



ALLERGEN AND ANAPHYLAXIS MANAGEMENT POLICY

Purpose

This Policy sets out how Mount Scopus Memorial College ("MSMC") ("the College") promotes allergy awareness and manages student allergies including where students are at risk of anaphylaxis.

Scope

The Policy applies to the College Executive, employees, contractors, volunteers, and other authorised personnel engaged to perform services on the College's premises or College-organised activities and events (including those that occur offsite). For the purpose of this Policy, collectively, these individuals are referred to as 'staff'.

Additionally, this Policy also applies to students and their parents/carers.

This Policy should be read in conjunction with the Allergen and Anaphylaxis Procedure, First Aid Policy and the Emergency Management Plan.

Policy Statement

MSMC is committed to:

- complying with Ministerial Order 706 Anaphylaxis Management in Victorian Schools (MO 706), as well as the Victorian Department of Education and Training's anaphylaxis guidelines
- provide, as far as practicable, a safe and supportive environment in which students with allergies, including those at risk of anaphylaxis, can participate equally in all aspects of schooling
- raise awareness of allergies, the risk of anaphylaxis, and the College's Allergens and Anaphylaxis Policy in the College community
- engage with parents/guardians of each student with an allergy when assessing risks and developing risk minimization 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.

Allergic reactions occur when the immune system reacts to substances (allergens) in the environment that are usually harmless. Allergic reactions can be mild, moderate, or severe.

Anaphylaxis is the most severe form of allergic reaction. Anaphylaxis is life-threatening and requires prompt administration of adrenaline through an adrenaline (epinephrine) injector (such as an EpiPen® or Anapen®).

The most common allergies in school-aged children are peanuts, cow's milk, egg, tree nuts (such as cashews and walnuts), wheat, soy, sesame, and certain insect bites and stings (particularly bees, wasps, ants, and ticks).

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.

The key to the prevention of allergic reactions in the College is:

- to aim to be a nut aware College which means we aim to not have food containing nuts on the premises or at extra curricular activities organised by the College
- to have knowledge of students who have been diagnosed as being at risk, awareness of allergies, and prevention of exposure to those triggers that cause allergic reactions.
- to have partnerships between the College and parents/guardians in helping students avoid exposure as well as providing age-appropriate education for students.
- to understand that minimisation strategies to help reduce the risk of allergic reactions are everyone's responsibility, including the Principal and all College staff, parents/guardians, students, and the broader College community.
- is to train staff to recognise an allergic reaction and a potential anaphylaxis risk and treat it appropriately in an emergency.

Any attempt to harm a student at risk of anaphylaxis with an allergen is treated as a serious and dangerous incident and dealt with accordingly under the Bullying Prevention and Intervention Policy and Procedures.

Being Allergy Aware

Given the number of substances to which a student may be allergic, it is not possible to remove all allergens.

It is better for the College community to become aware of the risks associated with allergies and for the College to implement practical, age-appropriate strategies to minimise exposure to known allergens. We therefore consider that being 'allergy aware' is a more appropriate term.

Being Nut Aware

While we do not claim to be 'nut-free', minimising exposure to particular foods such as peanuts and tree nuts, which are not staple foods that provide essential nutrients, can reduce the level of risk. This includes removing nuts, nut spreads and products containing nuts from the College canteen and from being served at co-curricular and extra curricular classes but does not include removing products that 'may contain traces' of peanuts or tree nuts. Foods that have 'May contain...' statements can be consumed by students without a food allergy in the same location as students with a food allergy as long as they are not shared with students with a food allergy. We acknowledge it is important that students with allergies are not isolated from other students.

We request that parents/guardians do not include nuts, nut spreads or products containing nuts in students lunch boxes as a strategy to reduce risk to the students.

Raising Student Awareness

Peer support and understanding are important for the student at risk of allergies (in particular anaphylaxis).

The College raises awareness through fact sheets or posters displayed around the College, including Cafe and kitchen garden, FKI DC, and OSHC preparation areas.

We are encouraging class teachers to discuss the topic with students in class, with a few simple key messages:

- always take food allergies seriously – severe allergies are no joke
- don't share your food and eating utensils with friends who have food allergies or pressure them to eat food that they are allergic to
- not everyone has allergies – discussing common symptoms
- wash your hands before and after eating
- know what your friends are allergic to

- if a schoolmate becomes sick, get help immediately
- be respectful of a schoolmate's medical kit.

Raising General College Community Awareness

Mount Scopus Memorial College will provide information about our allergy awareness strategy to the broader College community, including parents, through newsletters, fact sheets, posters, and other publications.

