anaphylaxis management, consistent with the Department's Anaphylaxis Guidelines.

The College will communicate this policy through:

- staff induction processes
- staff meetings and briefings
- parent information processes
- policy publication and accessibility arrangements
- Compass SMS alerts and student medical records

Relevant staff, volunteers and casual relief teachers will be informed of:

- students diagnosed as being at risk of anaphylaxis
- locations of medication
- emergency response procedures
- risk minimisation strategies relevant to their role

Staff Training and Briefings:

All staff will complete:

- ASCIA Anaphylaxis e-training for Victorian Schools every two years
- competency verification within 30 days of training completion

The College will conduct twice-yearly anaphylaxis briefings which will include:

- review of this policy
- prevention strategies
- recognition of allergic reactions and anaphylaxis
- emergency response procedures
- practical demonstrations using trainer devices
- scenario-based discussions relevant to school environments

Training records will be maintained by the College.

Support Materials

Appendix One

Anaphylaxis Communication Plan

This Plan must be read in conjunction with the ACE Anaphylaxis Policy and Procedure

Purpose and Responsibility:

The purpose of this Anaphylaxis Communication Plan is to clearly outline how ACE will communicate its anaphylaxis commitments, procedures and risk management strategies to all staff, students, parents/guardians/carers and the ACE community.

The responsibility for ensuring that this Plan is written, updated and compliant rests with the ACE Principal.

Responding to an Anaphylactic Reaction – Onsite Activities

If a student experiences an anaphylactic reaction during normal school activities, including within classrooms, buildings or school grounds, staff must immediately implement the following emergency response procedures.

Step	Action
Step 1 – Position the Student	<ul style="list-style-type: none"> • Lay the student flat. • Do not allow the student to stand or walk. • If breathing is difficult or the student is vomiting, allow them to sit upright. • Remain calm and reassuring. • Do not leave the student unattended.
Step 2 – Retrieve Medication and Student Plan	<ul style="list-style-type: none"> • Seek assistance from another staff member or reliable student to retrieve the student’s prescribed adrenaline autoinjector or the College’s general use adrenaline autoinjector. • Retrieve the student’s Individual Anaphylaxis Management Plan (IAMP) and ASCIA Action Plan. <p>Locations include:</p> <ul style="list-style-type: none"> • Rosebud Campus – Downstairs Staff Office and Kitchen Upstairs • Hastings Campus – Staff Office on the Stage • Compass SMS – Student Profile Page (Health Category) <ul style="list-style-type: none"> • If the student’s plan is unavailable, or if this appears to be a first-time reaction, proceed immediately to Steps 3–6.
Step 3 – Administer Adrenaline Autoinjector	<p>Administer the student’s prescribed adrenaline autoinjector or a general use device immediately.</p> <p>### EpiPen®</p> <ul style="list-style-type: none"> • Remove from carry container. • Remove blue safety cap. • Place orange end against outer mid-thigh at a 90-degree angle. • Push firmly until a click is heard or felt. • Hold in place for 3 seconds. • Remove and note time administered. • Retain used device for paramedics. <p>### Anapen®</p> <ul style="list-style-type: none"> • Remove black needle shield. • Remove grey safety cap.

Step	Action
	<ul style="list-style-type: none"> • Place against outer mid-thigh at a 90-degree angle. • Press red button until a click is heard or felt. • Hold in place for 3 seconds. • Remove and note time administered. • Retain used device for paramedics. <p>### Jext®</p> <ul style="list-style-type: none"> • Remove yellow safety cap. • Place black tip against outer mid-thigh. • Push firmly until a click is heard. • Hold in place for 10 seconds. • Massage injection area for 10 seconds. • Confirm administration via inspection window. • Retain used device for paramedics. <p>### Neffy® Nasal Spray</p> <ul style="list-style-type: none"> • Remove from blister pack. • Insert nozzle into nostril. • Press firmly until click is heard or felt. • Remove device immediately after administration. • Note administration time. • Retain device for paramedics.
Step 4 – Call Emergency Services	<ul style="list-style-type: none"> • Call 000 immediately. • Request an ambulance and state “anaphylaxis”.
Step 5 – Monitor and Administer Additional Adrenaline if Required	<ul style="list-style-type: none"> • Monitor the student continuously. • If symptoms do not improve or worsen, administer an additional adrenaline dose every 5 minutes if another device is available and in accordance with the ASCIA Action Plan.
Step 6 – Contact Emergency Contacts and Notify Leadership	<ul style="list-style-type: none"> • Contact the student’s parents/guardians or emergency contacts. • Notify the School Anaphylaxis Supervisor and Principal as soon as practicable.
Step 7 – Post Incident Requirements	<ul style="list-style-type: none"> • The student must be transported to hospital, even if symptoms improve. • The incident must be documented in accordance with College procedures. • A review of the student’s Individual Anaphylaxis Management Plan and the College response procedures must occur following the incident.

