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Emergency Response Procedures

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Generally, the College promotes allergy awareness. Refer to our **Allergy Awareness** policy. In the event that a student suffers anaphylaxis, the student will be managed in accordance with the individual's ASCIA Action Plan for Anaphylaxis and the College's **Critical Incident (Emergency Situations) Response** policy and **Accident Management** policy which set out how to respond to an anaphylaxis. Student health incidents which do not require treatment for anaphylaxis are managed through our **First Aid** policy.

The procedures set out in this policy and a student's ASCIA Action Plan will be followed when responding to anaphylaxis.

List of Students with Allergy Related Condition

Caroline Chisholm Catholic College maintains a complete and up to date list of students identifying as having a medical condition that relates to allergy and the potential for anaphylactic reaction. It is the responsibility of Support Staff to keep this list up to date. The list is maintained via the College Learning Management System - Compass.

Planning for an Emergency

The College regularly undertakes drills to test the effectiveness of our Emergency Response Procedures, including responding to anaphylaxis.

Staff should refer to the **Anaphylaxis Guidelines for Victorian Schools** to plan for and respond to anaphylaxis, including information on:

- self-administration of an adrenaline autoinjector
- responding to an incident
- procedures to follow in the College and out-of-College environments
- how to administer the student's prescribed adrenaline autoinjector
- steps to follow when an adrenaline autoinjector is administered
- first-time reactions
- post-incident support.

Common Allergens for Which Students May be at Risk of Allergy or Anaphylaxis

Common food allergies include those caused by:

- egg
- milk
- peanuts
- tree nuts

- fish
- shellfish
- soy
- sesame
- wheat
- lupin
- mammalian meat (caused by tick bite exposure).

Other common allergies can be caused by:

- bites and stings
- latex
- certain medications.

Signs and Symptoms of a Mild to Moderate Allergic Reaction

Signs and symptoms of a mild to moderate allergic reaction may include:

- swelling of lips, face or eyes
- hives or welts
- tingling mouth
- abdominal pain and vomiting (these are signs of anaphylaxis for insect allergy).

Signs and Symptoms for Anaphylaxis

Signs and symptoms for anaphylaxis may include:

- difficult/noisy breathing
- swelling of tongue
- swelling/tightness in throat
- wheeze or persistent cough
- difficulty talking and/or hoarse voice
- persistent dizziness or collapse
- pale and floppy (usually in younger children).

Emergency Response Procedures for

A member of staff should remain with the student displaying signs of an anaphylaxis at all times. Another member of College staff should immediately locate the student's adrenaline autoinjector and the student's ASCIA Action Plan for Anaphylaxis. Where possible, only College staff with training in the administration of an adrenaline autoinjector should administer the student's adrenaline autoinjector. However, it is imperative that an adrenaline autoinjector

Students at Risk of Anaphylaxis

is administered as soon as signs of anaphylaxis are recognised by any staff member available if trained College staff are unavailable.

For students having anaphylaxis, the following first aid steps should be followed:

1. Lay the student flat and do not allow them to stand or walk. If breathing is difficult, allow the student to sit. The student must not stand or be moved unless they are in danger (for example from bees in a nearby hive).
2. If the student is carrying their adrenaline autoinjector, follow instructions on the ASCIA Action Plan and give the adrenaline autoinjector accordingly.
3. If the student is not carrying their adrenaline autoinjector, but has one in the office or their classroom, there must be a system in place to get the adrenaline autoinjector to the student quickly. An adrenaline autoinjector for general use from one of the College's communal medication locations using the general ASCIA Action Plan for instructions can also be administered.
4. Call an ambulance on triple zero "000". Students should be transported by stretcher to the ambulance in all circumstances even if symptoms appear to have improved or resolved.
5. Alert the student's parents/guardians.
6. Further adrenaline autoinjector doses may be given if no response after five minutes.
7. The student must remain in hospital for at least four hours of observation.
8. After the student has been admitted to hospital, the College should contact Security Services Unit, Department of Education and Training to report the incident on 9589 6266 (available 24 hours a day, 7 days a week). A report will then be lodged on IRIS (Incident Reporting Information Systems).

Always give the adrenaline autoinjector first, and then the asthma reliever puffer if someone with known asthma and allergy to food, insects or medication has sudden severe breathing difficulty (including wheeze, persistent cough or hoarse voice) even if there are no skin symptoms.

