



Anaphylaxis Management (Allergy Aware) Policy

Rationale

Fairfield Primary School (FPS) has students who have severe allergies to food and/or insect stings and who are at risk of anaphylaxis. Anaphylaxis is a severe, rapidly progressing allergic reaction that is potentially life threatening and requires urgent medical treatment.

FPS fully complies with *Ministerial Order 706 – Anaphylaxis Management in Victorian Schools and DEECD Anaphylaxis Guidelines*. FPS has a responsibility to:

- Develop and maintain an *Anaphylaxis Management Policy*.
- Develop, implement, monitor and regularly review *Individual Anaphylaxis Management Plans* developed in consultation with the parents/carers and medical practitioner of any student at risk of anaphylaxis.
- Provide information and guidance about FPS's management of anaphylaxis, including:
 - Prevention strategies to minimise the risk of an anaphylactic reaction for in-school and out-of-school settings.
 - School management and emergency response procedures for responding to an anaphylactic reaction.
 - The purchase of Adrenaline autoinjectors for general use.
 - A communication plan to raise staff, student and school community awareness about severe allergies and the school's anaphylaxis management policy.
 - Regular training and updates for school staff.
 - Completion of an annual Anaphylaxis Risk Management Checklist, as published by the DEECD to monitor compliance with obligations.

Aim

FPS is committed to being an **Allergy Aware** school by:

- Providing, as far as practicable, a safe and supportive environment in which students at risk of anaphylaxis can participate equally in all aspects of schooling
- Raising awareness about allergies and anaphylaxis in the school community
- Actively involving the parents/carers of students at risk of anaphylaxis in assessing risks, and developing risk minimisation strategies and management strategies for each student
- Ensuring that every staff member has adequate knowledge of allergies, anaphylaxis and emergency procedures
- Having policies and procedures in place to ensure that the risks associated with severe allergies are minimised, so that all students can feel safe while at school.

In an Allergy Aware school, everyone has a role to play in helping to minimise the risk and supporting the students while they learn to manage their allergies – the principal, staff, parents/carers, students and the broader school community.



Implementation

SCHOOL'S ROLE

The Principal ensures that an *Individual Anaphylaxis Management Plan* is developed and maintained, in consultation with the student's parents/carers, for any student who has been diagnosed by a medical practitioner as being at risk of anaphylaxis.

The *Individual Anaphylaxis Management Plan* is in place as soon as practicable after the student enrolls, and where possible, before his or her first day of school. Staff implement and monitor the student's *Individual Anaphylaxis Management Plan*.

FPS implements the procedures outlined in this policy and its Appendices.

PARENTS' / CARERS' ROLE

It is the responsibility of the parents/carers to:

- Consult with FPS in the development of the student's Individual Anaphylaxis Management Plan
- Provide the student's ASCIA Action Plan to FPS before the student's first day of school
- Inform FPS in writing if their child's medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, changes and, if relevant, provide an updated ASCIA Action Plan
- Provide an up-to-date photo for the ASCIA Action Plan
- Provide FPS with all medication specified on the ASCIA Action Plan, such as an Adrenaline autoinjector, that is current and not expired.

APPENDICES

- Appendix A: Emergency Response
- Appendix B: School Management
- Appendix C: Risk Minimisation and Prevention Strategies
- Appendix D: Communication Plan
- Appendix E: Staff Anaphylaxis Training
- Appendix F: Reference Material
- Appendix G: Current Risk Management Checklist

Evaluation

This policy will be reviewed as part of Fairfield Primary School's 3-year review cycle in October 2020.

This policy was ratified by School Council in October 2017



Appendix A: Emergency Response

1. EMERGENCY RESPONSE AT FAIRFIELD PS

If a student has a suspected allergic reaction while at FPS:

- Take student to First Aid Room and institute student's ASCIA Action Plan as soon as possible.
- The student's Emergency Pack is stored in the First Aid Room, in a clearly labelled and unlocked cupboard.
- **If in doubt: administer Adrenaline autoinjector + call 000.**
- The ambulance paramedics will access the school via the front door.

