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	Anaphylaxis Management Policy and Procedure	Review Date: 04/2022
		Version Number: 2.1
Authorised by	Board of Management	
Responsible Person	Principal	
Staff Involved	PRACE College Staff, PRACE & PRACE College First Aiders	

Purpose

The purpose of this Policy and Procedure is to provide a set of guidelines for the management of students in the PRACE College VCAL program who are diagnosed as being at risk of anaphylaxis, including ensuring that:

- PRACE engages with parents/guardians/carers of students at risk of anaphylaxis in assessing risks, developing risk minimisation strategies and management strategies for the student
- School staff have adequate knowledge about allergies, anaphylaxis and PRACE's policies and procedures about responding to an anaphylactic reaction
- PRACE complies with *Ministerial Order No. 706: Anaphylaxis Management in Victorian Schools*.

Scope

This Policy and Procedure applies to students enrolled in the PRACE College VCAL program only at both the Merrilands and Mernda school campuses.

It does not apply to any other students enrolled with PRACE.

For Anaphylaxis first aid refer to PRACE's *First Aid Policy and Procedure*.

Relevant Legislations/ Standards

- *Anaphylaxis Guidelines: A resource for managing severe allergies in Victorian schools* (the Anaphylaxis Guidelines) ¹
- Children's Services and Education Legislation Amendment (Anaphylaxis Management) Act 2008 (Vic)
- Child Safe Standards
- Child Wellbeing and Safety Act 2005 (Vic)
- Disability Act 2006 (Vic)
- Disability Discrimination Act 1992 (Cth)
- Disability Standards for Education 2005 (Cth)
- Education and Training Reform Act 2006 (Vic)
- Education and Training Reform Regulations 2017 (Vic)
- Equal Opportunity Act 2010 (Vic)
- Health Records Act 2001 (Vic)
- Ministerial Order No. 706: Anaphylaxis Management in Victorian Schools (MO706)
- Ministerial Order 870 - Child Safe Standards

¹ See: <https://education.vic.gov.au/school/principals/spag/health/pages/anaphylaxis.aspx>

Definitions

Anaphylaxis is a severe, rapidly progressive allergic reaction, that is potentially life threatening. Although allergic reactions are common among children, severe reactions are uncommon and death is rare. However, deaths have occurred and anaphylaxis must be treated as a medical emergency at all times.

Adrenaline Autoinjector: An Adrenaline Autoinjector device, approved for use by the Commonwealth Government Therapeutic Goods Administration, which can be used to administer a single premeasured dose of adrenaline to those experiencing a severe allergic reaction or anaphylaxis. These may include EpiPen®, EpiPen®Jr, Anapen®300 or Anapen®150.

Anaphylaxis Management Training Course: A course in anaphylaxis management training that meets the requirements set out in MO706. The Guidelines currently state that the following are approved face-to-face courses for this purpose:

- Course in First Aid Management of Anaphylaxis 22300VIC
- Course in Allergy and Anaphylaxis Awareness 10710NAT (formerly 10313NAT).

ASCIA Anaphylaxis e-training for Victorian Schools is an approved alternative, which must be completed every 2 years and must be followed by a competency check by a School Anaphylaxis Supervisor. If using this option, two staff per school or per campus must be nominated as School Anaphylaxis Supervisors. These staff members must complete the *Course in Verifying the Correct Use of Adrenaline Autoinjector Devices 22303VIC* every 3 years.

General First Aid training does not meet anaphylaxis training requirements under MO706.

ASCIA: Australasian Society of Clinical Immunology and Allergy, the peak professional body of clinical immunology and allergy in Australia and New Zealand.

ASCIA Action Plan: This plan is a nationally recognised action plan for anaphylaxis developed by ASCIA. These plans are device specific; that is, they list the student's prescribed Adrenaline Autoinjector (EpiPen®/Anapen®300 or EpiPen®Jr/Anapen®150) and must be completed by the student's Medical Practitioner. This plan is one of the requirements of the student's Individual Anaphylaxis Management Plan.

A template for the ASCIA Action Plan can be found in the appendices to the Department's Anaphylaxis Guidelines.

Department: means the Victorian Department of Education and Training, or its successor.

Education Manager: includes the role of Principal of PRACE College.