Liaising with Parents / Carers of Students with Allergies and Anaphylaxis

We acknowledge that parents/carers of a student who is at risk of allergies (in particular anaphylaxis) may experience high levels of anxiety about sending their child to school and will encourage an open and cooperative relationship with parents/carers so that they feel confident that appropriate risk minimisation strategies are in place. Risk minimisation strategies are documented in the Allergen and Anaphylaxis Management Procedure.

One way we can do this is to liaise with parents/guardians about food-related activities ahead of time. We will also reduce anxiety by increasing education, awareness, and support from the College community.

Risk Management Checklist

To monitor our obligations, the **Principal** will complete an annual Risk Management Checklist (utilising the latest version from the Department of Education's Anaphylaxis page) and included in the [Anaphylaxis Guidelines](#).

Roles and Responsibilities

In line with the Anaphylaxis guidelines set out in MO 76 –

The College will:

Whenever a student with an allergy or at risk of anaphylaxis is under the care or supervision of Mount Scopus Memorial College, including excursions, yard duty, camps, Shabbatons and special event days, ensure that there are a sufficient number of staff present who have up-to-date training and know how to prevent, recognise and treat allergic reactions, including anaphylaxis.

The **Principal** is responsible for:

- ensuring that the College develops, implements and annually reviews this Policy in accordance with Ministerial Order No. 706 and the Anaphylaxis Guidelines
- actively seeking information to identify students with severe life-threatening allergies or those who have been diagnosed as being at risk of anaphylaxis, either at the time of enrolment or at the time of diagnosis (whichever is earlier)
- ensuring that parents/carers provide an ASCIA (Australasian Society of Clinical Immunology and Allergy) Action Plan for Anaphylaxis which has been completed and signed by the student's medical practitioner and contains an up-to-date photograph of the student
- ensuring that an Individual Anaphylaxis Management Plan is developed in consultation with the student's parents/carers for any student that has been diagnosed by a medical practitioner with a medical condition relating to allergy and the potential for an anaphylactic reaction, where the College has been notified of that diagnosis
- ensuring that the Individual Anaphylaxis Management Plan must be in place as soon as practicable after the student enrolls at the College, and where possible before the student's first day of attendance

- ensuring students' Individual Anaphylaxis Management Plans are appropriately communicated to all relevant staff, casual relief teachers, adult *madrachim* (leaders), sherut girls, contractors, and volunteers
- ensuring that the café contractor and all its employees can demonstrate satisfactory training in the area of food allergy and anaphylaxis and its implications for food-handling practices
- ensuring that parents/carers provide the College with two adrenaline autoinjector for their child (one to remain on campus, the second supplied for camps/requested excursions), for which the expiry date is at least 6 months in the future, and a replacement adrenaline autoinjector when requested to do so
- ensuring that an appropriate Communication Plan is developed to provide information to all College staff, students and parents/carers about anaphylaxis and this Policy
- ensuring there are procedures in place for providing information to the College volunteers and casual relief staff about:
 - students who are at risk of anaphylaxis, and their role in responding to an anaphylactic reaction of a student in their care
 - that the Communication Plan is in place to provide information to all staff ensuring there is a sufficient number of trained staff present to respond to an anaphylactic emergency at any on-campus or off-campus College organised event.

Casual relief staff regularly employed at the College are encouraged to undertake the ASCIA anaphylaxis e-training for Victorian schools to:

- ensure that relevant College staff have successfully completed an approved Anaphylaxis Management Training Course in the prior three years (for face-to-face training) or two years (for the ASCIA e-training)
- ensure that College staff who are appointed as Anaphylaxis Supervisor(s) are appropriately trained in the Course in Verifying the Correct Use of Adrenaline Autoinjector Devices (every three years)
- ensure that all College staff are briefed at least twice a year by the Anaphylaxis Supervisor (or other appropriately trained member of the College staff), with the information covered including:
 - this Policy
 - the causes, symptoms, and treatment of anaphylaxis
 - the identities of students diagnosed as being at risk of anaphylaxis and the location of their medication
 - how to use an adrenaline autoinjector, including hands-on practice with an adrenaline autoinjector trainer device (that does not contain adrenaline)
 - the College's general first aid and emergency procedures
 - the location of adrenaline autoinjector devices prescribed for individual students that have been purchased by
 - their family
 - the location of adrenaline autoinjector devices that have been purchased by the College for general use
- allocate time, such as during staff meetings, to discuss, practise and review this Policy. Practise using the adrenaline
- autoinjector trainer devices as a group and undertake drills to test the effectiveness of the College's general first aid procedures
- encourage regular and ongoing communication between parents and College staff about the current status of the student's allergies, the College's policies, and their implementation
- ensure that the student's Individual Anaphylaxis Management Plan is reviewed in consultation with parents
 - annually at the beginning of each school year
 - when the student's medical condition changes
 - as soon as practicable after a student has an anaphylactic reaction at school
 - whenever a student is to participate in an off-site activity such as camps or excursions or at special events

- conducted, organised or attended by the College
- ensure that, where students at risk are under the care or supervision of the school outside of normal class activities
- there is a sufficient number of appropriately trained staff present
- ensure the Risk Management Checklist for anaphylaxis is completed and reviewed annually
- arrange to purchase and maintain an appropriate number of adrenaline autoinjectors for general use to be part of
- the College's first aid kit, stored with a copy of the general ASCIA Action Plan for Anaphylaxis (orange).

