

Anaphylaxis Management | Policy and Procedures

1. Purpose

- 1.1 The purpose of this Anaphylaxis Management Policy is to provide the framework and guidance for the management of allergies and anaphylaxis at the School as required by Ministerial Order 706 and guidelines related to anaphylaxis management in schools or school boarding premises as published and amended by the Department of Education from time to time.
- 1.2 The School's Health Centres provide overarching supervision of the School's compliance with this Policy and its procedures, and ongoing management of At Risk Students.

2. Commitment

- 2.1 The School is committed to:
 - 2.1.1 being allergy aware, to ensure that Students, School Employees and parents/legal guardians are familiar with some common and serious allergies and know how to manage an allergic reaction. Every effort is made to reduce the risks associated with allergies, however, it cannot be guaranteed that the School is 'free' of any particular product;
 - 2.1.2 providing, as far as practicable, a safe and supportive environment in which Students at risk of anaphylaxis can participate equally in all aspects of their schooling;
 - 2.1.3 raising awareness about anaphylaxis and the School's Anaphylaxis Management Policy in the School community;
 - 2.1.4 engaging with parents and legal guardians of Students at risk of anaphylaxis in assessing risks, developing risk minimisation strategies and management strategies for the Student;
 - 2.1.5 ensuring that each School Employee has adequate knowledge about allergies, anaphylaxis and the School's Policy and Procedures in responding to an anaphylactic reaction;
 - 2.1.6 complying with Ministerial Order 706, including that when an At Risk Student is under the care or supervision of the School (which includes the Boarding Premises) including outside of normal classroom or boarding house activities, that the Principal must ensure that there is a sufficient number of School Employees present who have been trained in accordance with clause 12 of Ministerial Order 706; and
 - 2.1.7 complying with guidelines related to anaphylaxis management in schools or school boarding premises as published and amended by the VRQA or the Australian government from time to time.

3. Individual Anaphylaxis Management Plans

- 3.1 Where the School has been notified, the Kennedy Health Centre and the Timbertop Health Centre, under direction from the Principal will ensure that an individual anaphylaxis management plan (IAMP) is developed, in consultation with the Student's parents/legal guardians, for any Student who has been diagnosed by a medical practitioner as being at risk of anaphylaxis.
- 3.2 The IAMP will be in place as soon as practicable after the Student's enrolment at the School or accepted to board at the School, and where possible before their first day of School or attendance at the Boarding Premises.
- 3.3 The IAMP will set out the following:
 - 3.1.1 information about the medical condition that relates to the allergy and the potential for anaphylactic reaction, including the type of allergy or allergies the Student has (based on a diagnosis from a medical practitioner);
 - 3.1.2 strategies to minimise the risk of exposure to allergens while the Student is under the care or supervision of School Employees, for in-school and out of school settings including in the Boarding House, at for camps and excursions, playing sport, or at special events which are conducted, organised or attended by the School, or by Students from the Boarding Houses;
 - 3.1.3 the name of the person/s responsible for implementing the strategies;
 - 3.1.4 information on where the Student's medication will be stored;
 - 3.1.5 the Student's emergency contact details;
 - 3.1.6 an ASCIA Action Plan (in a format approved by ASCIA) provided by the parents/legal guardians, that:
 - 3.3.6.1 sets out the emergency procedures to be taken in the event of an allergic reaction;
 - 3.3.6.2 is signed by a medical practitioner; and
 - 3.3.6.3 includes an up to date photograph of the Student.
- 3.4 The Student's IAMP will be reviewed, in consultation with the Student and their parents/legal guardians:
 - 3.1.1 When a new At Risk Student enters the School;



- 3.1.2 Annually, by way of a HIVE post to parents at the commencement of each calendar year, with a new ASCIA plan requesting update;
- 3.1.3 if the Student's condition changes (where the change relates to allergy and/or the potential for anaphylactic reaction):
- 3.1.4 as soon as is practicable after a Student has an anaphylactic reaction at School or in the Boarding Premises; and
- 3.1.5 prior to any excursion or off Campus activity, by the School Employee in charge of the excursion.
- 3.5 It is the responsibility of the parents/legal guardians to:
 - 3.1.1 provide the Student's ASCIA Action Plan to the School;
 - 3.1.2 inform the School if their child's medical condition changes and, if relevant, provide an updated ASCIA Action Plan;
 - 3.1.3 provide an up to date photo for the ASCIA Action Plan when the plan is provided to the School and when it is reviewed; and
 - 3.1.4 provide the School with an adrenaline auto-injector that is current and not expired.