Individual Anaphylaxis Management Plan: An individual plan for each student diagnosed as being at risk of anaphylaxis, developed in consultation with the

student's parents/guardian/carer. The Individual Anaphylaxis Management Plan includes the ASCIA Action Plan which describes the student's allergies, symptoms, and the emergency response to administer the student's Adrenaline Autoinjector should the student display symptoms of an anaphylactic reaction.

A template for the Individual Anaphylaxis Management Plan can be found in the appendices to the Department's *Anaphylaxis Guidelines*.

Medical Practitioner: This is a registered medical practitioner within the meaning of the *Health Professions Registration Act 2005*, but excludes a person registered as a non-practicing health practitioner.

Parent/guardian/carer: In relation to a child means any person who has parental responsibility for 'major long-term issues' as defined in the *Family Law Act 1975* (Cth) or has been granted 'guardianship' for the child pursuant to the *Children, Youth and Families Act 2005* (Vic) or other state welfare legislation.

PRACE: means the incorporated association (A0032713Z) which includes the Registered Training Organisation (4036) & PRACE College (2110).

PRACE College: means the section of PRACE that operates as an independent school operating from both the Merrilands and Mernda Campuses, under the registration number 2110.

School Leadership Team: consists of the Executive Officer of PRACE, Principal and Assistant Principal/s of PRACE College and other member/s of the PRACE Senior Management Team.

School Staff: means the Principal, Assistant Principal, and any person employed or engaged as a part of PRACE College (both Merrilands and Mernda campuses), including:

- to teach VCAL, or
- in an educational support role for the VCAL program, including teacher's aides / education support workers, youth workers, psychologists, or
- whom the Principal determines as part of the annual risk assessment process should comply with the school's anaphylaxis policy.

General Principles

PRACE will provide, 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.

PRACE will comply with *Ministerial Order No. 706: Anaphylaxis Management in Victorian Schools* (MO706), and with the *Anaphylaxis Guidelines* as published and amended by the Department from time to time.

In accordance with the above, the Principal will ensure that:

- Reasonable steps are taken to ascertain whether an enrolled student is at risk of anaphylaxis.

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- All school staff have adequate knowledge of anaphylaxis, allergens (triggers) and PRACE's policy and procedures in responding to an anaphylactic reaction.
 - PRACE engages with parents/guardians/carers of students who are diagnosed as being at risk of anaphylaxis, in assessing risks and developing risk minimisation strategies and management strategies for each individual student.
 - An Individual Anaphylaxis Management Plan is developed, in consultation with the student's parents/guardian/carer, for any student who has been diagnosed by a Medical Practitioner as being at risk of anaphylaxis, where the school has been notified of that diagnosis.
 - The Individual Anaphylaxis Management Plan is in place as soon as practicable after the student enrolls, and where possible before their first day at PRACE. Where this is not possible, an interim plan will be developed in the meantime.
 - The Individual Anaphylaxis Management Plan is kept up-to-date in accordance with the Anaphylaxis Guidelines.
 - Risk minimisation and prevention measures are implemented.
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Procedure

Organisational approach

1.1. Risk Minimisation and Prevention Strategies

PRACE will put in place Risk Minimisation and Prevention Strategies (refer to **Appendix A**) that are to be implemented when a student diagnosed as being at risk of anaphylaxis is under the care or supervision of PRACE staff in all relevant in-PRACE and out-of-PRACE settings. This includes (but is not limited to) the following:

- during classroom activities (including class rotations, specialist and elective classes);
- between classes and other breaks;
- in canteens;
- during recess and lunchtimes; and
- during special events including incursions, sports, cultural days, fetes or class parties, excursions and camps.

1.2. Anaphylaxis Emergency Response Procedures

The Principal, or their delegate, will maintain - and ensure all school staff have access to -

- a complete and up to date list of students identified as being at risk of anaphylaxis specific to each school campus
- details of Individual Management Plans and ASCIA Action Plans and where these are located at each school campus and during school

excursions, school camps and special events conducted, organised or attended by the school or the individual campus.

- an outline of the storage and accessibility of adrenaline autoinjectors specific to each campus, including those for general use, and
- PRACE's *First Aid Policy and Procedure*, and *Medical Conditions Management Policy and Procedure*.

In the event of an anaphylaxis emergency, school staff are to follow the student's Individual Anaphylaxis Management Plan and ASCIA Action Plan in conjunction with the Anaphylaxis Emergency Response Procedures in PRACE's *First Aid Policy and Procedure*.