Responding to an Anaphylactic Reaction – Offsite Activities

For excursions, camps, sporting events and special activities conducted, organised or attended by the College, staff must follow the emergency response procedures above, with the following modifications to Step 2.

Step	Action
Step 2A – Retrieve Medication and Student Plan (Offsite Activities)	<ul style="list-style-type: none"> • Seek assistance from another staff member or reliable student to retrieve the student’s prescribed adrenaline autoinjector or the College’s general use adrenaline autoinjector. • Retrieve the student’s Individual Anaphylaxis Management Plan and ASCIA Action Plan. <p>Locations may include:</p>

Step	Action
	<ul style="list-style-type: none"> • Carried by supervising staff member • Excursion or camp first aid kit • Compass SMS – Student Profile Page (Health Category), where internet access is available • If the student’s plan is unavailable, or this appears to be a first-time reaction, proceed immediately with Steps 3–7.

Raising Staff Awareness:

Advance College of Education is committed to ensuring all staff maintain a high level of awareness regarding anaphylaxis prevention, risk minimisation and emergency response procedures.

The College will ensure:

- all staff complete approved anaphylaxis training in accordance with Ministerial Order 706 requirements
- all staff participate in competency verification processes
- all staff attend twice-yearly anaphylaxis briefings conducted by the School Anaphylaxis Supervisor
- staff are informed of students diagnosed as being at risk of anaphylaxis and understand their responsibilities in relation to student safety

The School Anaphylaxis Supervisor conducting staff briefings must maintain current qualifications in:

- ASCIA Anaphylaxis e-training for Victorian Schools (renewed every two years); and
- Course in Verifying the Correct Use of Adrenaline Injector Devices 22579VIC (renewed every three years)

The Principal is responsible for ensuring:

- casual relief staff, volunteers, contractors and new staff members are appropriately briefed prior to supervising students
- administration staff and support staff are aware of emergency response procedures
- staff understand the contents of the College’s Anaphylaxis Management Policy and related procedures
- staff are aware of locations of Individual Anaphylaxis Management Plans, ASCIA Action Plans and adrenaline autoinjectors

Staff briefings will include:

- prevention and risk minimisation strategies
- recognising signs and symptoms of allergic reactions and anaphylaxis
- emergency response procedures
- practical demonstrations using trainer adrenaline autoinjectors
- scenario-based discussions relevant to College environments and activities

Raising Student Awareness:

The College will provide age-appropriate education to students regarding allergies and anaphylaxis to support a safe, respectful and inclusive school environment.

Student awareness strategies may include:

- posters and fact sheets displayed throughout College sites
- classroom discussions
- wellbeing and health education activities
- reminders regarding food safety and hygiene practices

Key student awareness messages include:

- always take food allergies seriously
- do not share food with other students
- wash hands thoroughly after eating
- know how to seek help if a student becomes unwell
- respect students who carry adrenaline autoinjectors
- never pressure another student to eat food
- report unsafe behaviour or concerns to staff immediately

The College acknowledges that bullying or threatening behaviour involving allergens may place a student at significant risk.

Examples may include:

- teasing a student about their allergy
- threatening a student with an allergen
- intentionally exposing a student to a known allergen
- attempting to trick a student into consuming unsafe food

Any behaviour that intentionally places a student at risk of anaphylaxis will be treated as a serious breach of student behaviour expectations and managed in accordance with the College's Bullying and Harassment Policy and student wellbeing procedures.

