

Anaphylaxis

POLICY



CLUNES PRIMARY SCHOOL

PURPOSE

To explain to Clunes Primary School parents, carers, staff and students the processes and procedures in place to support students diagnosed as being at risk of suffering from anaphylaxis. This policy also ensures that Clunes Primary School is compliant with Ministerial Order 706 and the Department's guidelines for anaphylaxis management.

SCOPE

This policy applies to:

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

POLICY

School Statement

Clunes Primary School will fully comply with Ministerial Order 706 and the associated guidelines published by the Department of Education and Training.

Anaphylaxis

Anaphylaxis is a severe allergic reaction that occurs after exposure to an allergen. The most common allergens for school-aged children are nuts, eggs, cow's milk, fish, shellfish, wheat, soy, sesame, latex, grasses, certain insect stings and medication.

Symptoms

Signs and symptoms of a mild to moderate allergic reaction can 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.

Individual Anaphylaxis Management Plans

All students at Clunes Primary School who are diagnosed by a medical practitioner as being at risk of suffering from an anaphylactic reaction must have an Individual Anaphylaxis Management Plan. When notified of an anaphylaxis diagnosis, the Principal of Clunes Primary School is responsible for developing a plan in consultation with the student's parents/carers.

Where necessary, an Individual Anaphylaxis Management Plan will be in place as soon as practicable after a student enrolls at Clunes Primary School and where possible, before the student's first day.

Parents and carers must:

- obtain an ASCIA Action Plan for Anaphylaxis from the student's medical practitioner and provide a copy to the school as soon as practicable
- immediately inform the school in writing if there is a relevant change in the student's medical condition and obtain an updated ASCIA Action Plan for Anaphylaxis
- provide an up-to-date photo of the student for the ASCIA Action Plan for Anaphylaxis when that Plan is provided to the school and each time it is reviewed
- provide the school with a current adrenaline autoinjector for the student that has not expired;
- participate in annual reviews of the student's Plan.

Each student's Individual Anaphylaxis Management Plan must include:

- information about the student's medical condition that relates to allergies 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.

Review and updates to Individual Anaphylaxis Management Plans

A student's Individual Anaphylaxis Management 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 fetes and concerts.

Our school 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

A copy of each student's Individual Anaphylaxis Management Plan will be stored with their ASCIA Action Plan for Anaphylaxis at the Office, together with the student's adrenaline autoinjector. Adrenaline autoinjectors must be labelled with the student's name.

Risk Minimisation Strategies

To reduce the risk of a student suffering from an anaphylactic reaction at Clunes Primary School, we have put in place the following strategies:

- staff and students are regularly reminded to wash their hands after eating;
- students are discouraged from sharing food
- garbage bins at school are to remain covered with lids to reduce the risk of attracting insects
- gloves must be worn when picking up papers or rubbish in the playground;
- year groups will be informed of allergens that must be avoided in advance of class parties, events or birthdays
- a general use EpiPen will be stored at the Office for ease of access.
- 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.

Adrenaline autoinjectors for general use

Clunes Primary School will maintain a supply of adrenaline autoinjectors for general use, as a back-up to those provided by parents and carers for specific students, and also for students who may suffer from a first time reaction at school.

Adrenaline autoinjectors for general use will be stored at the Office and labelled "general use".

The Principal is responsible for arranging the purchase of adrenaline autoinjectors for general use, and will consider:

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

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 our designated Anaphylaxis ES support staff members and stored at the Office.

For camps, excursions and special events, a designated staff member 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.

If a student experiences an anaphylactic reaction at school or during a school activity, school staff must:

Step	Action
1.	<ul style="list-style-type: none">• Lay the person flat• Do not allow them to stand or walk• If breathing is difficult, allow them to sit• Be calm and reassuring• Do not leave them alone• Seek assistance from another staff member or reliable student to locate the student's adrenaline autoinjector or the school's general use autoinjector, and the student's Individual Anaphylaxis Management Plan, stored at the Office• 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 an EpiPen or EpiPen Jr (if the student is under 20kg)</p> <ul style="list-style-type: none">• Remove from plastic container• Form a fist around the EpiPen and pull off the blue safety release (cap)• Place orange end against the student's outer mid-thigh (with or without clothing)• Push down hard until a click is heard or felt and hold in place for 3 seconds• Remove EpiPen• Note the time the EpiPen is administered• Retain the used EpiPen to be handed to ambulance paramedics along with the time of administration – make notes to give to emergency personnel
3.	Call an ambulance (000)
4.	If there is no improvement or severe symptoms progress (as described in the ASCIA Action Plan for Anaphylaxis), further adrenaline doses may be administered every five minutes, if other adrenaline autoinjectors are available.
5.	Contact the student's emergency contacts.