The student should have a copy of their plan and their personal autoinjector with them at all times.

If for whatever reason they do not:

Onsite:

- Spare student personal autoinjectors are stored with their respective ASCIA Action Plans:
 - Merrilands Campus: Assistant Principal's Office. The items are located on the wall to the left of the door identified with each student's photo.
 - Mernda Campus: Assistant Principal's Office. The items are located on the wall to the left of the door identified with each student's photo.
- Autoinjectors for general use are stored in first aid kits and the Assistant Principal's office at Merrilands and Mernda campuses.

Offsite:

On excursions, camps and special events conducted, organised or attended by the college, the plans and spare Adrenaline Autoinjector will be located with the staff member in charge. A first aid kit with general use Adrenaline Autoinjector will also be kept in the PRACE vehicle.

1.3. Adrenaline Autoinjectors for General Use

The Principal will purchase Adrenaline Autoinjector(s) for General Use (purchased by PRACE College) and as a back up to those supplied by Parents.

The Principal will determine the number of additional Adrenaline Autoinjector(s) required at each campus according to the following relevant considerations specific to each campus:

- the number of students enrolled at each PRACE College campus who have been diagnosed as being at risk of anaphylaxis;
- the accessibility of Adrenaline Autoinjectors that have been provided by Parents of students who have been diagnosed as being at risk of anaphylaxis;

- the availability and sufficient supply of Adrenaline Autoinjectors for General Use in specified locations at each PRACE College campus including in the school yard, and at excursions, camps and special events conducted or organised by PRACE College; and
- the Adrenaline Autoinjectors for General Use have a limited life, usually expiring within 12-18 months, and will need to be replaced at PRACE College's expense, either at the time of use or expiry, whichever is first.

The Adrenaline Autoinjectors for General Use at each campus will be regularly checked by the administrative assistant at that campus, and maintained in accordance with PRACE's *First Aid Policy and Procedure*.

1.4. Communication Plan

The Principal is responsible for ensuring that a communication plan is developed to provide information to staff, students and parents/guardians/carers about anaphylaxis and PRACE's *Anaphylaxis Management Policy and Procedure*.

The Communication Plan must include strategies for advising Staff, students and Parents about how to respond to an anaphylactic reaction by a student in various environments including:

- during normal school activities at each campus including in the classroom, in the school yard, in all school buildings and sites; and
- during off-site or out of college activities, including excursions, breaks, camps and special event days conducted or organised by PRACE College.

Refer to **Appendix B** - Anaphylaxis Management Communication Plan.

1.5. Staff Training

It is the responsibility of the Principal to ensure that relevant PRACE staff:

- are appropriately trained; and
- participate in anaphylaxis briefings held at least twice per calendar year (with the first briefing to be held at the beginning of the school year) on:
 - PRACE's legal requirements as outlined in MO706
 - This *Anaphylaxis Management Policy and Procedure*,
 - The causes, symptoms and treatments of anaphylaxis,
 - Pictures of the students at the school at risk of anaphylaxis, the details of their medical condition, and risk management plans that are in place,
 - Location of, and access to, the students' backup EpiPens® and the school's general use auto-injectors,

- ASCIA Action Plans and how to administer an EpiPen®, including practising with a trainer EpiPen®,
- PRACE's *First Aid Policy and Procedure*, including the Emergency Procedures relating to anaphylaxis,
- On-going support and training.

In accordance with MO706, the briefing must be conducted by a member of the School Staff who has successfully completed an Anaphylaxis Management Training Course in the 2 years prior. This will be the Principal or their delegate.

A template presentation for the briefing can be downloaded from the Department's website.

It is PRACE policy that all School Staff complete a face-to-face Anaphylaxis Management Training Course every 3 years.

In the event that the relevant training and/or briefing has not occurred, the Principal will develop an interim Individual Anaphylaxis Management Plan in consultation with the parents/guardian/carer of any affected student with a medical condition that relates to allergy and the potential for anaphylactic reaction. The training and/or briefing will be provided to the relevant School Staff as soon as practicable after the student enrolls, and preferably before the student's first day at PRACE.

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

1.6. Annual Risk Management Checklist

The School Leadership Team will complete an annual Risk Management Checklist as published by the Department of Education and Training to monitor compliance with their obligations.