Working with Parents/Guardians of Students at Risk of Anaphylaxis:

The College recognises that parents/guardians of students diagnosed as being at risk of anaphylaxis may experience significant anxiety regarding their child's safety at school.

To support families, the College is committed to:

- maintaining open and collaborative communication with parents/guardians
- ensuring effective prevention and risk minimisation strategies are implemented
- providing reassurance that staff are appropriately trained
- encouraging ongoing communication regarding student medical needs and wellbeing

Parents/guardians are expected to:

- notify the College as soon as practicable if their child is diagnosed as being at risk of anaphylaxis
- provide an up-to-date ASCIA Action Plan completed by a medical practitioner
- provide current, in-date prescribed adrenaline autoinjectors
- advise the College of changes to medical information or treatment requirements

At enrolment, or following diagnosis:

- relevant staff members will be informed of the student's medical needs
- an Individual Anaphylaxis Management Plan will be developed
- the student's ASCIA Action Plan will be stored in designated locations, including:
 - Rosebud Campus – Staff Office
 - Hastings Campus – Staff Office
 - Compass SMS student health profile

Raising College Community Awareness:

The College will promote awareness of anaphylaxis throughout the broader College community.

Awareness strategies may include:

- publication of the Anaphylaxis Management Policy on the College website
- inclusion of allergy and anaphylaxis information within newsletters and community communications
- sharing educational resources from recognised authorities, including:
 - ASCIA
 - Royal Children's Hospital Melbourne
 - Allergy & Anaphylaxis Australia

The College encourages all members of the school community to support safe and inclusive practices for students diagnosed as being at risk of anaphylaxis.

Individual Anaphylaxis Management Plans (IAMPs):

An Individual Anaphylaxis Management Plan will be developed for each student diagnosed as being at risk of anaphylaxis.

Plans will be developed:

- as soon as practicable following enrolment or diagnosis
- in consultation with parents/guardians
- with reference to the student's ASCIA Action Plan

Each plan will include:

- details of the student's diagnosed allergy or allergies
- risk minimisation strategies for onsite and offsite activities
- signs and symptoms of allergic reactions and anaphylaxis
- emergency response procedures
- details of medication storage arrangements
- emergency contact information
- details of staff responsibilities

Plans will be reviewed:

- annually
- following an anaphylactic reaction
- where medical information changes
- prior to camps, excursions or special activities
- where there is an increased risk of allergen exposure

Excursions and Camps:

Prior to excursions, camps or offsite activities, staff will ensure:

- the student has an up-to-date ASCIA Action Plan
- prescribed adrenaline autoinjectors are current and accessible
- a general use adrenaline autoinjector is available
- supervising staff are aware of emergency response procedures
- relevant risk assessments are completed

The following items must accompany the student during offsite activities:

- prescribed adrenaline autoinjector
- spare adrenaline autoinjector where available
- ASCIA Action Plan
- Individual Anaphylaxis Management Plan

In the event of an anaphylactic reaction during an offsite activity:

- staff must immediately implement emergency response procedures
- an ambulance must be called immediately
- the Principal and/or Assistant Principal must be notified as soon as practicable
- parents/guardians must be informed
- incident reporting procedures must be completed

Post-Incident Procedures:

Following an anaphylactic incident, the College will undertake appropriate post-incident management and review processes.

This may include:

- completion of an Incident/Injury/Accident Report
- documentation of actions taken and timelines
- communication with parents/guardians
- debriefing staff involved in the incident
- providing support to students who witnessed the event
- reviewing the student's Individual Anaphylaxis Management Plan
- reviewing emergency response procedures and risk minimisation strategies
- implementing improvements identified through the review process

Where required, the College will also:

- arrange collection and return of student belongings
- consult with parents/guardians regarding additional medical advice or recommendations
- review staff training or communication processes following the incident

Record Keeping:

The College will maintain records relating to:

- staff training
- competency verification
- Individual Anaphylaxis Management Plans
- ASCIA Action Plans
- annual policy reviews
- risk assessments
- incident responses
- medication expiry monitoring

Related Legislation and Documents:

- Ministerial Order 706 – Anaphylaxis Management in Victorian Schools
- Victorian Department of Education Anaphylaxis Guidelines
- Education and Training Reform Act 2006 (Vic)
- ASCIA Guidelines
- Child Safe Standards
- First Aid Policy
- Duty of Care Policy
- Camps and Excursions Policy
- Health Care Needs Policy

Monitoring and Review:

This policy will be reviewed annually, following an anaphylaxis incident, following updates to Department of Education or ASCIA guidelines or earlier following legislative or regulatory changes

The principal is responsible for ensuring this policy is implemented and maintained.