4. School EpiPen Register

- 4.1 The School has an EpiPen Register which alerts the School when the Student's EpiPen is due for replacement. This Register is managed at each separate campus by the relevant Senior Nurse. The relevant campus Registers are collated digitally in the School's Kennedy Health Centre records, and are also monitored and reviewed by the Kennedy Health Centre on a guarterly basis.
- 4.2 In the event of a notification, The Nurse Manager will email a Student's parents/legal guardians to remind them of the expiry, and that they should provide a new EpiPen to the School as soon as possible.

5. Prevention Action Plan and Emergency Management Action Plan

- 5.1 The School has developed an Anaphylaxis Preventative Action Plan and an Emergency Management Action Plan to support this Policy.
- 5.2 These documents contains practical risk strategies to reduce the risk to School Employees and Students of anaphylactic reactions, along with details of emergency management if someone is or is believed to be suffering an Anaphylactic reaction.

6. Communication and Training Plan

6.1 The School has developed an Anaphylaxis Communication and Training Plan to explain how explains how the School informs School Employees, parents/legal guardians and students about anaphylaxis and the School's Policy.

7. Anaphylaxis Risk Management Checklist

7.1 Each individual School campus completes an Anaphylaxis Risk Management Checklist every year. When completed they are forwarded to the relevant School Employee who presents them to the Principal for review.

8. Emergency Response

- 8.1 The School's first aid procedures, and the emergency response procedures for Anaphylaxis and the Student's individual ASCIA Action Plan will be followed in responding to an anaphylactic reaction. The campus specific general Emergency Management Plans do not incorporate anaphylaxis management, and should not be followed in the event of an Anaphylaxis incident.
- 8.2 These procedures are reinforced to all School Employees attending the six monthly briefings. The briefings also include information about the auto injector locations.
- 8.3 All Anaphylaxis incidents must be recorded on the Anaphylaxis Event Register to enable thorough investigation and outcomes from the Anaphylaxis incident.

9. Policy Variations

9.1 The School reserves the right to amend, replace or terminate this Policy from time to time.

10. Associated Documents

- 10.1 School Health Centres Policy
- 10.2 Emergency Management Action Plan
- 10.3 Anaphylaxis Preventative Management Action Plan
- 10.4 Anaphylaxis Communication Plan
- 10.5 Timbertop Campus | Anaphylaxis Procedure for Community Service



10.6 External Food – Procedure for Allergen Identification

11. Definitions

occurs when a person's immune system reacts to substances in the environment that are harmless for most people. Common Allergens include dust mite, pets, pollen, insects, ticks, moulds, foods and some medicines					
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means a severe, rapidly progressive allergic reaction that is potentially life threatening. The					
most common allergens in school aged children are peanuts, eggs, tree nuts (eg cashews),					
cow's milk, fish & shellfish, wheat, soy, sesame, latex, certain insect stings and medication;					
means a checklist completed by the School's Health Centres and Employee Engagement Team					
at the beginning of every School year					
means the Australian Society of Clinical Immunology					
means Australian Society of Clinical Immunology approved form of action plan which is provided					
by the Student's treating doctor or clinician;					
means a Student at risk of Anaphylaxis;					
means the School's registered boarding houses at the Corio Campus and units at the Timbertop					
campus					
means an external activities program conducted at the School's Timbertop Campus					
means the Department of Education and Training					
means EpiPen® autoinjector which is adrenaline given to the muscle of the outer mid-thigh					
means the Ministerial Order 706: Anaphylaxis Management in Schools and School Boarding					
Premises and Associated Guidelines as varied from time to time					
means Geelong Grammar School including its registered Boarding Premises					

12. Review and Circulation

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Anaphylaxis Preventative Action Plan

1. Purpose

1.1 This Action Plan supports the School's Anaphylaxis Management Policy and contains practical risk strategies to reduce the risk to School Employees and students of anaphylactic reactions; and

2. Student Responsibilities

2.1 All At Risk Students at the School must carry their adrenaline autoinjector (EpiPen®/Anapen®) with them and in an insulated and recognizable container at all times, including while on excursions and camps and off campus activities (such as sport).