If a student appears to be having a severe allergic reaction, but has not been previously diagnosed with an allergy or being at risk of anaphylaxis, school staff should follow steps 2 – 5 as above.

Communication Plan

This policy will be available on Clunes Primary School website so that parents and other members of the school community can easily access information about Clunes Primary School's anaphylaxis management procedures. The parents and carers of students who are enrolled at Clunes Primary School 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 and volunteers are aware of this policy and Clunes Primary School procedures for anaphylaxis

management. Casual relief staff and volunteers who are responsible for the care and/or supervision of students who are identified as being at risk of anaphylaxis will also receive a verbal briefing on this policy, their role in responding to an anaphylactic reaction and where required, the identity of students at risk.

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

Staff training

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

- School staff who conduct classes attended by students who are at risk of anaphylaxis
- School staff who conduct specialist classes, are employed as an Aide within the Clunes Primary School setting, have Yard Duty responsibilities, Office administration staff, all first aid trained staff and any other member of school staff as required by the principal based on a risk assessment.

Staff who are required to undertake training must have completed:

- an approved face-to-face anaphylaxis management training course in the last three years, or
- an approved online anaphylaxis management training course in the last two years.

Clunes Primary School uses the following training course - ASCIA eTraining course (with 22303VIC)

Staff are also required to attend a briefing on anaphylaxis management and this policy at least twice per year (with the first briefing to be held at the beginning of the school year), facilitated by a staff member who has successfully completed an anaphylaxis management course within the last 2 years including our designated School Anaphylaxis Supervisor. Each briefing will address:

- this policy
- the causes, symptoms and treatment of anaphylaxis
- the identities of students with a medical condition that relates to allergies and the potential for anaphylactic reaction, and where their medication is located
- how to use an adrenaline autoinjector, including hands on practice with a trainer adrenaline autoinjector
- the school's general first aid and emergency response procedures
- the location of, and access to, adrenaline autoinjectors that have been provided by parents or purchased by the school for general use.

When a new student enrolls at Clunes Primary School who is at risk of anaphylaxis, the Principal will develop an interim plan in consultation with the student's parents and ensure that appropriate staff are trained and briefed as soon as possible.

The Principal will ensure that while students at risk of anaphylaxis are under the care or supervision of the school outside of normal class activities, including in the school yard, at camps and excursions, or at special event days, there is a sufficient number of school staff present who have been trained in anaphylaxis management.

FURTHER INFORMATION AND RESOURCES

- School Policy and Advisory Guide:
 - [Anaphylaxis](#)

- [Anaphylaxis management in schools](#)
- Allergy & Anaphylaxis Australia: [Risk minimisation strategies](#)
- ASCIA Guidelines: [Schooling and childcare](#)
- Royal Children's Hospital: [Allergy and immunology](#)

REVIEW CYCLE AND EVALUATION

This policy was last updated in February 2020 and is scheduled for review in February 2021.

The Principal will complete the Department's Annual Risk Management Checklist for anaphylaxis management to assist with the evaluation and review of this policy and the support provided to students at risk of anaphylaxis.