Approval:

Policy last reviewed	22 nd April 2026
Consultation	College Board 22 nd April 2026
Approved by	College Board and (Principal)
Next review date	21 st April 2029

Appendix Two
Anaphylaxis Annual Risk Management Checklist

(to be completed at the start of each year)

Date of review:		
Who completed this checklist?	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 autoinjector?		
2. How many of these students carry their adrenaline autoinjector 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 autoinjector to a student?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
a. If Yes, how many times?		
Section 1: Training		
6. Have all College staff successfully completed an approved anaphylaxis management training course, either: <ul style="list-style-type: none"> • online training (ASCIA anaphylaxis e-training) within the last 2 years, or • accredited face to face training (22578VIC or 10710NAT) within the last 3 years? 	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7. Does your school conduct twice yearly briefings annually? If no, please explain why not, as this is a requirement for school registration.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8. Do all College staff participate in a twice yearly anaphylaxis briefing? If no, please explain why not, as this is a requirement for school registration.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
9. If you are intending to use the ASCIA Anaphylaxis e-training for Victorian Schools:	<input type="checkbox"/> Yes <input type="checkbox"/> No	
a. Has your school trained a staff member (School Anaphylaxis Supervisor) to conduct competency checks of adrenaline autoinjectors (EpiPen® and Anapen®)?		
b. Are the College staff being assessed for their competency in using adrenaline autoinjectors (EpiPen®, Anapen®, Jext, Neffy) within 30 days of completing the ASCIA Anaphylaxis e-training for Victorian Schools?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Section 2: Individual Anaphylaxis Management Plans	
10. Does every student who has been diagnosed as being at risk of anaphylaxis and prescribed an adrenaline autoinjector have an Individual Anaphylaxis Management Plan which includes an ASCIA Action Plan for Anaphylaxis completed and signed by a prescribed medical practitioner?	<input type="checkbox"/> Yes <input type="checkbox"/> No
11. Are all Individual Anaphylaxis Management Plans reviewed regularly with parents (at least annually)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
12. 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. 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
13. Do all students who carry an adrenaline autoinjector on their person have a copy of their ASCIA Action Plan for Anaphylaxis kept at the school (provided by the parent)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
a. Where are the Action Plans kept?	
14. Does the ASCIA Action Plan for Anaphylaxis include a recent photo of the student?	<input type="checkbox"/> Yes <input type="checkbox"/> No
15. Are Individual Management Plans (for students at risk of anaphylaxis) reviewed prior to any off site activities (such as sport, camps or special events), and in consultation with the student's parent/s?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Section 3: Storage and accessibility of adrenaline autoinjectors	
16. Where are the student(s) adrenaline autoinjectors stored?	
17. Do all College staff know where the school's adrenaline autoinjectors for general use are stored?	<input type="checkbox"/> Yes <input type="checkbox"/> No
18. Are the adrenaline autoinjectors stored at room temperature (not refrigerated) and out of direct sunlight?	<input type="checkbox"/> Yes <input type="checkbox"/> No