3. Preventative Action Plan

- 3.1 This Preventative Action Plan contains risk reduction strategies that apply to:
 - 3.1.1 in school settings (classrooms);
 - 3.1.2 School grounds;
 - 3.1.3 special events;
 - 3.1.4 Out of School settings (field trips, adventures, excursions and camps);
 - 3.1.5 School Risk Assessments, which are required to be completed for all off campus activities;
 - 3.1.6 Campus kitchens, catering & canteens; and
 - 3.1.7 First Aid Supplies.
- 3.2 Each School Campus completes an Anaphylaxis Risk Management Checklist annually, which is signed off by the School Principal.

4. Additional General Use adrenaline Auto-Injectors

- 4.1 The School purchases and the Principal is responsible for the purchase of additional adrenaline autoinjector(s) for general use at the School and Boarding Premises, and as a back up to those supplied by parents/guardians.
- 4.2 Each Campus purchases general use adrenaline auto-injectors which are placed strategically around each Campus and in medical centres. A general use adrenaline auto-injector must always be taken on any excursion or off campus activity that an At Risk Student attends. Maps of where adrenaline auto-injectors are located are available on the GGS Intranet (for Corio) and from the relevant medical office (for all other campuses) and the locations advised to School Employees as part of training conducted.
- 4.3 The minimum number of general use adrenaline auto injectors in the first aid kit will correspond with the number of At Risk Students in the following ratios:
 - 4.1.1 2 general use adrenaline auto injectors for 5 Students.
 - 4.1.2 3 general use adrenaline auto injectors for 5 to 10 Students.
 - 4.1.3 4 general use adrenaline auto injectors for 10 to 15 Students.
- 4.4 The numbers of general use adrenaline auto injectors held by the School at any time, and at all Campuses, are kept on a Register and are monitored by the relevant Health Centre team for each Campus for replacement upon expiry (which occurs every 12 months).

5. On School Grounds

- 5.1 The School will:
 - 5.1.1 keep a copy of the At Risk Student's ASCIA Action Plan in the relevant Campus Health Centre or First Aid Room, in the relevant Boarding House or Unit, in the School's kitchens, and in classrooms (as required);
 - 5.1.2 liaise with parents/legal guardians about food related activities ahead of time;
 - 5.1.3 liaise with the relevant Campus Health Centre and/or caterer ahead of time for boarding At Risk Students;
 - 5.1.4 for Bostock House and Toorak Campuses, recommend that parents/legal guardians provide a treat/celebration pack with alternative treats if food treats are used in class. Treat packs should be clearly labelled and consumed only by the Student and handled by the Student and classroom teacher/supervisor;
 - 5.1.5 discourage food from outside sources being given to an At Risk Student;
 - 5.1.6 be aware of the possibility of hidden allergens in cooking, food technology, language, science and art classes (for example egg or milk cartons);
 - 5.1.7 have regular discussions with all Students about the importance of washing hands, eating their own food and not sharing food;



- 5.1.8 ensure the Vice Principal, relevant Head of Campus or their nominee informs volunteers, casual relief teachers or causal relief boarding staff of At Risk Students, preventive strategies in place and the School's emergency procedures;
- 5.1.9 ensure casual relief teachers or causal relief boarding staff are made aware of the location of the copy of the At Risk Student's ASCIA Action Plan kept in the relevant Campus Health Care Centre or First Aid Room and/or Boarding House, Unit or classroom.
- 5.2 In the School grounds the School will:
 - 5.1.1 ensure that At Risk Students with anaphylactic responses to insects are encouraged to stay away from water or flowering plants;
 - 5.1.2 be conscious of where plants and sources of water are placed in the School grounds, so that a Student can avoid them without being unfairly limited:
 - 5.1.3 ensure lawns are mowed;
 - 5.1.4 encourage At Risk Students to keep drinks and food covered while outdoors;
 - 5.1.5 ensure sufficient School Employees are available who are trained in the administration of the EpiPen® to be able to respond quickly if needed;
 - 5.1.6 ensure the EpiPen® will be easily accessible from the School grounds and stored in the relevant Campus Health Centre, First Aid Room, classroom, kitchen or Boarding House; and
 - 5.1.7 ensure School Employees will not leave an At Risk Student who is experiencing an anaphylactic reaction unattended the School Employee will direct another person to bring the EpiPen® if required.

6. Special Events

- 6.1 In preparing for and conducting special events, the School will
 - 6.1.1 ensure the relevant School Employees consults parents/legal guardians and the relevant Campus canteen/kitchen or caterers in advance, either to develop an alternative food menu or to request the parents/legal guardians to send a meal for the At Risk Student. This will occur as part of the School's Excursion processes, and is supported by the provision of Wellbeing Reports for each Student;
 - 6.1.2 ensure carers of other Students are informed about foods that may cause allergic reactions to At Risk Students;
 - 6.1.3 ensure the use of party balloons, swimming caps, band aids and rubber gloves are monitored if an At Risk Student is allergic to latex; and
 - 6.1.4 ensure School Employees know where the EpiPen® is located and how to access it if required.