College Anaphylaxis Supervisors (Health Centre Nurses)

Anaphylaxis Supervisors must complete the [School Anaphylaxis Supervisor Checklist](#) in conjunction with the Principal and other College staff to ensure that responsibilities, training requirements and tasks relating to anaphylaxis are being met by the College.

Anaphylaxis Supervisors:

- work with the Principal to develop, implement, and regularly review this Policy
- obtain regular training in how to recognize and respond to an anaphylactic reaction, including administering an adrenaline autoinjector
- verify the correct use of adrenaline autoinjector (trainer) devices by other College staff undertaking an Online Training Course
- provide access to the adrenaline autoinjector (trainer) device for practice by College staff
- send reminders to staff or information to new staff about anaphylaxis training requirements and liaise with the Principal to maintain records of training undertaken by staff at the College
- lead the twice-yearly anaphylaxis College briefing
- develop College-specific scenarios to be discussed at the twice-yearly briefing to familiarise staff with responding to an emergency requiring anaphylaxis treatment, for example:
 - if a bee sting occurs on College grounds and the student is conscious
 - an allergic reaction where the student has collapsed on College grounds and the student is not conscious
- keep an up-to-date register of students at risk of anaphylaxis
- keep a register of adrenaline autoinjectors, including a record of when they are “in” and “out” from the central storage
- point (for instance, when they have been taken on excursions, camps etc)
- work with the Principal, parents/carers and students to develop, implement, and review each Individual Anaphylaxis Management Plan to:
 - ensure that the student’s emergency contact details are up to date
 - ensure that the student’s ASCIA Action Plan for Anaphylaxis matches the student’s supplied adrenaline
 - autoinjector regularly checks that the student’s adrenaline autoinjector is not out of date, such as at the beginning or end of each term, and records this information in the register of adrenaline autoinjectors
 - inform parents in writing that the adrenaline autoinjector needs to be replaced one month prior to the expiry
 - date, and follow up with parents if the autoinjector is not replaced
 - ensure that the student’s adrenaline autoinjector is stored correctly (at room temperature and away from light) in an unlocked, easily accessible place
 - ensure that a copy of each student’s ASCIA Action Plan for Anaphylaxis is stored with that student’s adrenaline autoinjector
- provide advice and guidance to College staff about anaphylaxis management in the College, and undertake regular risk identification, and implement appropriate minimisation strategies
- work with College staff to develop strategies to raise their own, students and College community's awareness about severe allergies
- provide or arrange post-incident support (such as counseling) to students and College staff, if appropriate.

Enrolments Office assist in the notification of students diagnosed with Anaphylaxis by:

- advising Health Centre staff of any student who has been diagnosed by a medical practitioner as being at risk of anaphylaxis with regard to the student's medical diagnosis so it can be recorded and managed by the Health Centre staff at the appropriate campus.

Staff are responsible for:

- knowing and understanding this Policy and the College's associated Anaphylaxis Procedure
- not bringing nuts, nut spread and nut products onto College premises or to College organised activities and events such as excursions, camps, trips, sports events, Shabbatons, and/or other co-curricular activities
- knowing the identity of students who are at risk of anaphylaxis; know them by face and if possible, what their specific allergy is
- understanding the causes, symptoms, and treatment of anaphylaxis
- obtaining regular training in how to recognise and respond to an anaphylactic reaction, including administering an adrenaline autoinjector
- knowing where to find a copy of each student's ASCIA Action Plan for Anaphylaxis quickly, and follow it in the event of an allergic reaction
- knowing the College's general first aid and emergency response procedures, and understand their role in relation to responding to an anaphylactic reaction
- knowing where students' adrenaline autoinjectors and the adrenaline autoinjectors for general use are kept
- knowing and follow the risk minimization strategies in the student's Individual Anaphylaxis Management Plan
- planning for special class activities (such as cooking, art and science classes), or special occasions (such as excursions, incursions, sports days, camp, cultural days, Shabbatons), either at the College, or away from the College
- avoiding the use of food treats in class or as rewards, if these are unavoidable, ensure these treats have been carefully checked for allergens before each use.
- working with parents/carers to provide appropriate treats for students at risk of anaphylaxis, or appropriate food for their child if the food the College/class is providing may present an allergy risk
- being aware of the possibility of hidden allergens in foods and of traces of allergens when using items such as egg or milk cartons in art or cooking classes
- being aware of the risk of cross-contamination when preparing, handling and displaying food
- making sure that tables and surfaces are wiped down regularly and that students wash their hands before and after handling food raise student awareness about allergies and anaphylaxis, and the importance of each student's role in fostering a College environment that is safe and supportive for their peers.