If a student is too sick to move or has collapsed from anaphylaxis:

- Administer the nearest available Adrenaline autoinjector and call 000. The 000 call-taker will give further advice and instructions. The nearest Adrenaline autoinjector may be the yard duty general use Adrenaline autoinjector or an Adrenaline autoinjector from the First Aid Room.

2. EMERGENCY RESPONSE AWAY FROM FPS

If a student has a suspected allergic reaction away from FPS:

- Take child to location of student's Emergency Pack and institute student's ASCIA Action Plan as soon as possible.
- **If in doubt: administer Adrenaline autoinjector + call 000.**

If a student is too sick to move or has collapsed from anaphylaxis:

- Administer the nearest available Adrenaline autoinjector and call 000. The 000 call-taker will give further advice and instructions. The nearest Adrenaline autoinjector may be an Adrenaline autoinjector for general use.



Appendix B: School Management

1. INDIVIDUAL ANAPHYLAXIS MANAGEMENT PLANS

Every FPS student at risk of anaphylaxis has an Individual *Anaphylaxis Management Plan*, which sets out the following:

- Information about the student's medical condition that relates to allergy and the potential for anaphylactic reaction, including the type of allergy/ies the student has (based on a written diagnosis from a medical practitioner)
- Strategies to minimise the risk of exposure to known and notified allergens while the student is under the care or supervision of school staff, for in-school and out-of-school settings, including in the classroom, the school yard, at camps and excursions, and at special events conducted, organised or attended by FPS
- The name of the person(s) responsible for implementing the strategies
- Information on where the student's Emergency Pack is stored
- The student's emergency contact details
- An ASCIA Action Plan.

FPS reviews the student's *Individual Anaphylaxis Management Plan*, in consultation with the student's parents/carers in all of the following circumstances:

- Annually
- If the student's medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, changes
- As soon as practicable after the student has an anaphylactic reaction at FPS
- When the student is to participate in an out-of-school activity, such as camps and excursions, or at special events conducted, organised or attended by the School (e.g. class parties, elective subjects, fetes, incursions).

2. IDENTIFICATION AND MANAGEMENT OF STUDENTS AT RISK OF ANAPHYLAXIS

FOUNDATION (PREP) AND OTHER NEW ENROLMENTS

FPS's enrolment form has a section where parents/carers specify (Yes/No) if their child is at risk of anaphylaxis. If the response is 'Yes', the Principal or nominated First Aid Coordinator:

- Sends a copy of the FPS *Anaphylaxis Management Policy* to the parents/carers.
- Sends a letter to the parents/carers providing an opportunity to meet prior to the first day of the school year to discuss FPS's approach to anaphylaxis, current risk minimisation strategies, any additional strategies that may be required for that student, and the items to be provided by parents/carers prior to first day of school.

Foundation transition sessions are an opportunity for teachers to identify and familiarise themselves with students who are at risk of anaphylaxis and to orientate families to procedures.

Prior to the student's first day at FPS, parents/carers are required to provide an up-to-date ASCIA Action Plan signed by a doctor with a current photo, as well as the student's Emergency Pack, which includes all medicines specified in the ASCIA Action Plan (usually an Adrenaline autoinjector and an antihistamine).



CURRENT STUDENTS

Prior to the first day of each school year, parents/carers are required to provide an up-to-date ASCIA Action Plan signed by a doctor with a current photo, as well as the student's Emergency Pack, which includes all medicines specified in the ASCIA Action Plan (usually an Adrenaline autoinjector and an antihistamine).

FPS ensures there is an opportunity for the student's parents/carers to meet with the student's teacher prior to the first day of the school year to discuss current risk minimisation strategies and any additional strategies that may be required for that child.

3. EMERGENCY PACKS

Anaphylaxis Emergency Packs consist of all medicines specified in the student's ASCIA Action Plan and the ASCIA Action Plan itself. They usually contain:

- An Adrenaline autoinjector (or other adrenaline auto-injector)
- An antihistamine
- The ASCIA Action Plan

It is both the parents'/carers' and the school's responsibility to ensure Emergency Packs is in place on the first day of the school year.