7. Off School Grounds

- 7.1 On planned off-campus field trips and excursions the School will:
 - 7.1.1 ensure there is a risk management strategy in place for At Risk Students, developed in consultation with the Student's parents/legal guardians;
 - 7.1.2 ensure the At Risk Student's EpiPen®, a Wellbeing Plan which includes details related to their Individual Anaphylaxis Management Plan and ASCIA Action Plan, and a mobile phone are taken;
 - 7.1.3 ensure that School Employees and others involved in the camp or excursion (ie tour guides or leaders) are advised in advance, of any At Risk Students with Anaphylaxis or food allergies;
 - 7.1.4 ensure a School Employee has, or a team of School Employees have, been trained in the recognition of Anaphylaxis and the administration of the EpiPen® and will accompany the At Risk Student on field trips or excursions. All School Employees present are to ensure they are aware if there is an At Risk Student;
 - 7.1.5 ensure that School Employees have developed an emergency procedure as part of the risk management process that sets out clear roles and responsibilities in the event of an anaphylactic reaction;
 - 7.1.6 ensure the relevant School Employee in charge is aware of local emergency services in the area and how to access them and to liaise with them before the camp or excursion;
 - 7.1.7 ensure the EpiPen® remains close to the At Risk Student (and other students if appropriate) and School Employees are aware of its location at all times;
 - 7.1.8 ensure in higher risk or more remote locations that an EpiPen® is carried in the School first aid kit as back up for the At Risk Student's own EpiPen®. The School requires Students to carry their own EpiPen® on camps and excursions;
 - 7.1.9 ensure At Risk Students with anaphylactic responses to insects are encouraged to wear closed shoes and long sleeved garments when outdoors and are encouraged to stay away from water or flowering plants; and
 - 7.1.10 ensure cooking and art and craft games do not involve the use of known allergens;



- 7.1.11 ensure there is consultation where required between parents/legal guardians and/or the Campus canteen/kitchen and/or external caterers in advance to discuss issues that may arise, to develop an alternative food menu or request the parent/carer to send a meal (if required); and
- 7.1.12 ensure that parents/legal guardians who are authorised to accompany a Student are integrated as another strategy for supporting the Student.

8. Activity Risk Assessment

- 8.1 School Employees in charge of camps, special events excursions, activities and adventures are required to conduct a risk assessment for that activity, including where there is an At Risk Student and there is potential for exposure to an allergen.
- 8.2 The risk assessment will include, but not be limited to:
 - 8.1.1 identification of the Student group to be involved, in particular any Students within the group who have been diagnosed as being potentially Anaphylactic in response to an allergen or circumstance, which is provided through the Student's Wellbeing Report;
 - 8.1.2 where it is identified that At Risk Student is involved, a review of the student's Individual Anaphylaxis Management Plan;
 - 8.1.3 ensuring there are sufficient School Employees attending the activity who are trained in Anaphylaxis management in accordance with clause 12 of Ministerial Order 706; and
 - 8.1.4 assessment of the risk and identifying the appropriate risk management control to be put in place.
- 8.3 Extra consideration will be given to activities conducted in remote areas in respect of accessing emergency facilities.
- 8.4 Every effort must be made to allow At Risk Students to participate safely in any camp, excursion, adventure or activity. In limited circumstances, however, this may not be possible to achieve.
- 8.5 Where that is the case, alternative activities for the At Risk Student concerned shall be considered.
- 8.6 The School Employee in charge must liaise with outdoor education employees and any external service providers (e.g. music camps, excursions etc.) attended by At Risk Students to do everything reasonably practicable to minimise the risk for At Risk Students.
- 8.7 School Employees in charge must ensure that an emergency kit (including but not limited to student action plan, student EpiPen) is taken on all camps, excursions, adventures and all other off campus activities.