All staff must follow the anaphylaxis management guidelines set out in this Policy, be allergy aware and actively promote Mount Scopus Memorial College as an allergy-aware school.

Parents, Carers and Students are responsible for:

- not bringing nuts and nut products onto College premises or to College organised activities and events such as excursions, camps, trips, sports events, Shabbatons, and/or other co-curricular activities.

The **Parents and Carers of Students with Anaphylaxis** must:

- inform the College in writing, either at enrolment or diagnosis, of the student's allergies, and whether the student has been diagnosed as being at risk of anaphylaxis
- obtain and provide the College with an ASCIA Action Plan for Anaphylaxis from the student's medical practitioner that details:
 - their condition
 - any medications to be administered
 - any other relevant emergency procedures

- immediately inform College staff in writing of any changes to the student's medical condition and if necessary,
- obtain and provide an updated ASCIA Action Plan for Anaphylaxis
- provide the College with an up to date photo of the student's ASCIA Action Plan for Anaphylaxis when the plan is reviewed
- meet with and assist the College to develop the student's Individual Anaphylaxis Management Plan, including risk minimization and management strategies
- share as much detailed information as possible. For example, circumstances surrounding previous anaphylaxis, diagnosis of asthma, medications taken at home
- provide the College with two (one to remain on campus and the second to be sent to camps/requested excursions). Adrenaline Autoinjectors for which the expiry date is at least 6 months in the future and any other medications that are current and not expired
- replace the student's Adrenaline Autoinjector and any other medication as needed, before their expiry date or when used
- assist College staff in planning and preparation for the student prior to camps, field trips, incursions, excursions or special events (such as class parties, sport days, cultural days, or Shabbatons)
- if requested by College staff, assist in identifying and/or providing alternative food options for the student when needed
- inform the College in writing of any changes to the student's emergency contact details
- participate in reviews of the student's Individual Anaphylaxis Management Plan
- inform the College if their child's medical condition changes and, if relevant, provide an updated ASCIA Action Plan.

Implementation

Anaphylaxis is a severe, rapidly progressive allergic reaction that is potentially life threatening. It must be treated as a medical emergency, requiring immediate treatment and urgent medical attention.

Common allergens in school aged children are peanuts, eggs, tree nuts (such as cashews), cow's milk, fish and shellfish, wheat, soy, sesame, latex, certain insect stings, and medications.

Sights and symptoms of a mild to moderate allergic reactions include:

- swelling of the lips, face, and eyes
- hives or welts
- tingling in the mouth

Signs and symptoms of anaphylaxis, a severe allergic reaction, can include:

- difficult/noisy breathing
- swelling of tongue
- difficulty talking and/or hoarse voice
- wheeze or persistent cough
- persistent dizziness or collapse
- student appears pale or floppy
- abdominal pain and/or vomiting.

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

Treatment

Adrenaline given as an injection into the muscle of the outer mid-thigh is the first aid treatment for anaphylaxis. Individuals diagnosed as being at risk of anaphylaxis are prescribed an adrenaline

autoinjector for use in an emergency. These adrenaline autoinjectors are designed so that anyone can use them in an emergency.

Managing Students at Risk of Anaphylaxis - Preventative Strategies

The College adopts the following risk management preventative strategies:

- communicating about anaphylaxis, in relation to the College's communication plan (as outlined in the [Allergen and Anaphylaxis Procedure](#))
- strongly encouraging all school age students at risk of anaphylaxis to be responsible and educated in the identification and management of their allergies
- training staff in anaphylaxis management (including how to administer an adrenaline auto-injector)
- maintaining a complete and up to date list of students identified as having a medical condition that relates to allergy and the potential for anaphylactic reaction
- communicating to staff in writing identified anaphylactic students across the College
- making sure the list of identified anaphylactic students is quickly accessible to staff and is displayed (including in Cafe kitchen, Garden Kitchens, FKI DC kitchen and all College kitchens and staff rooms)
- implementing Individual Anaphylaxis Management Plan (IAMP's) and Anaphylaxis Risk Minimisation Plans (ARMPs) for camps for affected students
- purchasing of adrenaline auto-injectors for general use
- completing an Annual Risk Management Checklist.