1.7. Annual Review of the Prace Anaphylaxis Policy and Procedure

The PRACE Anaphylaxis Policy and Procedure will be reviewed annually for approval by the PRACE Board of Management.

Ongoing management of students at risk of anaphylaxis

Step 1 - Identify students at risk of Anaphylaxis

1.1. Enrolment

At the enrolment interview, the interviewer will establish whether the student has any specialised health needs, including allergies and risk of anaphylaxis.

This will include a discussion about developing risk minimisation strategies and management strategies for the student.

In accordance with PRACE's *Medical Conditions Management Policy and Procedure*, the Student Medical Information Record must be completed as part of the enrolment process.

If the parent / guardian / carer indicates the student has been diagnosed as being at risk of anaphylaxis, they will be asked to provide an ASCIA Action Plan from the student's registered medical practitioner as soon as practicable.

If the ASCIA Action Plan is not provided prior to the student's first day at PRACE, the Assistant Principal, of the relevant campus, (or delegate) will consult with the student's parent / guardian / carer to establish an interim management plan.

Step 2 - Ensure ongoing management of anaphylaxis risk

2.1. Develop an Individual Anaphylaxis Management Plan

The Assistant Principal at each campus, or their delegate, will develop an Individual Anaphylaxis Management Plan in consultation with the parents/guardian/carer of any affected student with a medical condition that relates to allergy and the potential for anaphylactic reaction.

The Individual Anaphylaxis Management Plan will set out the following:

- information about the student's medical condition that relates to allergy and the potential for anaphylactic reaction, including the type of allergy/allergies the student has (based on a written diagnosis from a Medical Practitioner);
- strategies to minimise the risk of exposure to known and notified allergens while the student is under the care or supervision of PRACE staff for in-PRACE and out-of-PRACE settings including in PRACE yard, at camps and excursions, or at special events conducted, organised or attended by PRACE;
- the name of the person(s) responsible for implementing the strategies;
- information on where the student's medication will be stored;
- the student's emergency contact details; and
- an ASCIA Action Plan.

Students are to have a copy of their plan and their personal autoinjector with them at all times.

If for whatever reason they do not:

Onsite:

- Spare student personal autoinjectors are stored with their respective ASCIA Action Plans:
 - Merrilands Campus: Assistant Principal's Office. The items are located on the wall to the left of the door identified with each student's photo.
 - Mernda Campus: Assistant Principal's Office. The items are located on the wall to the left of the door identified with each student's photo.
- Autoinjectors for general use are stored in first aid kits and the Assistant Principal's office at Merrilands and Mernda campuses.

Offsite:

- On excursions, camps and special events conducted, organised or attended by the college, the plans and spare Adrenaline Autoinjector will be located with the staff member in charge. A first aid kit with general use Adrenaline Autoinjector will also be kept in the PRACE vehicle.
- The staff member in charge of the excursion must, for students under the age of 18 only, provide a copy of medical information forms to all other staff on the excursion and ensure student-specific medicines (i.e. EpiPens) and medical plans (i.e. anaphylaxis and asthma) are taken on the excursions and readily accessible.

The Assistant Principal, or their delegate, will ensure that the parent / guardian / carer is aware that they are responsible for:

- providing the ASCIA Action Plan;
- informing PRACE in writing if their child's medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, changes and if relevant, providing an updated ASCIA Action Plan;
- providing an up-to-date photo for the ASCIA Action Plan when that Plan is provided to the PRACE and when it is reviewed;
- providing PRACE with two Adrenaline Autoinjectors that are current and not expired for their child (one pen is to remain with the student and the other is to remain on site as a backup);
- participating in annual reviews of their child's Plan.

2.2. Implement Risk Minimisation and Prevention Strategies

The Principal will ensure that Risk Minimisation and Prevention Strategies are implemented while the student is under the care or supervision of PRACE staff (per **Appendix A** and the student's Individual Anaphylaxis Management Plan).

2.3. Review the plan

The student's Individual Anaphylaxis Management Plan will be reviewed, in consultation with the student's parents/guardian/carer in all of the following circumstances:

- annually;
- if the student's medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, changes;
- as soon as practicable after the student has an anaphylactic reaction at PRACE; and
- when the student is to participate in an off-site activity, such as camps and excursions, or at special events conducted, organised or attended by PRACE (e.g. class parties, elective subjects, cultural days).