9. Campus Kitchens and Canteens, and Food in Boarding Houses

- 9.1 The School's campuses, including their boarding premises are nut aware zones.
- 9.2 In campus kitchens and canteens the School will:
 - 9.1.1 ensure At Risk Student information with a photo identification is displayed or stored in kitchen/canteen employees rooms or notice boards;
 - 9.1.2 ensure all products in the risk category (for example; products containing nuts) are kept in a separate storage area or container to avoid cross-contamination; and
 - 9.1.3 ensure a sign is displayed at the Menu board if meals contain possible allergens.
- 9.3 There is no menu board at the School's Toorak campus. The Toorak Canteen Manager will:
 - 9.1.1 ensure food lists are online and distributed by a flyer to parents/legal guardians which indicate foods that may contain common allergens;
 - 9.1.2 advise the School of any proposed updates to the menu, including any allergens listed in these food items;
 - 9.1.3 ensure classroom lunch orders containing known allergens, for a class with an At Risk Student, are to be clearly identified as containing known allergens; and
 - 9.1.4 consult parents/legal guardians of At Risk Students regarding permitted foods from the current menu and any menu changes that may include known allergens.

10. First Aid Supplies

10.1 When purchasing first aid supplies the School will endeavour to ensure that supplies such as gloves and band aids are latex free where possible, or that there are non latex alternatives available. Similarly, latex free swimming caps will be supplied at School swimming carnivals where available.



Anaphylaxis Communication and Training Plan

1. Purpose and Scope

1.1 This Plan explains how the School informs School Employees, parents/legal guardians and students about anaphylaxis and the School's Anaphylaxis Management Policy and trains staff in anaphylaxis management. This Plan applies to all students at the School.

2. Principal Responsibilities

- 2.1 The Principal is responsible for ensuring that a communication plan and emergency response procedure is developed to provide information to all School employees, students and parents/guardians about anaphylaxis and the School's Anaphylaxis Management Policy and associated procedures.
- 2.2 The following information details the strategies in place to advise School Employees, students and parents/guardians about how to respond to an anaphylactic reaction of a student in various environments.

3. Identity of Anaphylactic Students

- 3.1 All At Risk Students are identified and a photographic listing with the students' known allergens is collated by the relevant Campus Health Centre or nurse, and displayed for viewing, in the following areas on the relevant School campus:
 - 3.1.1 The staff room and/or communication rooms;
 - 3.1.2 in the relevant Boarding Premises;
 - 3.1.3 in Health Centres or the first aid room/nurses office; and
 - 3.1.4 in the kitchen or canteen areas.
 - 3.2 . The information is also located on the School Employees section of the School Intranet. These lists are updated biannually or when a new At Risk Student enters the School.
- 3.3 All At Risk Students are also identified through their HIVE School Records, and their allergen details are shown on any class lists and/or Wellbeing Reports.
- 3.4 A report of At Risk students can be prepared from Synergetic at any time. The report is provided by the Nurse Manager to the Vice Principal or the relevant Head of Campus for distribution at the commencement of each Term or when a new Student at risk of Anaphylaxis commences at the School.
- 3.5 For any camps, excursions, adventure or other off campus activities, the relevant Health Centre will provide Student Wellbeing Reports to the School Employee in charge through the risk management process, which details matters including whether a Student is an At Risk Student. The School Employee in charge is required to provide this information to other staff involved in the off campus activity.

4. School Employee Briefing (Teaching and Boarding Premises Staff)

- 4.1 The School is responsible for ensuring that the School Employees that are identified as requiring training under Ministerial Order 706 are:
 - 4.1.1 trained accordingly as detailed below; and
 - 4.1.2 briefed at least twice per calendar year in accordance with Ministerial Order 706.
- 4.2 All School Employees who conduct classes which may contain At Risk Students, or give instruction to At Risk Students, must have accredited three yearly training in an Anaphylaxis management training course or have completed two yearly training in the ASCIA on line e-learning module.
- 4.3 All Employees who are School full time and part time teaching and/or with boarding responsibilities are briefed every six (6) months by a School Employee who has completed online anaphylaxis management training course developed by the Australasian Society of Clinical Immunology and Allergy (ASCIA).within the past two years.
- 4.4 The first briefing must occur as close as is practicable to the start of the School year. Both briefings must include the following information:

on:

- 4.1.1 the School's Anaphylaxis Management Policy;
- 4.1.2 the causes, symptoms and treatment of anaphylaxis;
- 4.1.3 the identities of Students diagnosed at risk of anaphylaxis and where their medication is located;
- 4.1.4 how to use an auto-adrenaline injecting device, including videos of use of a trainer adrenaline autoinjector;
- 4.1.5 the School's first aid and emergency response procedures;
- 4.1.6 adrenaline auto-injector and ASCIA plan locations;
- 4.1.7 the location of School purchased generic auto-injectors; and