The College will ensure that it implements these prevention strategies, and more detailed strategies which are noted in the College's Anaphylaxis procedure, to minimise the risk of a student suffering an anaphylactic reaction. The strategies are adapted to particular environments and situations.

Signage

Allergy awareness signage is posted in various locations around the **College**.

ASCIA Action Plans are **in the Red Bags with the Epipens**.

With permission from parents/carers, it may be appropriate to have a student's name, photo and the foods they are allergic to, displayed in other locations around the **College**.

Each student's individualised anaphylaxis care plan will be reviewed, in consultation with the student's parents/guardians:

- annually, and as applicable
- if the student's condition changes
- immediately after the student has an anaphylaxis reaction.

Where staff and parents/guardians have difficulty agreeing on management strategies, communication with the student's medical practitioner should be considered.

ASCIA Action Plans

The ASCIA Action Plan is just one part of the individualised anaphylaxis care plan for every child at risk of anaphylaxis and details emergency management of the student's condition.

There are different ASCIA Action Plans. For more information refer to the [ASCIA website](#):

- [ASCIA Action Plan for Allergic Reactions \(Green\)](#) – this plan is for students who have not been prescribed an adrenaline autoinjector. These students usually have mild to moderate allergies and are at low risk of having anaphylaxis, but there is still a risk.

- [ASCIA Action Plan for Drug \(Medication\) Allergy \(Green\)](#) - this plan is for students with medication allergies who are not usually prescribed an adrenaline injector.
- [ASCIA Action Plan for Anaphylaxis \(Red\)](#) – this plan is for individuals who have been prescribed an adrenaline autoinjector. These students have usually had a previous severe allergic reaction/anaphylaxis to triggers (other than medications) and are those deemed to be at high risk by their doctor or medical practitioner.
- [ASCIA First Aid Plan for Anaphylaxis \(Orange\)](#) - this plan is for adrenaline autoinjectors that are for general use. This plan has no space for personal details, can be used as a poster, and must be stored with any adrenaline autoinjector for general use that is not prescribed for a specific person (that is, it should sit in a **College** first aid kit for use on anyone showing signs and symptoms of anaphylaxis).

The ASCIA Action Plan must be completed and signed by a medical practitioner.

The ASCIA Action Plan is to be renewed at least every 18-24 months (most students renew their ASCIA Action Plan with each new prescription of adrenaline autoinjector as they expire every 12-18 months).

Parents/guardians of students with an ASCIA Action Plan must provide a current copy of the current ASCIA Action Plan signed by the student's medical practitioner to the College.

ASCIA Action Plans will be documented, communicated, and displayed, as necessary, considering any privacy requirements.

Individual Anaphylaxis Management Plans for each individual student includes:

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

The Health Centre at each campus will provide the IAMP form to parents relevant to the student and campus.

Anaphylaxis Risk Minimisation Plan for Camps for each individual student includes:

- an ARMP completed by College nurses prior to each camp and in consideration of the individual student's anaphylactic needs
- an outline of the roles and responsibilities for the College, the parents, the students and the caterer and includes the specific role of an MSMC staff member on camp, designated to oversee catering with the College's caterer or with an external caterer
- plans sent via email by the Health Centre to parents, who confirm receipt. By reading and acknowledging this camp plan, parents are providing consent to allow ASCIA actions plans and other personal details to be shared with all camp staff.

Review and updates to Individual Anaphylaxis Plans

A student's Individual Anaphylaxis Plan will be reviewed and updated on an annual basis in consultation with the student's parents/carers. The plan will also be reviewed and, where necessary, updated in the following circumstances:

- as soon as practicable after the student has an anaphylactic reaction at school
- if the student's medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, changes
- when the student is participating in an off-site activity, including camps and excursions, or at special events including Shabbatons and co-curricular school organised events.

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

Location of Plans and Adrenaline Autoinjectors

Storage by students

- For students in the ELC and at GBH or FKI it is not advised that they carry their medication kit (including their adrenaline auto-injector) on their person unless they travel to school without an adult present, or have been advised to do so by their medical practitioner.
- It is recommended that an adrenaline auto-injector be stored in an insulated wallet to ensure that the adrenaline is not affected by changes in temperature or light.

Storage by the College

Parents/carers must provide the College an adrenaline auto-injector and the necessary medications as outlined in the student's IAMP to be stored in the Health Centres.

Adrenaline Autoinjectors for General Use

The College will maintain a supply of adrenaline autoinjectors for general use, as a back-up to those provided by parents and carers for specific students, when a second dose of adrenaline is required before an ambulance has arrived, if an individual's device has misfired or accidentally been discharged and also for students who may suffer from a first time reaction at school.

Adrenaline auto-injector for general use are stored:

- In designated First Aid cabinet at the College easily accessible by staff. The specifics are noted in the College's Anaphylaxis procedure accessible to staff.

