



DPS ANAPHYLAXIS POLICY

Reviewed: March 2026

Next review: March 2027

Recommended Review Cycle: every 1 year

Communication method: School Website / Induction Processes/
Twice a year at Briefing



Help for non-English speakers

If you need help to understand the information in this policy, please contact Doncaster Primary School on 9848 1122 or email doncaster.ps@education.vic.gov.au

PURPOSE

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

SCOPE

This policy applies to:

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

POLICY

School Statement

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

Anaphylaxis

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

Symptoms

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

- swelling of the lips, face and eyes
- hives or welts
- tingling in the mouth.

Signs and symptoms of anaphylaxis, a severe allergic reaction, can include:

- difficult/noisy breathing
- swelling of tongue
- difficulty talking and/or hoarse voice
- wheeze or persistent cough
- persistent dizziness or collapse

- student appears pale or floppy
- abdominal pain and/or vomiting.

Symptoms usually develop within ten minutes and up to two hours after exposure to an allergen but can appear within a few minutes.

Treatment

Adrenaline given as an injection into the muscle of the outer mid-thigh is the first aid treatment for anaphylaxis.

Individuals diagnosed as being at risk of anaphylaxis are prescribed an adrenaline autoinjector for use in an emergency. These adrenaline autoinjectors are designed so that anyone can use them in an emergency.

Individual Anaphylaxis Management Plans

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

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

Parents and carers must:

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

Each student's Individual Anaphylaxis Management Plan must include:

- information about the student's medical condition that relates to allergy and the potential for anaphylactic reaction, including the type of allergies the student has.
- information about the signs or symptoms the student might exhibit in the event of an allergic reaction based on a written diagnosis from a medical practitioner.
- strategies to minimise the risk of exposure to known allergens while the student is under the care or supervision of school staff, including in the school yard, at camps and excursions, or at special events conducted, organised or attended by the school
- the name of the person(s) responsible for implementing the risk minimisation strategies which have been identified in the Plan.
- information about where the student's medication will be stored.
- the student's emergency contact details
- an up-to-date ASCIA Action Plan for Anaphylaxis completed by the student's medical practitioner.

Review and updates to Individual Anaphylaxis Plans

A student's Individual Anaphylaxis Plan will be reviewed and updated on an annual basis in consultation with the student's parents/carers. The plan will also be reviewed and, where necessary, updated in the following circumstances:

- as soon as practicable after the student has an anaphylactic reaction at school.
- if the student's medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, changes
- when the student is participating in an off-site activity, including camps and excursions, or at special events including fetes and concerts.

Our school may also consider updating a student's Individual Anaphylaxis Management Plan if there is an identified and significant increase in the student's potential risk of exposure to allergens at school.

Location of plans and adrenaline autoinjectors

Depending on the age of the students in your school community who are at risk of anaphylaxis, the severity of their allergies and the content of their plan, some students may keep their adrenaline autoinjector on their person, rather than in a designated location. It may also be appropriate to keep copies of the plans in various locations around the school so that the plan is easily accessible by school staff in the event of an incident. Appropriate locations may include the student's classroom, sick bay, the school office or in the materials provided to staff on yard duty.

Students will **not** keep their adrenaline autoinjectors on their person:

- *At School during class time, recess, lunch and during before and after*
- *Excursion, camps, out of school activities* where it is not reasonable for students to keep their autoinjectors on their person.



*At Doncaster Primary School, a copy of each student's Individual Anaphylaxis Management Plan will be stored with their ASCIA Action Plan for Anaphylaxis at the **main office** in the Emergency Medical Cupboard together with the student's adrenaline autoinjector **or with nominated teacher when out of the school on excursions or school camps**. Adrenaline autoinjectors must be labelled with the student's name.*

Students **will** keep their adrenaline autoinjectors on their person:

At **School Camps or Excursions** where it is reasonable as part of the risk minimisation strategy i.e. Grade 6 Canberra Camp on airplane or students are separated into groups for walking tour etc.

A copy of each student's Individual Anaphylaxis Management Plan will be stored with their ASCIA Action Plan for Anaphylaxis with the students and with the nominated teacher. Students are encouraged to keep their adrenaline autoinjectors on their person. Adrenaline autoinjectors for general use are available at in main office in the Emergency Medical Cupboard or with nominated teacher when out of the school and are labelled "general use".