- 4.1.8 notification that a letter outlining the School's requirements of parents is communicated late in each year, prior to a Student at risk of an allergy attending the School.
- 4.5 All full time teaching School Employees complete First Aid Training which includes an accredited course in first aid management of Anaphylaxis and is current for three (3) years when refresher training is provided.
- 4.6 The Occupational Health and Safety Induction for new teaching School employees informs participants of the School's Anaphylaxis Management Policy and where to find it on the School's Intranet or student learning management system, the Hive.
- 4.7 Training records are maintained for all applicable School Employees.
- 4.8 If for any reason Anaphylaxis accreditation has not occurred in accordance with clause 6.4 then the Principal must develop an interim management plan in consultation with the parents of any affected Student. The accreditation must occur as soon as possible after the Principal becomes aware that it has not occurred.
- 4.9 An interim management strategy will then be implemented by the Principal in consultation with the parents.
- 4.10 If a person has missed an internal Anaphylaxis briefing they will be requested to attend a briefing at the relevant Campus Health Centre as soon as possible. If they have missed either their three yearly Anaphylaxis Management 22578VIC course or their two yearly on line ASCIA e-learning course then they will be enrolled to complete this requirement as soon as is practicable.

5. Other School Employees Required To Undertake Briefing

- 5.1 All School Employees who are casual relief and tutoring, external sport coaches and other employees identified based on an assessment of the risk of an anaphylactic reaction occurring while a Student is under their care must have accredited three (3) yearly training in an anaphylaxis management training course or have completed two (2) yearly training in the ASCIA on line elearning module.
- 5.2 All School Employees who are casual relief and tutoring teaching, external sports coaches and other employees identified based on an assessment of the risk of an anaphylactic reaction occurring while a Student is under their care must attend one annual internal Anaphylaxis briefing.

6. Bostock House and Toorak Campus

- 6.1 In addition to the requirements in this Procedure, at the Toorak Campus photos of all students with allergies are in CRT folders. These are collected by the CRT from Reception when signing in and they then report to the Deputy Head of Campus where they are given their roster of duties for the day and verbally advised about any At Risk Students in case they may have been allocated one. The Deputy Head of Campus also asks teachers to leave details that CRTs should be aware of in the work notes they provide.
- 6.2 In addition to the requirements in this Procedure, at the Bostock House Campus, CRTs are supplied with a Handbook. The Handbook includes a Student Health Alert page that provides all relevant student information on all allergy and health issues of students and photographs of all At Risk Students.

7. Timbertop Campus Additional Requirements

- 7.1 Timbertop Students who are At Risk of Anaphylaxis have their photo on the common room notice board, and also in the Vineyard, Agricultural Centre, Gym and Music School.
- 7.2 Before every run, Student EpiPens are sighted by the School Employee on duty which corresponds to the master sheet from the Timbertop Health Centre
- 7.3 Prior to every hike the Head of Outdoors highlights these Students during the pre-hike briefing to School Employees.
- 7.4 Sessional Outdoor School Employees are also issued with a laminated sheet of all Students who are At Risk of Anaphylaxis prior to all hikes.
- 7.5 The hike group sheet given to every School Employee and sessional outdoor employee member prior to every hike or outdoor trip lists the students who are At Risk of Anaphylaxis.
- 7.6 All medical communication during a hike, excluding the time when the nurses are off duty between the hours 9pm to 7 am, is monitored by the nurse on duty in the Timbertop Health Centre who also has a comprehensive list and photos of all At Risk Students at Timbertop. Outside these times the School Employee on the hike are responsible for monitoring the health of all Students and can contact the nurse on call or the emergency services as required.
- 7.7 At check-out prior to every hike, Student EpiPens are sighted by the School Employee on duty which corresponds to the master sheet from the Timbertop Health Centre. Each student will carry two (2) EpiPens when in a remote location.
- 7.8 Students perform Community Service during Term 3. The Timbertop Anaphylaxis Policy for Community Service is utilised to manage any At Risk Students that participate in this activity.
- 7.9 Photos of all At Risk Students with a life threatening allergy (asthma, epilepsy, diabetes) are in the casual relief teachers' information folder on the desk of the Assistant to the Deputy Head of Timbertop. These are collected at the beginning of every



- working day from the desk and taken to class. The Assistant to the Deputy Head of Campus is responsible for keeping these folders up-to-date on advice from the Timbertop Health Centre or the Head of Campus.
- 7.10 Photos of all Students with a life threatening allergy (for example asthma, epilepsy, diabetes or anaphylaxis) are in the Sessional Music Employee Folders on the desk in the office of the Music School. These are collected at the beginning of every day from the desk and taken to all music lessons. The Assistant to the Deputy Head of Timbertop is responsible for keeping these folders up-to-date on advice from the Health Centre or the Head of Campus.
- 7.11 There are current photos of all Students who have a life threatening allergy (for example asthma, epilepsy, diabetes or anaphylaxis) in the Timbertop kitchen.