To ensure that Emergency Packs are available at all times:

- All Emergency Packs are stored in the FPS First Aid Room.
- All staff, including relief staff, are aware of the location of Emergency Packs.
- The cupboard that contains the Emergency Packs is never locked and must not be able to be locked.
- The First Aid Room that contains the Emergency Packs is always unlocked and all staff have a key. The room is always open when students are at school.
- Each Emergency Pack is clearly labelled with the student's name.
- Emergency Packs are not stored in classrooms because of the risk of confusion that this creates and the fact the classrooms may be locked. If a parent/carer requests this as part of preparing an Individual Anaphylaxis Management Plan, it may be arranged by exception.
- Emergency Packs taken on excursions are always replaced immediately on return to the school.

To ensure that Emergency Packs are in good condition:

- Emergency Packs are not refrigerated and are stored away from direct heat and light.
- FPS checks each Emergency Pack on the last day of term to ensure that medicines are not expired or due to expire within the next term. FPS contacts parents/carers to arrange replacement medication if any is expired. FPS also checks each Emergency Pack in the first week of term to follow up and provide a reminder to parents/carers. Parents/carers are responsible for responding to FPS's request in a timely manner.

Any Adrenaline autoinjectors for general use are clearly labelled and distinguishable from those for students at risk of anaphylaxis.

Trainer Adrenaline autoinjectors (which do not contain adrenaline or a needle) are not stored in the same location as Emergency Packs to avoid the risk of confusion.



4. DISPLAY OF ASCIA ACTION PLANS

The ASCIA Action Plans of all students at risk of anaphylaxis are displayed:

- In the First Aid Room
- In the Staff Room
- In the relevant student's classroom

5. ADRENALINE AUTOINJECTORS FOR GENERAL USE

FPS purchases and makes available additional Adrenaline autoinjectors for general use and as a back up to those supplied by parents/carers.

The Principal determines the number of additional Adrenaline autoinjectors required. In doing so, the Principal takes into account the following relevant considerations:

- The number of students enrolled at FPS who are diagnosed as being at risk of anaphylaxis.
- The accessibility of Adrenaline autoinjectors that have been provided by parents/carers of students who are diagnosed as being at risk of anaphylaxis.
- The availability and sufficient supply of Adrenaline autoinjectors for general use in specified locations at FPS, including in the schoolyard, and at excursions, camps and special events conducted or organised by FPS.
- The fact that Adrenaline autoinjectors have a limited life, usually expiring within 12–18 months, and need to be replaced at FPS's expense, either at the time of use or on expiry, whichever is first.

6. POST-INCIDENT SUPPORT AND REVIEW

If an anaphylactic reaction occurs at FPS or during an out-of-school activity, this can be distressing for the student, staff and parents/carers. An opportunity will be offered to allow parents/carers and the Principal to discuss what happened and how to prevent further episodes.

Any adverse incident is an opportunity to review this policy and its implementation with a view to improvement. The child's Individual Anaphylaxis Management Plan will be reviewed at this time and arrangements made to replace any used items in the Emergency Pack.



Appendix C: Risk Minimisation and Prevention Strategies

1. CLASSROOM

NO FOOD SHARING

- Students at FPS are not permitted to share food.
- If a student at risk of anaphylaxis has no food packed for school, the child's parents/carers are contacted and it is the parents'/carers' responsibility to make arrangements for the child to receive safe food.
- Staff arrange to have tables cleaned on a regular basis, and the floors are regularly cleaned.

CLASS FOOD EVENTS (E.G. BIRTHDAYS, CLASS PARTIES)

- Any food brought in by staff or other parents/carers for such occasions as birthdays or class parties is not given to a student at risk of anaphylaxis, without prior agreement of the student's parent/carer.
- Students at risk of anaphylaxis can access an alternative treat supplied by their parents/carers. It is recommended that parents/carers provide a safe supply of long-lasting treats that stay with the classroom teacher for these occasions.
- Other strategies may be arranged by the teacher and parents/carers if they are reasonable for both parties.