As part of the review:

- The backup Adrenaline Autoinjector will be checked to ensure it is not expired or cloudy/discoloured. Parents/guardians/carers will be asked to provide a replacement if required.
- Parents/guardians/carers will be reminded to advise PRACE of any change in the student's medical condition throughout the year, and to provide an updated ASCIA Action Plan if relevant.

Glossary

EO – Executive Officer

VCAL – Victorian Certificate of Applied Learning

Related Policies and Procedures

First Aid Policy and Procedure

Medical Conditions Management Policy and Procedure

OHS Policy and Procedure

Risk Management Policy and Procedure

Student Welfare and Duty of Care (PRACE College) Policy and Procedure

Appendix A

Anaphylaxis Risk Minimisation and Prevention Strategies

In-school settings.

Classrooms	
1.	Keep a copy of the student's Individual Anaphylaxis Management Plan in the VCAL staff room, at reception and in the student file. Be sure the ASCIA Action Plan is easily accessible even if the Adrenaline Autoinjector is kept in another location.
2.	Liaise with Parents about food-related activities ahead of time.
3.	Use non-food treats where possible, but if food treats are used in class it is recommended that Parents of students with food allergy provide a treat box with alternative treats. Treat boxes should be clearly labelled and only handled by the student.
4.	Never give food from outside sources to a student who is at risk of anaphylaxis.
5.	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.
6.	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.
7.	Be aware of the possibility of hidden allergens in food and other substances used in cooking, food technology, science and art classes (e.g. egg or milk cartons, empty peanut butter jars).
8.	Ensure all cooking utensils, preparation dishes, plates, and knives and forks etc are washed and cleaned thoroughly after preparation of food and cooking.
9.	Have regular discussions with students about the importance of washing hands, eating their own food and not sharing food.
10.	The Principal, or their delegate, must inform casual relief teachers, specialist teachers and volunteers of the names of any students at risk of anaphylaxis, the location of each student's Individual Anaphylaxis Management Plan and Adrenaline Autoinjector, the School's Anaphylaxis Management Policy, and each individual person's responsibility in managing an incident. i.e. seeking a trained staff member.

Yard	
1.	If PRACE has a student who is at risk of anaphylaxis, sufficient School Staff on yard duty must be trained in the administration of the Adrenaline Autoinjector (i.e. EpiPen®/ Anapen®) to be able to respond quickly to an anaphylactic reaction if needed.
2.	The Adrenaline Autoinjector and each student's Individual Anaphylaxis Management Plan are easily accessible from the yard (i.e. at reception), and staff should be aware of their exact location. (Remember that an anaphylactic reaction can occur in as little as a few minutes).

3.	Have a Communication Plan in place so the student's medical information and medication can be retrieved quickly if a reaction occurs in the yard (at reception). All yard duty staff to carry a mobile phone. All staff on yard duty must be aware of the School's Emergency Response Procedures and how to notify the general office/first aid team of an anaphylactic reaction in the yard.
4.	Yard duty staff must also be able to identify, by face, those students at risk of anaphylaxis.
5.	Students with anaphylactic responses to insects should be encouraged to stay away from water or flowering plants. School Staff should liaise with Parents to encourage students to wear light or dark rather than bright colours, as well as closed shoes and long-sleeved garments when outdoors.
6.	Keep lawns and clover mowed and outdoor bins covered.
7.	Students should keep drinks and food covered while outdoors.

Special events (e.g. sporting events, incursions, class parties, etc.)

1.	If PRACE has a student at risk of anaphylaxis, sufficient School Staff supervising the special event must be trained in the administration of an Adrenaline Autoinjector to be able to respond quickly to an anaphylactic reaction if required.
2.	School Staff should avoid using food in activities or games, including as rewards.
3.	For special occasions, School Staff should consult Parents in advance to either develop an alternative food menu or request the Parents to send a meal for the student.
4.	Parents of other students should be informed in advance about foods that may cause allergic reactions in students at risk of anaphylaxis and request that they avoid providing students with treats whilst they are at School or at a special School event.
5.	Party balloons should not be used if any student is allergic to latex.