8. Volunteers

- 8.1 Volunteers assisting with a School event, or an off campus activity will be advised of any At Risk Students who may be in any group they are assisting with, along with information related to the location of the School first aid supplies for the relevant event or activity.
- 8.2 Volunteers are not expected to the trained in first aid or in anaphylaxis management. If a volunteer identifies that a Student or another person may be having an anaphylactic reaction, they must immediately notify the supervising School Employee for immediate action.

9. Raising student awareness

- 9.1 The following messages are regularly conveyed to Students (for example, during assemblies, classroom discussion, in Boarding Premises, prior to hikes at the Timbertop Campus):
 - 9.1.1 always take allergies and anaphylaxis seriously, severe allergies are no joke;
 - 9.1.2 do not share food with friends who have food allergies;
 - 9.1.3 wash hands after eating:
 - 9.1.4 know what your friends are allergic to;
 - 9.1.5 if a friend becomes sick, get help immediately even if the friend does not want you to;
 - 9.1.6 be respectful of a friend's adrenaline autoinjector; and
 - 9.1.7 don't pressure friends to eat food that they are allergic to.

10. Parent/Legal Guardian Communication

10.1 Parents/legal guardians are required to complete Individual Management Plans at the start of the year in consultation with the School's relevant Health Centre team. New students and their parents meet with the relevant Health Centre for a discussion at the commencement of their attendance at the School, to discuss their management plan and the School's expectations and processes for parents and for students, including carrying their EpiPen/s at all times, and what to do in the event of an anaphylactic incident.

11. HIVE Portal

11.1 The School's Anaphylaxis Management Policy and related documents are all available on the School's Student Learning Management System (Hive). These documents are available to all School Employees, parents/legal guardians and students to view at any time.

12. Emergency Posters

12.1 Anaphylaxis Emergency Response Procedure posters are placed strategically around the School listing the Procedure for administering and auto injector and the location of the nearest generic auto injector.



Anaphylaxis Emergency Response Procedure

1. Purpose and Scope

- 1.1 This document details the relevant emergency procedure to treat any person at the School who is suffering an Anaphylactic reaction.
- 1.2 This Procedure applies to all School Employees and Students at the School.

2. Clinical Presentation of Possible Allergic and Anaphylactic Reaction

- 2.1 Common symptoms of a mild to moderate allergic reaction include hives, welts or body redness, swelling of the face, lips or eyes.
- 2.2 Signs of severe allergic reaction include vomiting, abdominal pain, tingling of the mouth.
- 2.3 Signs of a severe allergic anaphylactic reaction include:
 - 2.1.1 difficult and/or noisy breathing;
 - 2.1.2 swelling of the tongue;
 - 2.1.3 swelling or tightness in the throat;
 - 2.1.4 difficulty talking and/or hoarse voice;
 - 2.1.5 wheeze or persistent cough;
 - 2.1.6 persistent dizziness or collapsing; or
 - 2.1.7 pale and floppy (particularly in younger children).

3. Anaphylaxis Emergency Response Procedure

- 3.1 Lay person flat do not allow person to stand or walk.
- 3.2 If unconscious, place them in the recovery position.
- 3.3 If breathing is difficult allow them to sit up.
- 3.4 Administer general use adrenaline auto-injector. If there is doubt about the diagnosis still administer the general use adrenaline auto-injector.
- 3.5 Note the time that it was administered.
- 3.6 Call Emergency Services (000) and follow instructions.
- 3.7 Monitor patient and notify the relevant campus Health Centre and/or other School Employees to assist if available.
- 3.8 Commence CPR if at any time the patient is unresponsive and/or not breathing.
- 3.9 Further adrenaline may be administered as required if the patient deteriorates.
- 3.10 Transfer patient to hospital via ambulance along with any discharged general use adrenaline auto injector(s).
- 3.11 Ensure parents/legal guardian or carer is notified.



Timbertop Campus | Anaphylaxis Procedure for Community Service

1. Purpose

1.1 The purpose of this Procedure is to provide a specific procedure regarding At Risk Students who participate in Community Service at the School's Timbertop Campus.