Whenever a student at risk of anaphylaxis participates in activities outside of the **College** such as excursions and camps, an appropriate number of the **College's** adrenaline autoinjectors for general use will be taken with an ASCIA Action Plan for Anaphylaxis for General Use. General use adrenaline injectors are additional to a student's prescribed adrenaline injector and are not a substitute for prescribed devices.

If there is no adrenaline autoinjector for general use available at the College, the College will use another student's device if an incident of anaphylaxis occurs. Staff will then supervise the student whose device was used to ensure minimisation of exposure to any risks.

Once a student's adrenaline injector has been used, the **College** must let parents/carers know so that it can be replaced as soon as possible. If a general use adrenaline injector has been used, the **College** must replace it immediately.

Training autoinjector devices will never be stored in the same location as general use adrenaline autoinjectors at the College and will be clearly labelled as training devices to avoid the risk of confusion.

The Principal is responsible for arranging the purchase of adrenaline auto-injectors for general use.

When determining how many general auto-injectors are for general use, risk based consideration is given to:

- the number of students enrolled at the College at risk of anaphylaxis
- the accessibility of adrenaline auto-injectors supplied by parents
- the availability of a sufficient supply of auto-adrenaline injectors for general use in different locations at the school, as well as at camps, excursions, and events
- the limited life span of adrenaline auto-injectors, and the need for general use adrenaline auto-injectors to be replaced when used or prior to expiry.

Management of College's Adrenaline Autoinjector(s) for General Use

The Principal reviews all adrenaline autoinjectors (both general use and prescribed) kept at the **College** visually on an annual basis to make sure they are not expired or damaged, and arranges for them to be replaced as necessary. Most adrenaline autoinjectors have a one-or-two-year expiry. Where an adrenaline autoinjector for general use is expired and no other device is available, the **College** may use this device if there is an incident of anaphylaxis, rather than using no device at all.

Emergency Response

In the event of an anaphylactic reaction, the emergency response procedures in this Policy must be followed, together with the school's general first aid procedures, emergency response procedures and the student's Individual Anaphylaxis Management Plan.

A complete and up to date list of students identified as being at risk of anaphylaxis is maintained by the Health Centre at each campus and taken on each camp or trip.

(a) Offsite activities

For **camps**, the College nurse will be responsible for maintaining a list of students at risk of anaphylaxis attending the special event, together with their Individual Anaphylaxis Management Plans and adrenaline autoinjectors, where appropriate.

For **excursions and special events**, a designated staff member will be responsible for maintaining a list of students at risk of anaphylaxis attending the excursion or special event, together with their Individual Anaphylaxis Management Plans and adrenaline autoinjectors, where appropriate.

The Allergens and Anaphylaxis Procedure (Annexure C) details emergency offsite responses relating to excursions, sports, camps, remote settings, overseas travel, work experience and community service.

(b) Onsite activities

Refer to the Anaphylaxis Procedure (Annexure C) for detailed emergency onsite responses in the classroom and school yard.

- (c) **In summary**, a student experiencing an anaphylactic reaction at school or during a school activity, College staff must:

Step	Action
1	<ul style="list-style-type: none"> ● Lay the person flat ● Not allow them to stand or walk ● If the student is unconscious, place them in the recovery position ● If breathing is difficult, allow them to sit with their legs outstretched ● Ensure the student is no longer exposed to the allergen or trigger ● Be calm and reassuring ● Do not leave them alone ● Seek assistance from another staff member or reliable student to: <ul style="list-style-type: none"> ● if on campus or camp call the College Nurse and ● locate the student's adrenaline autoinjector or the school's general use autoinjector, and the student's Individual Anaphylaxis Management Plan ● If the student's plan is not immediately available, or they appear to be experiencing a first time reaction, follow steps 2 to 5
2	<p>Administer EpiPen</p> <p>ALWAYS give the adrenaline autoinjector FIRST, and then the asthma reliever puffer if someone with known asthma and allergy to food, insects or medication has sudden severe breathing difficulty (including wheezing, persistent cough or hoarse voice) even if there are no skin symptoms</p>
3	Call an ambulance (000)
4	<ul style="list-style-type: none"> ● Until the ambulance arrives, the student must not be allowed to stand or walk (even if they appear well) and should remain lying flat or sitting with legs outstretched if breathing is difficult. ● Where an ambulance is not available, staff should follow the directions of the ambulance service. If the student needs to be transported to a health care service, staff should stretcher the student to a vehicle. They must not be allowed to stand or walk, even if they appear to be well. ● Seek advice from ambulance to administer further adrenaline doses (if other adrenaline autoinjectors are available) Further adrenaline auto-injectors may be given if no response after 5 minutes ● Commence CPR at any time if the student is unresponsive and not breathing normally
5	<p>Contact the student's emergency contacts</p> <ul style="list-style-type: none"> ● Onsite reaction: The Health Centre nurse is responsible for making contact with parents/carers following a reaction. ● In the event of an off-site reaction, responsibility for the communication firstly lies with the College Nurse or College contracted medic or the Teacher-in-Charge. ● Parents/carers will be advised of next steps and what they are required to do, which will largely depend on the circumstances (such as attending the hospital).