CLASS COOKING

- Staff ensure that any cooking classes are safe for students at risk of anaphylaxis.
- If there is any doubt that safety can be achieved for students at risk of anaphylaxis, then the teacher will discuss this with the student's parents/carers prior to the event.

2. OTHER EVENTS IN SCHOOL HOURS (e.g. mothers'/fathers' day stalls, incursions)

Food can only be provided at any organised event held during school hours if authorised by the Principal. The Principal only gives such authorisation if students at risk of anaphylaxis are fully supervised by staff, or if any food given to or purchased by students is safe for students at risk of anaphylaxis.

3. LUNCH ORDERS

The Principal ensures that any company contracted to provide lunch order services can demonstrate satisfactory training in food allergen management and its implications on food-handling practices, including knowledge of the major food allergens triggering anaphylaxis, cross-contamination issues specific to food allergy, and label reading. Parents/carers are responsible for ordering food that is safe for their child.

4. SPECIAL EVENTS HELD AT THE SCHOOL OUTSIDE SCHOOL HOURS (e.g. Fair, Art 4 All, school picnics)

At all events held outside school hours, children are under the direct supervision of their parents/carers. It is not practical or advisable to ban allergens at events held outside school hours, including the Fair, Art4All and school picnics. As an Allergy Aware school FPS recommends that:

- As far as practicable, food stall workers have access to ingredient lists for food being sold.

- The Community Committee convenors and event convenors encourage parents/carers to donate food items that do not contain nuts for use at stalls directly aimed at children (e.g. kids' café, game stalls using chocolate bars, lucky dip).
- The Community Committee convenors and event convenors request that parents/carers providing homemade food items to the event ensure that those items are clearly labelled with ingredients, and as far as practicable, do not contain nuts.

5. EXCURSIONS AND SPORTING EVENTS HELD AWAY FROM SCHOOL

A staff member must accompany any student at risk of anaphylaxis on excursions and be available and able to manage an anaphylactic reaction at all times. The staff member must know where the student's Emergency Pack is and have it readily available at all times during the excursion.

To minimise risk:

- Parents/carers are responsible for packing enough food for the excursion.
- Students are not permitted to purchase food at events away from school and parents/carers must not provide money to students for any food purchases, unless such purchasing is authorised by a student's parent/carer on the excursion permission form.
- For each excursion, FPS undertakes a risk assessment to consider the number of anaphylactic students attending, nature of the excursion/sporting event, size of venue, distance from medical assistance, structure of excursion, and staff–student ratio.

6. SCHOOL CAMPS

- FPS follows the DEECD risk management guidelines for school camps.
- Prior to engaging a camp owner/operator's services FPS ensures the camp owner/operator can provide food that is safe for students at risk of anaphylaxis. FPS checks the emergency response procedures that the camp owner/operator has in place and ensures that these are adequate.
- Prior to the camp, for students at risk of anaphylaxis, the relevant staff member and the student's parents/carers discuss risk assessment and strategies for avoiding and managing anaphylaxis.
- On camp the student's Emergency Pack is kept in close proximity at all times.
- At all times during the camp, staff members are aware of the location of the student's Emergency Pack and are able to administer the ASCIA Action Plan to the student.
- In the event of anaphylaxis occurring on school camp, more than one dose of adrenaline (Adrenaline autoinjector injection) may be required while waiting for paramedics (as would be directed by the 000 call-taker). Parents/carers should consider providing a second Adrenaline autoinjector to be taken on camp.
- Ability to call 000 should be 24 hours a day. Mobile reception using that mobile's phone carrier is assessed prior to the camp. FPS staff participating in the camp are clear about their roles and responsibilities in the event of an anaphylactic reaction.
- If students are requested to bring food on camp, FPS advises parents/carers as to what is suitable.
- FPS takes an Adrenaline autoinjector for general use and an ASCIA Action Plan on all school camps. These are included as part of FPS's emergency response procedures, even if there is no student at risk of anaphylaxis, as back-up in the event of an emergency first-time reaction.