Anaphylaxis Management School Twice-Yearly Briefing

For all Victorian Schools



Clunes Primary School- 1552



Education
and Training

The children that are diagnosed at risk of anaphylaxis at our school are:

Insert
picture of child
here
please

Insert
picture of child
here
please

Insert
picture of child
here
please

Insert
picture of child
here
please

Insert
picture of child
here
please

Insert
picture of child
here
please

Signs & symptoms of anaphylaxis



Education
and Training

Anaphylaxis is the most severe form of allergic reaction

It involves a change to BREATHING & / or CIRCULATION

Symptoms and signs of anaphylaxis:

- Difficult/noisy breathing
- Swelling of the tongue
- Swelling/tightness in throat
- Difficulty talking and/or hoarse voice
- Wheeze or persistent cough
- Persistent dizziness or collapse
- Pale and floppy (young children)

ASICA Anaphylaxis e-training

Legislation and policy sets out that all Victorian school staff working with a child or young person who is at risk of an anaphylactic reaction are required to undertake anaphylaxis training.



On advice from experts and stakeholders the Department is implementing a new best practice online training strategy. All Victorian school staff are now able to access Departmentally funded online training at their own convenience.



Once staff have completed the online training they will need to have their competency in using an autoinjector tested in person. From Term 1, 2016 every school will be asked to provide the names of 2 staff members (per campus) to undertake funded autoinjector competency check training, so they can verify the competency of all of the staff in their school who have undertaken the online training.

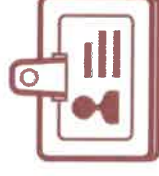


ASCIA Anaphylaxis e-training Cont.



Education
and Training

In our school (INSERT NAMES OF STAFF TRAINED TO UNDERTAKE AUTOINJECTOR COMPETENCY CHECKS) have been trained to undertake autoinjector competency check training.



ALL staff are asked to undertake the ASCIA e-training course. You will need to have your competency in using an autoinjector tested within 30 days of completing the online course.



Insert details on how your school will undertake the in-person autoinjector competency checks.

i.e. [School Anaphylaxis Supervisor's Name] will be undertaking competency checks in the school staff room on [insert date]



ACTION PLAN FOR Anaphylaxis

For EpiPen® adrenaline (epinephrine) autoinjectors

Name:

Date of birth:

Family/emergency contact name(s):

Work Ptc:

Home Ptc:

Mobile Ptc:

Plan prepared by medical or nurse practitioner:

Confirmed allergies:

Mild to moderate allergic reactions (such as hives or swelling) may not always occur before anaphylaxis

WATCH FOR ANY ONE OF THE FOLLOWING SIGNS OF ANAPHYLAXIS (SEVERE ALLERGIC REACTION)

- Difficulty/noisy breathing
- Swelling of tongue
- Swelling/tightness in throat
- Wheeze or persistent cough
- Difficulty talking and/or hoarse voice
- Persistent dizziness or collapse
- Pale and floppy (young children)

ACTION FOR ANAPHYLAXIS

- 1 Lay person flat - do NOT allow them to stand or walk
 - If unconscious, place in recovery position
 - If breathing is difficult - allow them to sit
 - 2 Give EpiPen® or EpiPen® Jr adrenaline autoinjector
 - 3 Phone ambulance - 000 (AU) or 111 (NZ)
 - 4 Phone family/emergency contact
 - 5 Further adrenaline doses may be given if no response after 5 minutes
 - 6 Transfer person to hospital for at least 4 hours of observation
- If in doubt give adrenaline autoinjector**
- Commence CPR at any time if person is unresponsive and not breathing normally

ALWAYS give adrenaline autoinjector FIRST, and then asthma reliever puffer if someone with known asthma and allergy to food, insects or medication has SUDDEN ONSET OF DIFFICULTY (including wheeze, persistent cough or hoarse voice) even if there are no skin symptoms

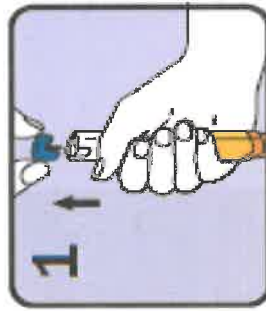
Adrenaline reliever medication prescribed: ☐ Y ☐ N

How to give EpiPen®

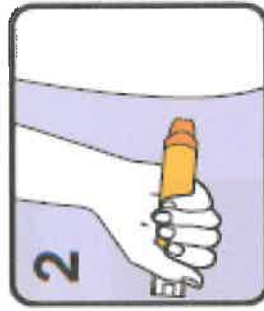
- 1 Form fist around EpiPen® and PULL OFF BLUE SAFETY RELEASE
- 2 Hold leg still and PLACE ORANGE END against outer mid-thigh (with or without clothing)
- 3 Push down HARD until a click is heard or felt and hold in place for 3 seconds REMOVE EpiPen®