Out-of-school settings

Field trips/excursions/sporting events

1.	If PRACE has a student at risk of anaphylaxis, sufficient School Staff supervising the special event must be trained in the administration of an Adrenaline Autoinjector and be able to respond quickly to an anaphylactic reaction if required.
2.	A School Staff member or team of School Staff trained in the recognition of anaphylaxis and the administration of the Adrenaline Autoinjector must accompany any student at risk of anaphylaxis on field trips or excursions.
3.	School Staff should avoid using food in activities or games, including as rewards.
4.	The Adrenaline Autoinjector and a copy of the Individual Anaphylaxis Management Plan for each student at risk of anaphylaxis should be easily accessible and School Staff must be aware of their exact location.

<p>5. For each field trip, excursion etc, a risk assessment should be undertaken for each individual student attending who is at risk of anaphylaxis. The risks may vary according to the number of anaphylactic students attending, the nature of the excursion/sporting event, size of venue, distance from medical assistance, the structure of excursion and corresponding staff-student ratio.</p> <p>All School Staff members present during the field trip or excursion need to be aware of the identity of any students attending who are at risk of anaphylaxis and be able to identify them by face.</p>
<p>6. Consult Parents of anaphylactic students in advance to discuss issues that may arise; to develop an alternative food menu; or request the Parents provide a meal (if required).</p>
<p>7. Parents may wish to accompany their child on field trips and/or excursions. This should be discussed with Parents as another strategy for supporting the student who is at risk of anaphylaxis.</p>
<p>8. Prior to the excursion taking place School Staff should consult with the student's Parents and Medical Practitioner (if necessary) to review the student's Individual Anaphylaxis Management Plan to ensure that it is up to date and relevant to the particular excursion activity.</p>

Camps and remote settings

<p>1. Prior to engaging a camp owner/operator's services PRACE should make enquiries as to whether it can provide food that is safe for anaphylactic students. If a camp owner/operator cannot provide this confirmation to the School, then the School should consider using an alternative service provider.</p>
<p>2. The camp cook should be able to demonstrate satisfactory training in food allergen management and its implications on food-handling practices, including knowledge of the major food allergens triggering anaphylaxis, cross-contamination issues specific to food allergy, label reading, etc.</p>
<p>3. Do not sign any written disclaimer or statement from a camp owner/operator that indicates that the owner/operator is unable to provide food which is safe for students at risk of anaphylaxis. Schools have a duty of care to protect students in their care from reasonably foreseeable injury and this duty cannot be delegated to any third party.</p>
<p>4. Conduct a risk assessment and develop a risk management strategy for students at risk of anaphylaxis. This should be developed in consultation with Parents of students at risk of anaphylaxis and camp owners/operators prior to the camp dates.</p>
<p>5. School Staff should consult with Parents of students at risk of anaphylaxis and the camp owner/operator to ensure that appropriate risk minimisation and prevention strategies and processes are in place to address an anaphylactic reaction should it occur. If these procedures are deemed to be inadequate, further discussions, planning and implementation will need to be undertaken.</p>
<p>6. If PRACE has concerns about whether the food provided on a camp will be safe for students at risk of anaphylaxis, it should also consider alternative means for providing food for those students.</p>
<p>7. Use of substances containing allergens should be avoided where possible.</p>

8.	Camps should avoid stocking peanut or tree nut products, including nut spreads. Products that 'may contain' traces of nuts may be served, but not to students who are known to be allergic to nuts.
9.	The student's Adrenaline Autoinjector, Individual Anaphylaxis Management Plan, including the ASCIA Action Plan for Anaphylaxis and a mobile phone must be taken on camp. If mobile phone access is not available, an alternative method of communication in an emergency must be considered, e.g. a satellite phone.
10.	Prior to the camp taking place School Staff should consult with the student's Parents to review the students Individual Anaphylaxis Management Plan to ensure that it is up to date and relevant to the circumstances of the particular camp.
11.	School Staff participating in the camp should be clear about their roles and responsibilities in the event of an anaphylactic reaction. Check the emergency response procedures that the camp provider has in place. Ensure that these are sufficient in the event of an anaphylactic reaction and ensure all School Staff participating in the camp are clear about their roles and responsibilities.
12.	Contact local emergency services and hospitals well prior to the camp. Advise full medical conditions of students at risk, location of camp and location of any off-camp activities. Ensure contact details of emergency services are distributed to all School Staff as part of the emergency response procedures developed for the camp.
13.	Take an Adrenaline Autoinjector for General Use on a school camp, even if there is no student at risk of anaphylaxis, as a backup device in the event of an emergency.
14.	Adrenaline Autoinjector for General Use to be kept in the first aid kit and including this as part of the Emergency Response Procedures.
15.	The Adrenaline Autoinjector should remain close to the student and School Staff must be aware of its location at all times.
16.	The Adrenaline Autoinjector should be carried in the school first aid kit; however, Schools can consider allowing students, particularly adolescents, to carry their Adrenaline Autoinjector on camp. Remember that all School Staff members still have a duty of care towards the student even if they do carry their own Adrenaline Autoinjector.
17.	Students with anaphylactic responses to insects should always wear closed shoes and long-sleeved garments when outdoors and should be encouraged to stay away from water or flowering plants.
18.	Cooking and art and craft games should not involve the use of known allergens.
19.	Consider the potential exposure to allergens when consuming food on buses and in cabins.