2. Background

- 2.1 The Timbertop Community Service programme takes place during Term 2 each year when Students spend a number of weekends working with their hike groups to give back to the community they live in and benefit from. Each Student performs a total of two (2) Community Service visits (except if they are ill or there is another impediment to their participation).
- 2.2 Some groups contain Students who require a measure of health care, for medication. Some also have At Risk Students who have a diagnosed food or insect allergy and are at risk of an anaphylactic event.
- 2.3 This Procedure outlines the controls that the School has in place to manage At Risk Students during Community Service.

3. Procedure

- 3.1 The School visits all new Community Service hosts to discuss the responsibilities involved, including any anaphylaxis management.
- 3.2 At Risk Students are identified in Community Service groups and details regarding their condition are included in the associated paperwork which is given to the Community Service hosts.
- 3.3 Community Service hosts are contacted by the Timbertop Health Centre to discuss each At Risk Student, their management plan and their specific allergen/s.
- 3.4 Community Service hosts are supplied with the student's ASCIA plan which contains emergency management instructions.
- 3.5 At Risk Students take two EpiPens with them on Community Service and are instructed to carry one with them at all times. The other remains with their belongings at the host's residence.
- 3.6 Timbertop students always perform Community Service in groups. Therefore, any At Risk Student will not work alone and will have others around them to raise the alarm if required. If required, the Student group can contact their hosts, or the School's Timbertop campus (by a provided communication method being a phone or radio) at all times of the day or night.



External Food | Procedure for Allergen Identification

1. Scope

- 1.1. This Procedure is in place to reduce the risk of exposure to Students who have been diagnosed with food allergies from food brought into the School by parents or relatives of students for School arranged events. Its aim is to identify potential allergens in food provided at cake stalls, functions, fund raisers and at all other events where food is prepared or purchased externally and brought into the School.
- 1.2. Parents and School Employees must be aware that although this Procedure is designed to reduce the risk of exposure to At Risk Students, it is never possible to achieve a completely allergen-free environment in any service involving food that is open to the general community.
- 1.3. The School has appropriate emergency response plans in place in the event of a Student having an allergic or anaphylactic episode.

2. Procedure

- 2.1. School Employees or Support Groups that plan functions where food is to be brought into the School for potential sale or consumption by Students must ensure a Food Allergen Matrix (per **Appendix**) is completed by the person responsible for bringing in the food product prior to the event.
- 2.2. The Matrix must also be displayed with the end product at the time of consumption or sale.
- 2.3. If produce brought into the School does not contain any of the allergens as listed on the Matrix then the person responsible should mark this where indicated. The blank Matrix must still be displayed with the final product.
- 2.4. If the produce does contain allergens as part of the main ingredients, then they must be recorded by the responsible person and displayed by marking "Y" (for Yes) on the Matrix where indicated, no matter how small the amount.
- 2.5. If the product ingredients state 'may contain' there is a possibility that traces of an allergen may be present in a food unintentionally, such as food processed on the same equipment as products that contain an allergen. If this is the case, the responsible person must write "T" (for Trace) on the Matrix where indicated.

3. Food Allergen Matrix

- 3.1. The Food Allergen Matrix must be:
 - 3.1.1 completed by the person responsible for bringing in the final produce; and
 - 3.1.2 displayed directly in front of the final produce by the person responsible for the duration of serving or sale.
- 3.2. If uncertainty exists regarding the ingredients of any food item, then that food may not be brought into the School.
- 3.3. Produce brought into the School for events by parents or relatives of Students that does not have an accompanying completed Food Allergy Matrix will not be allowed be displayed for sale or consumption. School Employees should print and provide the Food Matrix for completion and display.



Food Allergen Matrix

Name of P Dish	roduce /								
Prepared I supplied b name)	•								
Location a of Event	and name								
Date of Ev	ent								
Allergens (if Yes, co matrix bel	mplete	□ Yes □	No						
				ALLE	RGENS LIS	ST			
Mark Yes if the product contains the ingredient. Mark Trace if there is a possibility of traces of the ingredient in the produce. Please note , If the product ingredients state 'may contain' there is a possibility that traces of an allergen may be present.									
Soy	Egg	Peanut	Tree Nut	Milk	Wheat	Shellfish	Sesame	Fish	Other
Other (please describe, eg Sulphites, Monosodium Glutamate (MSG), Histamines, Gelatin, Corn, Spices)									