All EpiPen®s should be held in place for 3 seconds regardless of instructions on device label

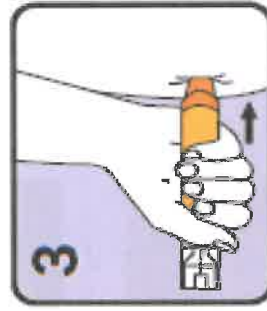
How to give EpiPen®



Form fist around EpiPen® and PULL OFF BLUE SAFETY RELEASE



Hold leg still and PLACE ORANGE END against outer mid-thigh (with or without clothing)



PUSH DOWN HARD until a click is heard or felt and hold in place for 3 seconds REMOVE EpiPen®

All EpiPen®s should be held in place for 3 seconds regardless of instructions on device label

First Aid and Emergency Response



Education
and Training

- All staff need to know the school's Anaphylaxis Policy and Emergency Procedures
- The student's ASCIA Action Plan For Anaphylaxis must be followed if responding to an anaphylactic reaction
- Using the adrenaline autoinjector (trainer) devices, practice scenarios requiring treatment

On-going support and training resources



Education
and Training

Anaphylaxis Guidelines:

published by Department of Education & Training in 2016

<http://www.education.vic.gov.au/school/teachers/health/Pages/anaphylaxischl.aspx>

Anaphylaxis Advisory Support Line:

1300 725 911 or 93454235

ASCIA Action Plans for Anaphylaxis:

can be downloaded from the ASCIA website
www.allergy.org.au

<https://etrainingvic.allergy.org.au>

Department of Allergy & Immunology, Royal Children's Hospital:

www.rch.org.au/allergy

Allergy & Anaphylaxis Australia Inc:

website or phone line support 1300 728 000 or
www.allergyfacts.org.au

Anaphylaxis Management Briefing:

Facilitator's Notes

What is the purpose of the anaphylaxis management twice-yearly briefing?

The delivery of a twice-yearly anaphylaxis briefing is a requirement for all Victorian schools under Ministerial Order 706.

The purpose of these briefings is to sustain the awareness of anaphylaxis in your school community. It also aims to ensure that staff remain confident in identifying the signs and symptoms, and the treatment, of anaphylaxis.

Who should facilitate the briefing?

In order to deliver this briefing you should have been nominated by your school principal to perform the role of **School Anaphylaxis Supervisor**. To perform the role of **School Anaphylaxis Supervisor**, you must have current approved* anaphylaxis training.

In order to verify the correct use of adrenaline autoinjector devices by others, the **School Anaphylaxis Supervisor** must also complete and remain current in:

- *Course in Verifying the Correct Use of Adrenaline Autoinjector Devices 22303VIC* (every 3 years) and,
- the *ASCI Anaphylaxis e-training for Victorian Schools* (every 2 years).

Ideally you will already be overseeing the anaphylaxis policy and procedures at the school, which may include managing the location of adrenaline autoinjector devices (EpiPens®). You should be familiar with all of the content within the provided PowerPoint presentation and confident to deliver the briefing.

How often should the briefing be delivered?

This briefing should be delivered by schools twice a year (Term 1 and Term 3).

What is in the presentation?

The presentation is in PowerPoint format and all slides come with notes as a guide to support you in the delivery of this briefing. Some slides require you to include school specific content.

The slides include:

- Slide 1: Title and legal requirements as outlined in Ministerial Order 706
- Slide 2: Pictures of the students at your school at risk of anaphylaxis, their allergens, year levels and risk management plans that are in place

*courses that are considered approved anaphylaxis training for Victorian schools are outlined in MO706 and the Department's guidelines on anaphylaxis management in schools.

- Slide 3: Signs and symptoms of anaphylaxis
- Slide 4: Relevant anaphylaxis training
- Slide 5: ASCIA Anaphylaxis e-training cont.
- Slide 6: ASCIA Action Plan and how to administer an EpiPen®
- Slide 7: Your school's First Aid Policy and the Emergency Response Procedures
- Slide 8: How to access on-going support and training

How long should the briefing run for?

