



Nunawading Christian College Secondary

Anaphylaxis Management Policy

Document Control

| Revision Number | Implementation Date | Review Date | Description of Changes | Prepared By | Approved By |
|-----------------|---------------------|-------------|------------------------|---------------|----------------|
| 1.2 | April 2014 | May 2015 | Updated Policy | Sylvia Mendez | School Council |
| 2 | March 2017 | April 2018 | Updated Policy | Marie Roberts | School Council |
| 2.1 | July 2017 | July 2018 | Updated Policy | Hanna Stekla | NCC Admin |

Rationale

The intent of this policy is to ensure that Nunawading Christian College (Secondary) has in place an effective and practical management program for all anaphylactic children within our care. This policy is in addition to and works with the First Aid Policy.

The key to prevention of anaphylaxis in schools is knowledge of the students at risk, awareness of the triggers and prevention of these triggers. Partnership between Nunawading Christian College (Secondary) and the parents is essential in ensuring a child's safety at school.

Definitions:

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

Allergies occur within the immune system producing antibodies that act against substances in the environment. Once an allergy has developed, exposure to the particular allergen can result in symptoms that vary from mild to life threatening (Anaphylaxis).

1. Aims

The Aims of the Anaphylaxis Management Policy are:

- To comply with Ministerial Order 706 as of the 22nd of April 2014 and to acknowledge that Ministerial Order 90 is repealed at this time;
- To comply with all guidelines related to anaphylaxis management in schools as published and amended from time to time;
- To elaborate on the First Aid Policy, providing more detailed first aid information relevant to anaphylaxis
- To ensure effective and appropriate information about the development, implementation, monitoring and regular review of Individual Anaphylaxis Management Plans, which include an individual ASCIA Action Plan for Anaphylaxis;
- To inform the school's Anaphylaxis Management Program to include:
 - a) Prevention strategies;
 - b) School management and emergency response procedures;
 - c) The purchase of adrenaline auto injectors for general use;
 - d) A communication plan;
 - e) Training of school staff and;
 - f) Completion of a school anaphylaxis management checklist.

2. Management of Students Diagnosed as at Risk of Anaphylaxis. Individual Anaphylaxis Management Plans

When a student with the risk of anaphylaxis enrolls at the school, and prior to that student attending, the school will ensure that the Principal(s) of Nunawading Christian College (Secondary) will be responsible for ensuring that an individual anaphylaxis management plan is developed, in consultation with the student's parents, for any student who has been diagnosed by a medical practitioner as having a medical condition that relates to allergy and the potential for anaphylactic reaction, where the school has been notified of that diagnosis;

- The individual Anaphylaxis Management Plan must be in place as soon as practicable after the student enrolls, and where possible before the student's first day of attendance at school;
- The individual Anaphylaxis Management Plan will set out the following:
 - a) Information about the medical condition that relates to allergy and the potential for anaphylactic reaction, including the type of allergy or allergies the student has (based on a written diagnosis from a medical practitioner);
 - b) 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 school yard, at camps and excursions, or at special events conducted, organised or attended by the school;
 - c) The name of the person/s responsible for implementing the strategies;
 - d) Information on where the student's medication will be stored;
 - e) The student's emergency contact details;
 - f) An action plan in a format approved by the Australasian Society of Clinical Immunology and Allergy (ASCIA Action Plan), is provided by the parent;
 - g) A review of the student's Individual Anaphylaxis Management Plan will be carried out in consultation with the student's parents in all of the following circumstances:
 - i. Annually;
 - ii. If the student's medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction and changes;
 - iii. As soon as is practicable after a student has an anaphylactic reaction at school; and
 - iv. When a student is to participate in an off-site activity such as camps, excursions, or at special events conducted, organised or attended by the school.
 - h) Parents are informed of their responsibilities to:
 - i. Provide the ASCIA Action Plan;
 - ii. Inform the school 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 and;
- iii. Provide the school with an adrenaline auto injector that is current and not expired for their child.
- The Principal will maintain an up to date list of students with anaphylaxis. This list will be communicated to staff via:
 - Identification of all students with anaphylaxis during training and briefing sessions at the start of each semester
 - Email to staff of any new diagnosis during the year
 - Individual Anaphylaxis Management Plans that are posted on the Sick Bay wall, included in the epipen bag stored in the sickbay, posted as a PDF on SEQTA and via a medical alert symbol beside the student's name on all SEQTA class rolls.
 - Copies of Individual Anaphylaxis Management Plans are in epipen bags, and taken on excursions are required.