Generally, any used adrenaline autoinjectors should accompany a student to the hospital.

The student must remain in hospital for at least four hours of observation.

Communication in an emergency

In the event that a student suffers an anaphylactic reaction whilst in the care of the College, after staff have tended to the medical needs of the student (including by calling emergency services), in the first instance the College nurse and in the absence of College medical staff, the staff member must contact parents/carers.

Where communication with parents/carers is unsuccessful, the College will contact the emergency contact listed on that student's file.

Communication Plan

Knowledge of those students who have been diagnosed at risk, awareness of triggers (allergens), and prevention of exposure to these triggers are important in preventing anaphylaxis. This requires communication and partnerships between parents/carers and the College to ensure that certain foods or known and potential allergens are kept away from the student while these students are in the care of the College.

The Principal is responsible for the Communication Plan

This Policy is available on Mount Scopus Memorial College's website so that parents and other members of the school community can easily access information about the anaphylaxis management procedures.

Parents and carers of students who are enrolled at the College and are identified as being at risk of anaphylaxis will also be provided with a copy of this Policy.

The Principal is responsible for ensuring that all relevant staff, including casual relief staff, contractors, and volunteers are aware of this Policy and the College's procedures for anaphylaxis management. Casual relief staff, contractors, and volunteers who are responsible for the care and/or supervision of students, who are identified as being at risk of anaphylaxis, will also receive a verbal briefing on this Policy, their role in responding to an anaphylactic reaction, and where required, the identity of students at risk.

This communication plan sets out how the College provides information to all staff (including volunteers, contractors, and casual relief staff), students, and parents/carers about anaphylaxis and this Policy.

The Communication Plan which sets out how the College provides specific information to staff, volunteers, contractors, casual relief workers, students and parents are outlined in detail in the College's Anaphylaxis procedure.

Student Training

The College provides education and awareness for students to support students with an allergen.

This includes:

- reminding students about no food sharing
- hand washing after eating
- class discussion on how children without an allergy can support people with an allergy
- education of child with food allergy and teaching them how to manage when the allergen is around (at age appropriate level)
- all children knowing which classmates have a food allergy, telling a teacher quickly if a classmate looks sick or says they are sick

Staff Training

The Principal will ensure staff who are subject to training requirements participate in a briefing, to occur twice per calendar year with the first one to be held at the beginning of the school year. New staff to the College should undertake training before they start working at the College or on the first day of commencing work at the College.

Staff responsible for preparing and serving food, such as Café staff, kitchen garden cooking classes staff and volunteers should also undertake food allergen management training at least every two years. Untrained staff and volunteers will not be given the responsibility of preparing or serving food with or to students.

The Principal will ensure that the following College staff will be trained and briefed on anaphylaxis management:

- those who
 - conduct classes that students with a medical condition relating to allergy and the potential for anaphylactic reaction attend
 - College café contractors who sell food and provide ongoing catering services to the College
 - OSHC staff and contractors
- any further College staff (including volunteers, contractors, regular casual relief staff and trainees) that the Principal identifies, based on an assessment of the risk of an anaphylactic reaction occurring while a student is under the care or supervision of the College (including, for example, during excursions, yard duty, camps and special event days, FKI DC volunteers who organise school lunches)
- such staff will be advised about how to respond to an anaphylactic reaction through briefings at least twice per calendar year and training, in accordance with this Policy
- the College keeps records to ensure that all relevant staff have received the training and therefore, are able to respond to an anaphylactic reaction
- the College will communicate with relevant staff about the date, time and requirements of anaphylaxis training through its internal online network.

What training requirements must be met?

Staff who are subject to training requirements will have successfully completed:

- an accredited face-to-face anaphylaxis management training course in the three years prior, which includes a competency check in the administration of an adrenaline auto-injector; or
- an accredited online anaphylaxis management training course in the two years prior, which includes a competency check in the administration of an adrenaline auto-injector.

MSMC allocated teaching staff (Primary and Secondary) complete First Aid (HLTAID011), Anaphylaxis Training (22578VIC) and Asthma Training (22556VIC).

ELC staff, complete the Childcare First Aid (HLTAID012), Anaphylaxis Training (22578VIC) and Asthma Training (22556VIC).