Doncaster Primary School has 2 General use Epipens (1x EpiPen Jnr Pen and 1x Epipen adult)

Some students keep their adrenaline autoinjectors on their person and others store them elsewhere:

- At school where individual management plan indicates that the student should have access to the autoinjector at all times for risk minimisation
- On Camps when two autoinjectors per child are provided (i.e. home use auto injector and the auto injector that is kept at the school)

A copy of each student's Individual Anaphylaxis Management Plan will be stored with their ASCIA Action Plan for Anaphylaxis **with the student and with nominated teacher when out of school otherwise in main office in the Emergency Medical Cupboard**. Whilst some students keep their adrenaline autoinjector on their person, medication for those that do not will be stored and labelled with their name at **in main office in the Emergency Medical Cupboard or with nominated teacher when out of the school** together with adrenaline autoinjectors for general use.



Risk Minimisation Strategies

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

- staff and students are regularly reminded to wash their hands after eating.
- students are discouraged from sharing food.
- garbage bins at school are to remain covered with lids to reduce the risk of attracting insects.
- tongs are used when picking up papers or rubbish in the playground.
- year groups will be informed of allergens that must be avoided in advance of class parties, events or birthdays and non- food item will be encouraged to be used. If food is given, the classroom teacher will distribute to students at the end of the day to be consumed under parental supervision.
- a general use EpiPen will be stored at the school office.

Adrenaline autoinjectors for general use

Doncaster Primary School will maintain a supply (in accordance with the availability of stock from chemists) of adrenaline autoinjector(s) for general use, as a back-up to those provided by parents and carers for specific students, and also for students who may suffer from a first-time reaction at school.

There are currently 4 adrenaline devices approved by the Therapeutic Goods Administration for use in Australia: the EpiPen®, the Anapen®, Jext® and Neffy®. All devices can be used when provided by families for students, however, the principal or allocated staff member can only use EpiPen®, Anapen® or Jext® adrenaline autoinjector for general use. For more information about which autoinjector to purchase for general use, refer to Adrenaline autoinjectors for general use.

Adrenaline autoinjectors (1 x EpiPen jnr and 1 x EpiPen Adult) for general use will be stored in *the main office in the Emergency Medical Cupboard* and labelled "general use".



The principal is responsible for arranging the purchase (in accordance with the availability of stock at chemists) of adrenaline auto-injectors for general use, and will consider:

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

Emergency Response

In the event of an anaphylactic reaction, the emergency response procedures in this policy must be followed, together with the school's general first aid procedures, emergency response procedures and the student's Individual Anaphylaxis Management Plan.

A complete and up to date list of students identified as being at risk of anaphylaxis is maintained by Rebecca Rolfe and stored at *in the main office in the Emergency Medical Cupboard*. For camps, excursions and special events, a designated staff member will be responsible for maintaining a list of students at risk of anaphylaxis attending the special event, together with their Individual Anaphylaxis Management Plans and adrenaline autoinjectors, where appropriate.

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

Step	Action
1.	• Lay the person flat • Do not allow them to stand or walk • If breathing is difficult, allow them to sit with legs outstretched • Be calm and reassuring • Do not leave them alone • Seek assistance from another staff member or reliable student to locate the student's adrenaline device or the school's general use autoinjector, and the student's Individual Anaphylaxis Management Plan, stored in medical cupboard in front of the Assistant Principals office. • If the student's plan is not immediately available, or they appear to be experiencing a first-time reaction, follow steps 2 to 5
2.	Administer an EpiPen or EpiPen Jr • Remove from plastic container • Form a fist around the EpiPen and pull off the blue safety release (cap) • Hold leg still and place orange end against the student's outer mid-thigh (with or without clothing) • Push down hard until a click is heard or felt and hold in place for 3 seconds • Remove EpiPen • Note the time the EpiPen is administered • Retain the used EpiPen to be handed to ambulance paramedics along with the time of administration. OR Administer an Anapen® 500 • Pull off the black needle shield • Pull off grey safety cap (from the red button) • Place needle end firmly against the student's outer mid-thigh at 90 degrees (with or without clothing) • Press red button so it clicks and hold for 3 seconds • Remove Anapen® • Note the time the Anapen is administered • Retain the used Anapen to be handed to ambulance paramedics along with the time of administration. OR Administer Jext 150 or 300 • Form fist around Jext and pull off yellow cap

	- Place black injector tip against outer-mid thigh (with or without clothing) - Push black tip firmly until a click is heard and hold in place for 3 seconds. - Remove Jext - Note the time the Jext device is administered. - The used adrenaline device must be handed to the ambulance paramedics along with the time of administration OR Administer Neffy® 1mg or 2mg - Hold the nasal spray with your thumb on the bottom of the plunger and a finger on either side of the nozzle. - Do not pull or push on the plunger. Do not test or prime (pre-spray). Each Neffy nasal spray contains only one spray. - Place the nozzle of the nasal spray into a nostril until fingers touch the nose. - For smaller nostrils, aim for the fingers to touch the nose. - Keep the nozzle pointed towards the forehead. Do not angle the nozzle of the nasal spray to the inner or outer walls of the nose. - Press the plunger up firmly until the dose is administered and it sprays into the nostril. - Note the time the Neffy device is administered. - The used adrenaline device must be handed to the ambulance paramedics along with the time of administration
3.	Call an ambulance (000)
4.	If there is no improvement or severe symptoms progress (as described in the ASCIA Action Plan for Anaphylaxis (RED)), further adrenaline doses may be administered every 5 minutes, if other adrenaline autoinjectors are available.
5.	Contact the student's emergency contacts.
6.	The principal or a staff member allocated to do so must contact the Incident Support and Operations Centre (ISOC) on 1800 126 126 to report 'High' or Extreme' severity incidents to report the incident. Incidents assessed as 'Low' or 'Medium' can be reported directly into EduSafe Plus by the principal or their allocated staff member.