Appendix B

Anaphylaxis Management Communication Plan

This Communication Plan outlines PRACE College's strategies for providing information to all PRACE College staff, students and parents/guardians/carers about anaphylaxis and the PRACE *Anaphylaxis Management Policy and Procedure*.

Raising Staff Awareness

All PRACE College staff (School Staff) are briefed twice yearly by the Principal (or delegate staff member who has current anaphylaxis management training) regarding:

- PRACE's legal requirements as outlined in Ministerial Order 706
- This *Anaphylaxis Management Policy and Procedure*
- Recognising signs and symptoms of anaphylaxis
- Students currently at PRACE College who are diagnosed as being at risk of anaphylaxis, their allergens, and risk management plans that are in place
- Location of, and access to, the students' backup EpiPens®
- ASCIA Action Plans and how to administer an EpiPen®
- PRACE's *First Aid Policy and Procedure*
- Staff's role in responding to anaphylactic reactions
- On-going support and training.

The first briefing will be held at the beginning of the school year.

All newly employed School Staff are briefed on the above information, and are required to read the *Anaphylaxis Management Policy and Procedure* as part of induction.

All School Staff will complete one of the following approved face-to-face anaphylaxis management training courses every 3 years:

- Course in First Aid Management of Anaphylaxis 22300VIC
- Course in Anaphylaxis Awareness 10710NAT (formerly 10313NAT)

Raising Student Awareness

Teachers will discuss anaphylaxis with their students at induction, with a few key messages including:

- Always take food allergies seriously – severe allergies are no joke.
- Don't share your food with friends who have food allergies.
- Wash your hands after eating.
- Know what your classmates are allergic to.
- If a student becomes sick, get help immediately even if the student does not want you to.
- Be respectful of a student's adrenaline autoinjector.

- Don't pressure students to eat food that they are allergic to.

Fact sheets or posters are displayed in the classrooms and canteen to raise awareness.

Raising Parent/Guardian/Carer Awareness

The school will develop an open and cooperative relationship with parents so that they can feel confident that appropriate management strategies are in place.

Students and parents/guardians/carers are informed about PRACE's *Anaphylaxis Management Policy and Procedure* via the VCAL Student Handbook.

At enrolment, students and/or their parents/guardians/carers are asked to provide information about medical conditions, including allergies. This information is discussed at the enrolment interview, and documented on the Student Medical Information Record.

When a student is identified as being at risk of anaphylaxis, parents/guardians/carers will be informed of PRACE's *Anaphylaxis Management Policy and Procedure* and will be given a copy to keep.

The Principal, or their delegate, will:

- work with parents/guardians/carers to develop an Individual Anaphylaxis Management Plan to be reviewed yearly or after an anaphylactic reaction
- inform parents/guardians/carers in writing that the adrenaline autoinjector needs to be replaced one month prior to the expiry date, and follow up if the autoinjector is not replaced
- ensure parents/guardians/carers are aware that they need to:
 - provide an ASCIA Action Plan to the school yearly that is signed by the student's medical practitioner, and has an up-to-date photo of the student
 - provide two adrenaline autoinjectors that are not expired, and any other medications required e.g. antihistamines, and to replace by expiry
 - work with the school to develop an Individual Management Plan and review it yearly or after an anaphylactic reaction
 - keep the school updated with any changes to the student's allergies.

Raising School Community Awareness

Information is provided to the school community via the VCAL Student Handbook.

Posters to raise awareness about anaphylaxis are displayed around the school to increase understanding of the condition, symptoms, and how to respond to an anaphylactic reaction.

**Management of Anaphylaxis:
School and Parents/Guardian/Carer responsibilities**