The briefing should take about 30 minutes to deliver. It may take longer depending on how many students are diagnosed at risk of anaphylaxis, and if your school will use the briefing as an opportunity to undertake adrenaline autoinjector competency checks of staff who have successfully completed the *ASCIA Anaphylaxis e-training for Victorian Schools*.

Who should attend?

The briefing needs to be attended by all school staff, including casual relief staff, non-teaching staff and canteen staff - anyone who may be in contact with a student diagnosed at risk of anaphylaxis.

What preparation is required prior to delivery?

Before you can deliver the briefing you need to:

1. Have a thorough knowledge of Ministerial Order 706 and the associated Anaphylaxis Guidelines for Victorian Schools
2. Have a thorough knowledge of the School's First Aid Procedures for Anaphylaxis for all in-school and out-of-school environments
3. Upload photographs of students diagnosed at risk of anaphylaxis and insert into Slide 2
4. Be familiar with the students at your school and their ASCIA Action Plans, their allergens, their Year Levels and the measures taken to minimise risk in relation to accidental exposure to their allergens.
5. It may be valuable to complete the *ASCIA Anaphylaxis e-Training for Victorian Schools* shortly before delivering the briefing to increase your knowledge and awareness of anaphylaxis and to assist you with delivering this briefing to staff.
6. Talk to any other staff at your school who are trained in undertaking in-person autoinjector competency checks to determine your school's strategy for undertaking these checks (input detail into slide 5).

Annual risk management checklist

(to be completed at the start of each year)

School name:	CLUNES PRIMARY SCHOOL	
Date of review:	6/3/20	
Who completed this checklist?	Name:	SONIA JARDING & JAN MILES
	Position:	PRINCIPAL - ANAPHYLAXIS SUPERVISOR
Review given to:	Name:	MEMBERS OF STAFF
	Position:	
Comments:	NO CURRENT STUDENTS WITH ANAPHYLAXIS NEEDS	
General information		
1. How many current students have been diagnosed as being at risk of anaphylaxis, and have been prescribed an adrenaline autoinjector?	0	
2. How many of these students carry their adrenaline autoinjector on their person?	N/A	
3. Have any students <u>ever</u> had an allergic reaction requiring medical intervention at school?	<input type="checkbox"/> Yes <input checked="" 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 checked="" 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 checked="" type="checkbox"/> No	
a. If Yes, how many times?		
6. If your school is a government school, was every incident in which a student suffered an anaphylactic reaction reported via the Incident Reporting and Information System (IRIS)?	<input type="checkbox"/> Yes <input type="checkbox"/> No N/A	

SECTION 1: Training

7. Have all school staff who conduct classes with students who are at risk of anaphylaxis 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 (22300VIC or 10313NAT) within the last 3 years? 	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8. Does your school conduct twice-yearly briefings annually? If no, please explain why not, as this is a requirement for school registration.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9. Do all school staff participate in a twice-yearly anaphylaxis briefing? Ifn, please explain why not, as this is a requirement for school registration.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
10. If you are intending to use the ASCIA Anaphylaxis e-training for Victorian Schools:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
a. Has your school trained a minimum of 2 school staff (School Anaphylaxis Supervisors) to conduct competency checks of adrenaline autoinjectors (EpiPen®)?	JAN MILES ELIZABETH GARTH
b. Are your school staff being assessed for their competency in using adrenaline autoinjectors (EpiPen®) within 30 days of completing the ASCIA Anaphylaxis e-training for Victorian Schools?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

SECTION 2: Individual Anaphylaxis Management Plans

11. 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 N/A
12. Are all Individual Anaphylaxis Management Plans reviewed regularly with parents (at least annually)?	<input type="checkbox"/> Yes <input type="checkbox"/> No N/A
13. 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?	WE WOULD REQUIRE IT
a. During classroom activities, including elective classes	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
b. In canteens or during lunch or snack times	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
c. Before and after school, in the school yard and during breaks	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
d. For special events, such as sports days, class parties and extra-curricular activities	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
e. For excursions and camps	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
f. Other	<input type="checkbox"/> Yes <input type="checkbox"/> No N/A
14. 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 NOT CARRIED ON PERSON