Appendix D: Communication Plan

FPS has a Communication Plan as part of its Anaphylaxis Management (Allergy Aware) Policy, to provide information to all school staff, students and parents/carers about anaphylaxis and the Policy.

1. STRATEGIES FOR RAISING STAFF AWARENESS

FPS advises school staff how to respond to a student's anaphylactic reaction in various environments including:

- During normal school activities, including in the classroom, in the school yard, and in all school buildings and sites including gymnasiums and halls
- During out-of-school activities, including on excursions, school camps and at special events conducted, organised or attended by the school.

The FPS staff training as required by DEECD is detailed in Appendix E of this Policy.

2. STRATEGIES FOR RAISING STUDENT AWARENESS

School raise awareness in their school through fact sheets or posters. Class teachers discuss the topic with students in class, with a few simple key messages such as the following:

Student messages about anaphylaxis	
1.	Always take food allergies seriously – severe allergies are no joke.
2.	Do not share your food with friends who have food allergies.
3.	Wash your hands after eating.
4.	Know what your friends are allergic to.
5.	If a school friend becomes sick, get help immediately even if the friend does not want you to.
6.	Be respectful of a school friend's adrenaline autoinjector.
7.	Do not pressure your friends to eat food that they are allergic to.

3. STRATEGIES FOR RAISING SCHOOL COMMUNITY AWARENESS

This Policy is available to the school community and information is provided in the school newsletter. Letters are sent to parents about students in their child's grade who have anaphylaxis.



Appendix E: Staff Anaphylaxis Training

All FPS staff undertake an Anaphylaxis Management Training Course

OPTION 1:

All school staff - *ASCIA Anaphylaxis e-training* followed by a competency check by the School Anaphylaxis Supervisor. This course is provided by ASCIA, is free for all Victorian schools and valid for 2 years.

AND

Two staff per school or per campus (School Anaphylaxis Supervisor) - *Course in Verifying the Correct Use of Adrenaline Autoinjector Devices 22303VIC*. This course is provided by the Asthma Foundation, is free to government schools and is valid for 3 years

OPTION 2:

School staff (as determined by the principal) - *Course in First Aid Management of Anaphylaxis 22300 VIC (previously 22099VIC)*. This course is provided by an RTO that has this course in their scope of practice and is paid for by each school. The training is valid for 3 years.¹

STAFF BRIEFING

All FPS staff participate in a briefing, occurring twice per calendar year (with the first briefing held at the beginning of the school year) on:

- FPS's Anaphylaxis Management (Allergy Aware) Policy
- The causes, symptoms and treatment of anaphylaxis
- The identities of the students with a medical condition that relates to an allergy and the potential for anaphylactic reaction, and where their medication is located
- How to use an Adrenaline autoinjector (or other adrenaline auto-injector), including hands-on practice with a trainer Adrenaline autoinjector device
- FPS's general first aid and emergency response procedures
- The location of students' Emergency Packs
- The location of FPS's Adrenaline autoinjectors for general use.

An FPS staff member who has successfully completed an Anaphylaxis Management Training Course in the last 12 months conducts the briefing.

In the event that the relevant training and briefing has not occurred, the Principal will develop an interim Individual Anaphylaxis Management 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. Training will be provided to relevant FPS staff as soon as practicable after the student enrolls, and preferably before the student's first day at school.

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



Appendix F: Reference Material

Reference material considered in development of this policy and the associated procedures:

- Department of Education and Early Childhood Development (DEECD) Anaphylaxis Guidelines – A Resource for Managing Severe Allergies in Victorian Schools, July 2017
- ASCIA Guidelines for Prevention of Anaphylaxis in Schools, Preschool and Childcare, 2012
- Allergy & Anaphylaxis Australia Ideas on Risk Minimisation Strategies in the School and/or Childcare Environment, 2013
- Murdoch Children’s Research Institute Allergy Q&A, Feb 2014
- Kids’ Food Allergies for Dummies, Assoc. Prof. Mimi Tang, Assoc. Prof. Katie Allen, Aus/NZ edition, 2012



