

Tocumwal Pre-School

SECTION: 2 – Children’s Health and Safety
POLICY NO: 2.3.0
POLICY: Managing Food Allergies & Anaphylaxis
REVIEW DATE: 16.6.18 **DATE OF APPROVAL:**

Introduction

Centres have a Duty of Care to provide appropriate care to ensure the needs of all children and families are being met. Anaphylaxis is a severe and sometimes sudden allergic reaction. It can occur when a susceptible person is exposed to an allergen (such as food or an insect sting). Reactions usually begin within minutes of exposure and can progress rapidly over a period of up to two hours or more. Anaphylaxis is potentially life threatening and always requires an emergency response. Anaphylaxis can occur at any age but is most common in children and young adults. Anaphylaxis may be triggered by foods such as peanuts, tree nuts, eggs, wheat, cow’s milk, soy and seafood. Other substances that can trigger severe allergic reactions include medications (especially antibiotics), bee and other insect stings.

Goals – What are we going to do?

The Centre will provide accredited Anaphylaxis Management Training for Centre staff and ensure at least one staff member who has completed accredited anaphylaxis training is on duty whenever children are being educated. The centre will facilitate effective care, health management and management of emergencies in children who have food allergies, and children who are at risk of anaphylaxis by implementing risk minimisation strategies. Staff and parents should be aware that it is not possible to achieve a guaranteed allergen-free environment even where risk minimisation strategies have been implemented. The Centre will recognise the need for staff awareness about hazards and maintain policies, procedures and training to recognise and manage a severe allergic reaction or anaphylaxis with confidence.

National Quality Framework Quality Area 2: Children’s Health and Safety

National Quality Standard 2.1 Health - Each child’s health and physical is supported and promoted

- 2.1.1 Wellbeing and comfort – Each child’s comfort and wellbeing and provide for, including appropriate opportunities to meet each child’s need for sleep, rest and relaxation
- 2.1.2 Health practices and procedures – Effective illness and injury management and hygiene practices are promoted and implemented
- 2.1.3 Healthy lifestyle – Healthy eating and physical activity are promoted and appropriate for each child

National Quality Standard 2.3 Safety - Each child is protected

- 2.2.1 Supervision – At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
- 2.2.2 Incident and emergency management – Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.
- 2.2.3 Child protection – Management, educators, and staff are aware of their roles and responsibilities to identify and respond to every child at risk of abuse and neglect

National Quality Framework Area 6: Collaborative Partnerships with families

National Quality Standard 6.1 Supportive relationships with families – Respectful relationships with families are developed and maintained and families are supported in their parenting role.

- 6.1.1 Engagement with the service – Families are supported from enrolment to be involved in the service and contribute to service decisions.
- 6.1.2 Parent views are respected – The expertise, culture, values and beliefs of families are respected, and families share in decision-making about their child’s learning and wellbeing.

Strategies – How will it be done?

Anaphylaxis management should be viewed as a shared responsibility to facilitate effective care and management of anaphylaxis or other emergencies in a child with food allergies or susceptibility to anaphylaxis involved in the Service;

The Nominated Supervisor will:

- Ensure families provide information on the child's health, medications, allergies, their doctor's name, address and phone number, emergency contact names and phone numbers, and develop a **Risk Management Plan** (see Section 2, Appendix 11) in consultation with staff following enrolment and prior to the child starting at the service. This plan will assess the risks relating to the child's specific health care needs, allergy or medical condition; any requirements for safe handling, preparation and consumption of food; notification procedures that inform other families about allergens that pose a risk; procedures for ensuring educators/students/volunteers can identify the child, their medication.
- Ensure families provide documentation from their doctor confirming their child's allergies and their management in the form of an **Individual Anaphylaxis Action Plan** (see Section 2, Appendix 12). The action plan must include a current photo of the child and must clearly outline procedures to be followed by staff in the event of an incident relating to the child's specific health care needs.
- Ensure risk assessments and individual anaphylaxis plans are reviewed on a regular basis. If a child's medical, physical, emotional or cognitive state changes the family will need to complete a new Action Plan and our service will re-assess its ability to care for the child, including whether educators are appropriately trained to manage the child's ongoing special needs
- Ensure that a copy of the **Anaphylaxis Policy is provided to the parents of any child with Anaphylaxis attending** the Centre.
- Ensure at least one staff member who has completed approved anaphylaxis management training is in attendance, and be immediately available in an emergency, whenever children are being educated.
- Ensure staff are aware that the National Regulations allow for the administration of medication to a child in an emergency situation regardless of whether or not an authorisation to administer the medication has been obtained from the child's parent.
- **Notify staff of any child on an 'Individual Anaphylaxis Action Plan' and Risk Management Plan** (See Section 2, Appendices 12 & 11). A copy of the plans will be displayed in each classroom and placed with the child's individual Anaphylaxis kit for staff to reference when medication is administered and for emergency situations.