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

For first time anaphylactic reactions, the school's general use adrenaline autoinjector device must be used. If the general use device is not immediately available in an anaphylaxis emergency, staff may use another student's adrenaline device, including the EpiPen®, Anapen®, Jext® or Neffy® device. This may save a life. If another student's adrenaline device is used in an anaphylaxis emergency, the school must notify the parents of the student whose device was used and immediately replace the device.

Where possible, schools should consider using the correctly dosed adrenaline device depending on the weight of the student. However, in an emergency if there is no other option available, any device should be administered to the student

Communication Plan to Parents

This policy will be available on Doncaster Primary School's website, so that parents and other members of the school community can easily access information about Doncaster Primary School's anaphylaxis management procedures. The parents and carers of students who are enrolled at Doncaster Primary School and are identified as being at risk of anaphylaxis will also be provided with a copy of this policy.

The Principal is responsible for ensuring that all relevant staff, including casual relief staff and volunteers are aware of this policy and Doncaster Primary School's procedures for anaphylaxis management. Casual relief staff and volunteers who are responsible for the care and/or supervision of students who are identified as being at risk of anaphylaxis will also receive a verbal briefing on this policy, their role in responding to an anaphylactic reaction and where required, the identity of students at risk.

The Principal is also responsible for ensuring relevant staff are trained and briefed in anaphylaxis management, consistent with the Department's [Anaphylaxis Guidelines](#).

Communication Plan of Staff (including Casual Relief Staff and Volunteers)

All staff are advised of the Anaphylaxis policy and Emergency response to Anaphylaxis via our:

- Induction at DPS Professional Learning session at the start of the year
- Staff Handbook and induction
- The Anaphylaxis Policy is available on our School Website
- Posters of anaphylactic students are displayed in the staff room and First Aid Room

CRT/ Visiting teachers are

- CRT are given information of all anaphylactic children in the school and a separate photo page of anaphylactic children specific to the class that they are teaching.
- Given a verbal briefing about how anaphylaxis response is managed at the school and shown the location of where Epipens are kept.

Staff training

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

- School staff who conduct classes attended by students who are at risk of anaphylaxis
- Any other member of school staff as required by the Principal based on a risk assessment.

Staff who are required to undertake training must have completed:

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

Doncaster Primary School uses the following training course type - First aid (HLTAID011), Asthma (22556VIC) & Anaphylaxis (22578VIC) (1153797)

The registered Anaphylaxis trainer uses 22579VIC - Verifying the correct use of Adrenaline Autoinjector device.

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

- the school's anaphylaxis management policy
- the causes, symptoms and treatment of anaphylaxis
- the identities of students diagnosed as being at risk of anaphylaxis, their allergens and the location of their Individual Anaphylaxis Management Plans and their medication/s
- discussion on staff anaphylaxis training and renewal
- how to use an adrenaline device, including hands-on practice with an adrenaline device trainer device (which does not contain adrenaline)
- the school's general first aid and emergency procedures
- the location of adrenaline autoinjector devices prescribed for individual students that have been purchased by their family

- the location of adrenaline devices that the school has purchased for general use
- how to access on-going support and training.

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

A record of staff training courses and briefings will be maintained Records kept on U:Drive and hardcopy in the office.

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

FURTHER INFORMATION AND RESOURCES

- The department's Policy and Advisory Library (PAL):
 - [Anaphylaxis](#)
 - Allergies
 - First Aid for Students and Staff
 - Health Care Needs
 - Managing Reporting School Incidents (Including Emergencies)
 - Medication
- [Allergy & Anaphylaxis Australia](#)
- ASCIA Guidelines: [Schooling and childcare](#)
- [Hero HQ Anaphylaxis Management Training](#)
- https://allergyfacts.org.au/__interest/anaphylaxis/
- Royal Children's Hospital: [Allergy and immunology](#)

POLICY REVIEW AND APPROVAL

Policy last reviewed	March 2026
Approved by	Principal
Next scheduled review date	March 2027

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