19. Is the storage safe?	<input type="checkbox"/> Yes <input type="checkbox"/> No
20. Is the storage unlocked and accessible to school staff at all times? Comments:	<input type="checkbox"/> Yes <input type="checkbox"/> No
21. Are the adrenaline autoinjectors easy to find? Comments:	<input type="checkbox"/> Yes <input type="checkbox"/> No
22. Is a copy of student's individual ASCIA Action Plan for Anaphylaxis kept together with the student's adrenaline autoinjector?	<input type="checkbox"/> Yes <input type="checkbox"/> No
23. Are the adrenaline autoinjectors and Individual Anaphylaxis Management Plans (including the ASCIA Action Plan for Anaphylaxis) clearly labelled with the student's names?	<input type="checkbox"/> Yes <input type="checkbox"/> No
24. Has someone been designated to check the adrenaline autoinjector expiry dates on a regular basis? Who?	<input type="checkbox"/> Yes <input type="checkbox"/> No
25. Are there adrenaline autoinjectors which are currently in the possession of the school which have expired?	<input type="checkbox"/> Yes <input type="checkbox"/> No
26. Has the College signed up to EpiClub (optional free reminder services)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
27. Do all College staff know where the adrenaline autoinjectors, the ASCIA Action Plans for Anaphylaxis and the Individual Anaphylaxis Management Plans are stored?	<input type="checkbox"/> Yes <input type="checkbox"/> No
28. Has the College purchased adrenaline autoinjector(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
29. Where are these first aid kits located? Do staff know where they are located?	<input type="checkbox"/> Yes <input type="checkbox"/> No
30. Is the adrenaline autoinjector for general use clearly labelled as the 'General Use' adrenaline autoinjector?	<input type="checkbox"/> Yes <input type="checkbox"/> No
31. Is there a register for signing adrenaline autoinjectors in and out when taken for excursions, camps etc?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Section 4: Risk Minimisation strategies	
32. 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
33. Have you implemented any of the risk minimisation strategies in the Anaphylaxis Guidelines? If yes, list these in the space provided below. If no please explain why not as this is a requirement for school registration.	<input type="checkbox"/> Yes <input type="checkbox"/> No

34. Are there always sufficient College staff members on yard duty who have current Anaphylaxis Management Training?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Section 5: School management and emergency response	
35. Does the College 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
36. Do College staff know when their training needs to be renewed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
37. Have you developed emergency response procedures for when an allergic reaction occurs?	<input type="checkbox"/> Yes <input type="checkbox"/> No
a. In the classroom?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. In the school yard?	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. In all College buildings and sites, including gymnasiums and halls?	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. At 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
38. Does your plan include who will call the ambulance?	<input type="checkbox"/> Yes <input type="checkbox"/> No
39. Is there a designated person who will be sent to collect the student's adrenaline autoinjector and individual ASCIA Action Plan for Anaphylaxis?	<input type="checkbox"/> Yes <input type="checkbox"/> No
40. Have you checked how long it takes to get an individual's adrenaline autoinjector and corresponding individual ASCIA Action Plan for Anaphylaxis to a student experiencing an anaphylactic reaction from various areas of the College 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
41. On excursions or other out of school events is there a plan for who is responsible for ensuring the adrenaline autoinjector(s) and Individual Anaphylaxis Management Plans (including the ASCIA Action Plan) and the adrenaline autoinjector for general use are correctly stored and available for use?	<input type="checkbox"/> Yes <input type="checkbox"/> No
42. Who will make these arrangements during excursions?	
43. Who will make these arrangements during camps?	
44. Who will make these arrangements during sporting activities?	
45. Is there a process for post-incident support in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No

46. Have all College staff who conduct classes attended by students at risk of anaphylaxis, and any other staff identified by the Principal, been briefed by someone familiar with the school and who has completed an approved anaphylaxis management course in the last 2 years on:	
a. The College'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 at risk of anaphylaxis, and who are prescribed an adrenaline autoinjector, including where their medication is located?	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. How to use an adrenaline autoinjector, including hands on practice with a trainer adrenaline autoinjector?	<input type="checkbox"/> Yes <input type="checkbox"/> No
e. The College'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 autoinjector(s) for general use is kept?	<input type="checkbox"/> Yes <input type="checkbox"/> No
g. Where the adrenaline autoinjectors for individual students are located including if they carry it on their person?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Section 6: Communication Plan	
47. Is there a Communication Plan in place to provide information about anaphylaxis and the school's policies?	
a. To College 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
48. Is there a process for distributing this information to the relevant College staff?	<input type="checkbox"/> Yes <input type="checkbox"/> No
a. What is it?	
49. How will this information be kept up to date?	
50. 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
51. What are they?	