3. School Management of Anaphylaxis

The most important thing in the management of anaphylaxis is to avoid any known triggers. Parents of at risk students are expected to develop a joint approach to managing their child/ren. Exposure to known triggers by at risk students must be managed by teachers, administrators, students themselves and family. Staff will respond better in emergency situations if they have received training in the area of anaphylaxis.

Causes:

- a) Food allergies are the main causes. Eight foods cause 80% of the allergic reactions in Australia and can be the common causes of anaphylaxis. These include:
 - i. Peanuts
 - i. Tree nuts (e.g. cashews)
 - ii. Egg
 - iii. Cow's milk
 - iv. Wheat
 - v. Soybean
 - vi. Fish and Shellfish
 - vii. Sesame

- b) Other Triggers
 - i. Insect stings, particularly bee stings
 - ii. Medications
 - iii. Latex

Signs and Symptoms

- a) The symptoms of a mild allergic reaction can include:
 - i. Swelling of the lips
 - ii. Hives or welts
 - iii. Abdominal pain and/or vomiting

- b) The symptoms of a severe allergic reaction can include:
 - i. Difficulty breathing or noisy breathing
 - ii. Swelling of the tongue
 - iii. Swelling/tightness of the throat
 - iv. Difficulty talking and/or a hoarse voice
 - v. Wheezing or persistent cough
 - vi. Loss of consciousness and/or collapse
 - vii. Young children may appear pale and floppy

School prevention strategies

In keeping with ASCIA guidelines for prevention of anaphylaxis in schools, pre-schools and childcare: 2015 update, in later primary school and high school, food restrictions or bans are not useful risk minimisation strategies. As such, Nunawading Christian College does not have any food restrictions relating to allergy prevention at school.

Students identified as being at increased risk of anaphylaxis are educated by their medical practitioners to self manage their risks with the support of school staff, as identified in the student individual management plan. Annual reviews ensure up to date prevention strategies can be delivered by the student's medical practitioner.

Where environmental triggers are identified, the school will take measures to minimise the students exposure to the trigger.

Emergency Response

This procedure is reinforced at semester anaphylaxis staff briefings and is posted beside the class telephone in every classroom:

EMERGENCY PROCEDURE

1. Send a student to office to call First Aid Officer.
 2. Call Ali/Office Staff (Ext 2203 or 2204).
 3. Call ambulance (000) if necessary.
-
- a) Adrenaline given through an EpiPen auto injector to the muscle of the outer mid-thigh is the most effective first aid treatment.
 - b) Parents need to provide an auto injector by the first day of school to be available for emergencies as prescribed by their family doctor.
 - c) An ambulance must be called and the child taken immediately to hospital.

When a student with a medical condition that relates to allergy and the potential for anaphylactic reaction is under the care or supervision of the school outside normal class activities, including in the school yard, at camps and excursions, or at special events conducted, organised or attended by the school, the Principal(s) must ensure that there is sufficient number of school staff present who have been trained in accordance with the training section of this policy.

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 and emergency response procedures and the student's ASCIA Action Plan.

It is recommended that children should wear a medical warning bracelet if they are at risk of anaphylaxis.

Auto injectors for General Use

Purchase of Adrenaline Auto injectors for General Use

- a) The Principal(s) is responsible for arranging for the purchase of additional adrenaline auto injector(s) for general use and as a back up to those supplied by the parents;
- b) The Principal(s) will determine the number and type of adrenaline auto injector(s) for general use to purchase and in doing so consider all of the following:
 - i. The number of students enrolled at the school that have been diagnosed with a medical condition that relates to allergy and the potential for anaphylactic reaction;
 - ii. The accessibility of adrenaline auto injectors that have been provided by parents;
 - iii. The availability of sufficient supply of adrenaline auto injectors for general use. The school has a general use epipen stored in the staff emergency bag in the front office and this is taken on excursions, camps and special events conducted, organised or attended by the school. Additional general use adrenaline auto injectors are available in the sick bay shared with the primary school for use if needed when the secondary school adrenaline auto injector is taken off campus.
 - iv. Note that adrenaline auto injectors have a limited life, and usually expire within 12-18 months of purchase, and will need to be replaced at the school's expense, either at the time of use or expiry, whichever is first.