All other teaching staff must complete the online anaphylaxis training conducted by ASCIA (Australasian Society of Clinical Immunology and Allergy).

A briefing is conducted by a health centre staff member (an RN Nurse) who has successfully completed a face-to-face anaphylaxis management training course referred to above.

The Health Centre Nurse covers:

- this Policy
- preventing exposure to known allergens
- the causes, how to recognise signs and symptoms of a reaction and treatment of anaphylaxis
- the identities of students with a medical condition that relates to allergy and at risk of anaphylactic reaction, and where their medication is located

- student IAMPs and where they can be located, both on-site and off-site
- how to use an adrenaline auto-injector, including hands on practise with a trainer adrenaline auto-injector
- the College's general first aid and how to respond in an emergency and
- the location of, and access to, adrenaline auto-injectors that have been provided by parents or purchased by the College for general use.
- The College will also ensure staff understand that unexpected allergic reactions, including anaphylaxis might occur for the first time in students not previously identified as being at risk while in the College setting.

If training/briefing has not occurred in accordance with the above:

- the Principal will develop an interim plan in consultation with the parents/carers of any affected student with a medical condition that relates to allergy and the potential for anaphylactic reaction, and training must occur as soon as possible thereafter and
- staff who have not met training/briefing requirements must liaise with the Risk and Compliance Manager and Director of ELC, or Deputy Principal Primary or Deputy Principal Secondary as soon as possible, to ensure their workload does not involve them having sole supervision of any student with a medical condition that relates to an allergy and the potential for anaphylactic reaction.

Principal's obligation to ensure supervision by trained staff

When a student with a medical condition that relates to allergy and the potential for an anaphylactic reaction is under the College's care or supervision outside of normal class activities (such as in the school yard, at camps and excursions, Shabbatons, or at special events conducted, organised or attended by the College), the Principal will ensure that there is a sufficient number of staff present who have been trained in accordance with the requirements under clause 12 of MO 706.

Recording

The College keeps a record of

- staff training courses and briefings in the College's Health Centre records
- risk management strategies
- meetings relating to the development of individualised anaphylaxis care plans
- communications with parents
- any medical advice sought and provided.

Staff are encouraged to upload their individual record on their personal College file (Connx).

Incident Reporting

An incident report is to be completed for all allergic reactions in line with the **College's** incident reporting processes.

Following an incident, the **College** will review and consider any areas of improvement and whether support (such as counselling services) may be required for staff or students involved in or witnessing the incident.

Implementation

This Policy is implemented through a combination of:

- College premises inspections (to identify wasp nests and bee hives)
- staff training and supervision
- maintenance of medical records
- effective incident notification procedures
- effective communication procedures with the student's parents/carers
- initiation of corrective actions where necessary.

Consequences of Breach

Staff found to be in breach of the requirements of this Policy may be subject to disciplinary action, up to and including termination of employment (or engagement, where appropriate).

Legislative Requirements

- Education and Training Reform Act 2006 (Vic)

Standards and Guidelines

- Ministerial Order 706
- Anaphylaxis Guidelines

College Policies

- Allergens and Anaphylaxis Management Procedure
- Asthma Management Policy
- First Aid Policy
- Medication Policy
- Child Safety Wellbeing Policy
- Child Protection Policy
- Privacy Policy
- Risk Management Policy
- Emergency Management Policy

Related Documents

- Risk Management Checklist
- Anaphylaxis Risk Minimisation Plan for Camps
- Pre-Camp Checklist for Students with Anaphylaxis
- Designated Camp Anaphylaxis Supervisor Checklist
- ASCIA Action Plan for Allergic Reactions (Green)
- ASCIA Action Plan for Anaphylaxis for General Use (Orange)
- ASCIA Action Plan for Anaphylaxis (Red)

Resources

Allergy & Anaphylaxis Australia (A&AA):

- <https://allergyfacts.org.au/allergy-management/schooling-childcare>
- Approaching the management of anaphylaxis in schools/childcare

The Royal Children's Hospital anaphylaxis Support Advisory Line for all school anaphylaxis management enquiries: Tel: 1300 725 911 between the hours of 8.30am to 5.00pm, Monday to Friday.

Additional resources are available from the Department of Education and Training [website](#).

Policy Review

The College is committed to the continuous improvement of its Allergens and Anaphylaxis Management Policy.

Unless otherwise stated, this Policy remains in place until it is superseded by an amended version. This Policy will be reviewed annually in accordance with MO 706 or more often as circumstances require. Next scheduled review date is 2025.

Policy Schedule

Date Approved	Approver	Last Reviewed	Last Updated	Next Review Date
24/06/2024	Principal	1/12/2025	1/12/2025	1/12/2026