Appendix G: Current Risk Management Checklist

School Name:	
Date of Review:	
Who completed this checklist?	Name:
	Position:
Review given to:	Name
	Position
Comments:	

General Information

1. How many current students have been diagnosed as being at risk of anaphylaxis, and have been prescribed an Adrenaline Autoinjector?	
2. How many of these students carry their Adrenaline Autoinjector on their person?	
3. Have any students ever had an allergic reaction requiring medical intervention at school?	<input type="checkbox"/> Yes <input type="checkbox"/> No
a. If Yes, how many times?	
4. Have any students ever had an Anaphylactic Reaction at school?	<input type="checkbox"/> Yes <input type="checkbox"/> No
a. If Yes, how many students?	
b. If Yes, how many times	
5. Has a staff member been required to administer an Adrenaline Autoinjector to a student?	<input type="checkbox"/> Yes <input type="checkbox"/> No
a. If Yes, how many times?	
6. 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

SECTION 1: Individual Anaphylaxis Management Plans

7. Does every student who has been diagnosed as being at risk of anaphylaxis and prescribed an Adrenaline Autoinjector have an Individual Anaphylaxis Management Plan and ASCIA Action Plan completed and signed by a prescribed Medical Practitioner?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. Are all Individual Anaphylaxis Management Plans reviewed regularly with Parents (at least annually)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9. Do the Individual Anaphylaxis Management Plans set out strategies to minimise the risk of exposure to allergens for the following in-school and out of class settings?	
a. During classroom activities, including elective classes	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. In canteens or during lunch or snack times	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. Before and after School, in the school yard and during breaks	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. For special events, such as sports days, class parties and extra-curricular activities	<input type="checkbox"/> Yes <input type="checkbox"/> No
e. For excursions and camps	<input type="checkbox"/> Yes <input type="checkbox"/> No
f. Other	<input type="checkbox"/> Yes <input type="checkbox"/> No
10. Do all students who carry an Adrenaline Autoinjector on their person have a copy of their ASCIA Action Plan kept at the School (provided by the Parent)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
a. Where are they kept?	



11. Does the ASCIA Action Plan include a recent photo of the student?	<input type="checkbox"/> Yes <input type="checkbox"/> No
SECTION 2: Storage and Accessibility of Adrenaline autoinjectors	
12. Where are the student(s) Adrenaline autoinjectors stored?	
13. Do all School Staff know where the School's Adrenaline autoinjectors for General Use are stored?	<input type="checkbox"/> Yes <input type="checkbox"/> No
14. Are the Adrenaline autoinjectors stored at room temperature (not refrigerated)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
15. Is the storage safe?	<input type="checkbox"/> Yes <input type="checkbox"/> No
16. Is the storage unlocked and accessible to School Staff at all times? Comments:	<input type="checkbox"/> Yes <input type="checkbox"/> No
17. Are the Adrenaline autoinjectors easy to find? Comments:	<input type="checkbox"/> Yes <input type="checkbox"/> No
18. Is a copy of student's Individual Anaphylaxis Management Plan (including the ASCIA Action Plan) kept together with the student's Adrenaline Autoinjector?	<input type="checkbox"/> Yes <input type="checkbox"/> No
19. Are the Adrenaline autoinjectors and Individual Anaphylaxis Management Plans (including the ASCIA Action Plans) clearly labelled with the student's names?	<input type="checkbox"/> Yes <input type="checkbox"/> No
20. Has someone been designated to check the Adrenaline Autoinjector expiry dates on a regular basis? Who?	<input type="checkbox"/> Yes <input type="checkbox"/> No
21. Are there Adrenaline autoinjectors which are currently in the possession of the School and which have expired?	<input type="checkbox"/> Yes <input type="checkbox"/> No
22. Has the School signed up to EpiClub or ANA-alert (optional free reminder services)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
23. Do all School Staff know where the Adrenaline autoinjectors and the Individual Anaphylaxis Management Plans are stored?	<input type="checkbox"/> Yes <input type="checkbox"/> No
24. 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
25. Where are these first aid kits located?	
26. Is the Adrenaline Autoinjector for General Use clearly labelled as the 'General Use' Adrenaline Autoinjector?	<input type="checkbox"/> Yes <input type="checkbox"/> No
27. 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 3: Prevention Strategies	
28. 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
29. Have you implemented any of the prevention strategies in the Anaphylaxis Guidelines? If not record why?	<input type="checkbox"/> Yes <input type="checkbox"/> No