OR 1 on 1
Supervision
by staff
member

28. Do all school 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
29. Has the school 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
30. Where are these first aid kits located? Do staff know where they are located?	<input type="checkbox"/> Yes <input type="checkbox"/> No
31. Is the adrenaline autoinjector for general use clearly labelled as the 'General Use' adrenaline autoinjector?	<input type="checkbox"/> Yes <input type="checkbox"/> No
32. 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	
33. 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
34. 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
35. Are there always sufficient school 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	
36. Does the school 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
37. Do school staff know when their training needs to be renewed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
38. Have you developed emergency response procedures for when an allergic reaction occurs?	<input type="checkbox"/> Yes <input type="checkbox"/> No
a. In the class room?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. In the school yard?	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. In all school buildings and sites, including gymnasiums and halls?	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. At school 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
39. Does your plan include who will call the ambulance?	<input type="checkbox"/> Yes <input type="checkbox"/> No
40. 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

a. Where are the Action Plans kept?	Office Sick Bay Staff Room
15. Does the ASCIA Action Plan for Anaphylaxis include a recent photo of the student?	<input type="checkbox"/> Yes <input type="checkbox"/> No WOULD DO
16. 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No
SECTION 3: Storage and accessibility of adrenaline autoinjectors	
17. Where are the student(s) adrenaline autoinjectors stored?	Office
18. Do all school staff know where the school's adrenaline autoinjectors for general use are stored?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
19. Are the adrenaline autoinjectors stored at room temperature (not refrigerated) and out of direct sunlight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
20. Is the storage safe?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
21. Is the storage unlocked and accessible to school staff at all times?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Comments: Key access to Office or via Principal's Office at all times	
22. Are the adrenaline autoinjectors easy to find?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Comments: Staff briefing; clearly labelled	
23. Is a copy of student's individual ASCIA Action Plan for Anaphylaxis kept together with the student's adrenaline autoinjector?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
24. Are the adrenaline autoinjectors and Individual Anaphylaxis Management Plans (including the ASCIA Action Plan for Anaphylaxis) clearly labelled with the student's names?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
25. Has someone been designated to check the adrenaline autoinjector expiry dates on a regular basis?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Who? Jan Miles Elizabeth Garth	
26. Are there adrenaline autoinjectors currently in the possession of the school that have expired?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
27. Has the school signed up to EpiClub (optional free reminder services)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

41. 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 school including:	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
a. The class room?	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
b. The school yard?	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
c. The sports field?	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
d. The school canteen?	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
42. 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
43. Who will make these arrangements during excursions? Lead teacher / Principal		
44. Who will make these arrangements during camps? Lead teacher / Principal		
45. Who will make these arrangements during sporting activities? P.E teacher / Principal		
46. Is there a process for post-incident support in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
47. Have all school 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:	YES	
a. The school's Anaphylaxis Management Policy?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
b. The causes, symptoms and treatment of anaphylaxis?	<input checked="" 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
d. How to use an adrenaline autoinjector, including hands on practice with a trainer adrenaline autoinjector?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
e. The school's general first aid and emergency response procedures for all in-school and out-of-school environments?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
f. Where the adrenaline autoinjector(s) for general use is kept?	<input checked="" 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No (currently N/A)	
SECTION 6: Communication Plan		
48. Is there a Communication Plan in place to provide information about anaphylaxis and the school's policies?		
a. To school staff?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
b. To students?	<input type="checkbox"/> Yes <input type="checkbox"/> No N/A	

c. To parents?	<input type="checkbox"/> Yes <input type="checkbox"/> No N/A
d. To volunteers?	<input type="checkbox"/> Yes <input type="checkbox"/> No N/A
e. To casual relief staff?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
49. Is there a process for distributing this information to the relevant school staff?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
a. What is it? - Staff meeting briefing - Staff Handbook	
50. How will this information be kept up to date? - annual revision - OHS revision - OHS Activities Calendar	
51. 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 checked="" type="checkbox"/> No N/A
52. What are they?	


6/3/20