For other incidents, refer to our **Critical Incident (Emergency Situations) Response** policy and our **First Aid** policy.

Emergency Response in the Classroom

The College has developed the following emergency response in the classroom:

{School to insert emergency response procedures for classroom e.g. Schools may do the following:

- 1. The classroom teacher must ring the College office and request the general adrenaline autoinjector. If no classroom phone or mobile phone is available, the teacher may send two responsible students from the class with a red card which enables the students to immediately interrupt the adults and bring back the medical kit containing the general adrenaline autoinjector and ASCIA Action Plan and a trained staff member (who should run to the scene immediately).**
- 2. If student has their own adrenaline autoinjector, a trained staff member should immediately administer the adrenaline autoinjector. Otherwise a trained staff member should administer the general adrenaline autoinjector.**
- 3. The College office will contact the student's parent/carer and the ambulance on 000, stating that an adrenaline autoinjector was given and the road closest to the College entrance. Student should be kept lying down. If breathing is difficult, allow the student to sit. The student must not stand or be moved unless they are in danger.**
- 4. A trained staff member from the College office should also bring student's spare adrenaline autoinjector to the classroom if needed.**
- 5. A staff member from the College office will direct the ambulance to the appropriate classroom on arrival.**

The College does emergency drill training in the classroom each Term.}

Emergency Response in the Playground

The College has developed the following emergency response in the playground:

{School to insert emergency response procedures for classroom e.g. Schools may do the following:

- 1. Staff on duty must remain with the student suffering anaphylaxis at all times.**
- 2. A staff member on duty to send two responsible students to the College office with a red card which enables the students to immediately interrupt the adults and bring back the medical kit containing the general adrenaline autoinjector and ASCIA Action Plan and a trained staff member (who should run to the scene immediately).**
- 3. If the student has their own adrenaline autoinjector, the trained staff member should immediately administer the adrenaline autoinjector. Otherwise the trained staff member should administer the general adrenaline autoinjector.**
- 4. The College office will contact the student's parent/carer and the ambulance on 000, stating that an adrenaline autoinjector was given and the road closest to the College entrance. Student should be kept lying down. If breathing is difficult, allow the student to sit. The student must not stand or be moved unless they are in danger.**
- 5. All other staff members are to clear the playground to ensure easy access for the ambulance to the student with anaphylaxis.**
- 6. A staff member from the College office will also bring student's spare adrenaline autoinjector to the classroom if needed.**
- 7. A staff member from the College office will direct the ambulance to the appropriate place in the playground on arrival.**

The College does emergency drill training in the playground each Term.}

Emergency Response During Excursions and Offsite Activities

Each individual excursion and offsite activity (including College camps and special event days such as sport carnivals) requires an individual risk analysis following our **Risk Minimisation Strategies**.

The College has developed the following emergency response during excursions and offsite activities:

{School to insert emergency response procedures for excursions and offsite activities e.g. Schools may do the following:

- 1. If anaphylaxis occurs, a trained staff member should immediately administer the adrenaline autoinjector.**
- 2. The lead teacher on the excursion, or the student's supervising staff member at an offsite activity (including camps for example) should contact the ambulance on 000, stating that an adrenaline autoinjector was given and the road closest to the location.**
- 3. The supervising staff member should also contact the student's parent/carer (if not already on the excursion/offsite activity) and other staff members and volunteers should manage other students, ensuring that they are kept at a safe distance and remain calm.**
- 4. Another staff member should wait for the ambulance to direct paramedics to the student when they arrive on the scene.**
- 5. A supervising staff member or another trained staff member to travel with the student to the hospital if parents/carers are unavailable.}**

Review Procedures

After anaphylaxis has occurred that has involved a student in the College's care and supervision, the College's critical incident review will also include the following procedures:

- The adrenaline autoinjector must be replaced as soon as possible, by either the parent/guardian or the College if the adrenaline autoinjector for general use has been used.
- The Principal or College Anaphylaxis Supervisor should ensure that there is an interim Individual Anaphylaxis Management Plan, should another anaphylaxis occur prior to the replacement adrenaline autoinjector being provided.

- The student's Individual Anaphylaxis Management Plan should be reviewed in consultation with the student's parent/guardian.
- This policy should be reviewed to ascertain whether there are any issues which require clarification or modification.