30. Have all School Staff who conduct classes with students with a medical condition that relates to allergy and the potential for anaphylactic reaction successfully completed an Anaphylaxis Management Training Course in the three years prior and participated in a twice yearly briefing?	<input type="checkbox"/> Yes <input type="checkbox"/> No
31. Are there always sufficient School Staff members on yard duty who have successfully completed an Anaphylaxis Management Training Course in the three years prior?	<input type="checkbox"/> Yes <input type="checkbox"/> No
SECTION 4: School Management and Emergency Response	
32. 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
33. Do School Staff know when their training needs to be renewed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
34. 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 schoolyard?	<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
35. Does your plan include who will call the Ambulance?	<input type="checkbox"/> Yes <input type="checkbox"/> No
36. Is there a designated person who will be sent to collect the student's Adrenaline Autoinjector and Individual Anaphylaxis Management Plan (including the ASCIA Action Plan)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
37. Have you checked how long it will take to get to the Adrenaline Autoinjector and Individual Anaphylaxis Management Plan (including the ASCIA Action Plan) to a student from various areas of the School including:	<input type="checkbox"/> Yes <input type="checkbox"/> No
a. The class room?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. The schoolyard?	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. The sports field?	<input type="checkbox"/> Yes <input type="checkbox"/> No
38. On excursions or other out of school events is there a plan for who is responsible for ensuring the Adrenaline Autoinjector(s) and Individual Anaphylaxis Management Plans (including the ASCIA Action Plan) and the Adrenaline Autoinjector for General Use are correctly stored and available for use?	<input type="checkbox"/> Yes <input type="checkbox"/> No
39. Who will make these arrangements during excursions?	
40. Who will make these arrangements during camps?	
41. Who will make these arrangements during sporting activities?	
42. Is there a process for post incident support in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No
43. Have all School Staff who conduct classes that students with a medical condition that relates to allergy and the potential for anaphylactic reaction and any other staff identified by the Principal, been briefed on:	
a. The School's Anaphylaxis Management Policy?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. The causes, symptoms and treatment of anaphylaxis?	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. The identities of students with a medical condition that relates to allergy and the potential for anaphylactic reaction, and who are prescribed an Adrenaline Autoinjector, including where their medication is located?	<input type="checkbox"/> Yes <input type="checkbox"/> No



d. How to use an Adrenaline Autoinjector, including hands on practise with a trainer Adrenaline Autoinjector?	<input 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 type="checkbox"/> Yes <input type="checkbox"/> No
f. Where the Adrenaline Autoinjector(s) for General Use is kept?	<input type="checkbox"/> Yes <input type="checkbox"/> No
g. Where the Adrenaline autoinjectors for individual students are located including if they carry it on their person?	<input type="checkbox"/> Yes <input type="checkbox"/> No
SECTION 4: Communication Plan	
44. Is there a Communication Plan in place to provide information about anaphylaxis and the School's policies?	
a. To School Staff?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. To students?	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. To Parents?	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. To volunteers?	<input type="checkbox"/> Yes <input type="checkbox"/> No
e. To casual relief staff?	<input type="checkbox"/> Yes <input type="checkbox"/> No
45. Is there a process for distributing this information to the relevant School Staff?	<input type="checkbox"/> Yes <input type="checkbox"/> No
a. What is it?	
46. How is this information kept up to date?	
47. Are there strategies in place to increase awareness about severe allergies among students for all in-school and out-of-school environments?	<input type="checkbox"/> Yes <input type="checkbox"/> No
48. What are they?	