Communication Plan

The following plan for communication is in effect at Nunawading Christian College (Secondary):

- a) The Principal(s) of Nunawading Christian College (Secondary) will ensure that the following communication plan is actioned to provide information to all school staff, students and parents about anaphylaxis and the school's anaphylaxis management policy:
 - a. That the Principal(s) will ensure that the school staff are:
 - i. Trained; and
 - ii. Briefed at least twice per calendar year.
 - iii. Informed about any additional students diagnosed with anaphylaxis during the year
 - iv. Have access to all individual management plans via SEQTA and linked to each class roll and in epipen bags located in the sick bay.
 - b. The Principal will ensure that Medical Records forms are updated at the start of each year and parents of any student with identified anaphylaxis are contacted to discuss individual anaphylaxis management action plans for their child.
 - c. Camp permission forms require parents to identify any new conditions that may have been identified since Medical Record forms were completed and not communicated to the school.
- b) Strategies for advising school staff, students and parents about how to respond to an anaphylactic reaction include:
 - i. During normal school activities including in the classroom, in the schoolyard, in all school buildings and sites including gymnasiums and halls; and
 - ii. During off-site out of school activities, including excursions, school camps and at special events conducted, organised or attended by the school;
- c) Procedures to inform volunteers and casual relief staff of students with a medical condition that relates to allergy and the potential for anaphylactic reaction and their role in responding to an anaphylactic reaction of a student in their care; and

Staff Training

- a) The Principal will ensure that all school staff are trained in accordance with Ministerial Order 706. Nunawading Christian College (Secondary) will ensure anaphylaxis training is provided to all school staff and will include the following:
 - i. School staff who conduct classes where students have a medical condition that relates to allergy and the potential for anaphylactic reaction attend; and
 - ii. Any further school staff that the Principal(s) identifies, based on an assessment of the risk of any anaphylactic reaction occurring while a student is under the care of supervision of the school.
- b) Nunawading Christian College (Secondary) staff that are subject to training requirements will:

- i. Have successfully completed an anaphylaxis management training course in the three years prior; and
- ii. Participate in a briefing, to occur twice per calendar year with the first one to be held at the beginning of the school year, by an external qualified trainer, the second briefing will be conducted by the school First Aid officer, on the school's anaphylaxis management policy;
 1. The causes, symptoms and treatment of anaphylaxis
 2. The identities of students with a medical condition that relates to allergy and the potential for anaphylactic reaction, and where their medication is located;
 3. How to use an adrenaline auto injector, including hands on practise with a trainer
 4. The school's general first aid and emergency response procedures; and
 5. The location of, and access to, adrenaline auto injectors that have been provided by parents or purchased by the school for general use.

If for any reason training and briefing has not yet occurred in accordance with the Ministerial Order 706 clauses, the Principal(s) must develop an interim plan in consultation with the parents of any affected student with a medical condition that relates to allergy and the potential for anaphylactic reaction, and training must occur as soon as possible thereafter.

Annual Risk Management Checklist

- a) The Principal(s) completes an annual Risk Management Checklist to monitor the school's obligations, as published and amended from time to time.

Sources

- www.education.vic.gov.au/anaphylaxis
- <http://www.education.vic.gov.au/Documents/school/teachers/health/anaphylaxisqanda2014.pdf>

References

- Annual Risk Management Checklist (Appendix A)
- Anaphylaxis Management Plan (Appendix B)
- Communication Plan
- First Aid Policy
- Ministerial Order 706

- WH&S Action Management Plan
- Education Outside the Classroom Policy

Implementation:

Adopted and implemented by School Council on 1/5/2014

Appendix A

Template: Annual Risk Management Checklist

To be printed and completed annually

| | | |
|---|-----------|--|
| 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 Auto injector? | | |
| 2. How many of these students carry their Adrenaline Auto injector 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 Auto injector 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 Auto injector 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 Auto injector 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 Auto injectors | |
| 12. Where are the student(s) Adrenaline Auto injectors stored? | |
| 13. Do all School Staff know where the School's Adrenaline Auto injectors for General Use are stored? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 14. Are the Adrenaline Auto injectors 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 Auto injectors 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 Auto injector? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 19. Are the Adrenaline Auto injectors 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 Auto injector expiry dates on a regular basis? Who? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 21. Are there Adrenaline Auto injectors 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 Auto injectors and the Individual Anaphylaxis Management Plans are stored? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 24. Has the School purchased Adrenaline Auto injector(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 Auto injector for General Use clearly labelled as the 'General Use' Adrenaline Auto injector? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 27. Is there a register for signing Adrenaline Auto injectors 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 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 |
| 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 Auto injector 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 Auto injector 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 classroom? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| b. The school yard? | <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 Auto injector(s) and Individual Anaphylaxis Management Plans (including the ASCIA Action Plan) and the Adrenaline Auto injector 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 an 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 an anaphylactic reaction, and who are prescribed an Adrenaline Auto injector, including where their medication is located? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| d. How to use an Adrenaline Auto injector, including hands on practise with a trainer Adrenaline Auto injector? | <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 Auto injector(s) for General Use is kept? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

| | |
|---|--|
| g. Where the Adrenaline Auto injectors 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? | |

Appendix B

Template: Individual Anaphylaxis Management Plan

| | | | |
|--|--|---------------------|--|
| <p>This plan is to be completed by the Principal or nominee on the basis of information from the student's medical practitioner (ASCIA Action Plan for Anaphylaxis) provided by the Parent.</p> <p>It is the parents' responsibility to provide the School with a copy of the student's ASCIA Action Plan for Anaphylaxis containing the emergency procedures plan (signed by the student's Medical Practitioner) and an up-to-date photo of the student - to be appended to this plan; and to inform the school if their child's medical condition changes.</p> | | | |
| School | | Phone | |
| Student | | | |
| DOB | | Year level | |
| Severely allergic to: | | | |
| Other health conditions | | | |
| Medication at school | | | |
| EMERGENCY CONTACT DETAILS (PARENT) | | | |
| Name | | Name | |
| Relationship | | Relationship | |
| Home phone | | Home phone | |

| | | | |
|--|--|----------------------------|-------------------------|
| Work phone | | Work phone | |
| Mobile | | Mobile | |
| Address | | Address | |
| EMERGENCY CONTACT DETAILS (ALTERNATE) | | | |
| Name | | Name | |
| Relationship | | Relationship | |
| Home phone | | Home phone | |
| Work phone | | Work phone | |
| Mobile | | Mobile | |
| Address | | Address | |
| Medical practitioner contact | Name | | |
| | Phone | | |
| Emergency care to be provided at school | | | |
| Storage for Adrenaline Auto injector (device specific) (EpiPen®/ Anapen®) | | | |
| ENVIRONMENT | | | |
| To be completed by Principal or nominee. Please consider each environment/area (on and off school site) the student will be in for the year, e.g. classroom, canteen, food tech room, sports oval, excursions and camps etc. | | | |
| Name of environment/area: | | | |
| Risk identified | Actions required to minimise the risk | Who is responsible? | Completion date? |

| | | | |
|--|--|--|--|
| | | | |
| | | | |
| | | | |
| | | | |

Name of environment/area:

| Risk identified | Actions required to minimise the risk | Who is responsible? | Completion date? |
|------------------------|--|----------------------------|-------------------------|
| | | | |
| | | | |
| | | | |
| | | | |

Name of environment/area:

| Risk identified | Actions required to minimise the risk | Who is responsible? | Completion date? |
|------------------------|--|----------------------------|-------------------------|
| | | | |
| | | | |
| | | | |
| | | | |

Name of environment/area:

| Risk identified | Actions required to minimise the risk | Who is responsible? | Completion date? |
|------------------------|--|----------------------------|-------------------------|
| | | | |
| | | | |
| | | | |
| | | | |

Name of environment/area:

| Risk identified | Actions required to minimise the risk | Who is responsible? | Completion date? |
|------------------------|--|----------------------------|-------------------------|
| | | | |
| | | | |

| | | | |
|--|--|--|--|
| | | | |
| | | | |