- **Develop a Complaints, feedback & communications policy** (see Section 6, Policy 6.1.0) to ensure a child's parent can communicate any changes to the medical management plan and risk management plan for the child (see Section 6, Appendix 2 Complaints, Communication and Feedback Proforma).
- Maintain and develop communication strategies to ensure that relevant staff members and volunteers are informed about the medical conditions policy and the medical management plan and Risk Minimisation Plan for the child.
- **Develop policies** that give consideration to management of severe allergy and anaphylaxis in regard to areas such as child health, food and nutrition, storage of dangerous substances and equipment, conduct of excursions, illness, accident and emergency treatment.
- **Ensure Regulation and other Guidelines are adhered to** in respect of administering medication and treatment in emergencies, particularly parental or guardian written consent, and a Medication Authority Form has been completed and signed.
- **If a centre staff member is to be responsible for the emergency administration of adrenaline (EpiPen or EpiPen Jr) to a child with an anaphylactic reaction**, and this should be administered with consideration to the following conditions:
 - it is a requirement of and included in the child's Individual Anaphylaxis Action Plan,
 - the child shows signs and symptoms of an anaphylactic reaction
 - the children's Centre staff member has been adequately trained by an approved organisation in the administration of adrenaline and use of the EpiPen and the safe disposal of contaminated material.
 - the children's centre staff member feels they are confident and competent to administer the medication
- Develop and implement practical strategies to avoid exposure to medically confirmed allergens. These include
 - supervision of children when eating or drinking
 - regular discussions with children about the importance of eating your own food and not sharing
 - food is eaten in specified area which is a focus of supervision

- identify foods that contain or are likely to contain known allergen and replace with other suitable foods (e.g. egg substitute) or remove the food altogether
- encourage parent/guardian of identified child to be involved on special days that involve food
- advise parent/guardian of the identified child ahead of time so that they can provide suitable food
- food for the identified child should only be approved and provided by the child's parent/guardian
- inform other parents of known food allergies and, particularly if the allergen is peanuts or tree nuts, request all parents to avoid sending these foods
- decrease number of plants in service grounds that attract bees
- ensure grass is kept short
- ensure the allergic child wears shoes at all times
- keep lids on garbage bins
- do not leave drinks or drink bottles exposed in the outdoor area
- remove insect nests
- avoid contact with party balloons and latex gloves
- Implement age appropriate education and utilize spontaneous teaching opportunities to increase children's awareness of allergies

In any case where a child is having a severe allergic reaction or any symptoms or signs of anaphylaxis, the Centre staff should immediately administer first aid or medical treatment according to either:

- the child's Individual **Anaphylaxis Action Plan**, or,
- a doctor's instructions, or,
- if a child care staff member who has undergone training by an appropriate health or first aid organisation in the management of anaphylaxis and/or the administration of adrenaline (EpiPen or EpiPen Jr) is present at the time, the Anaphylaxis Action Plan as recommended by that training, or,
- if these are not available, use the First Aid Plan for Severe Allergic Reaction (Anaphylaxis) from *Australian First Aid*, St John Ambulance Australia, 2011, (see Section 2, Appendix 13),

and, dial 000 for an ambulance and notify the families (see Section 2, Policy 2.9.0) in accordance with the Regulation and guidelines on emergency procedures. Medication may be administered to a child without an authorization in case of an anaphylaxis or asthma emergency.

If medication is administered under this regulation, the approved provider or nominated supervisor of the education and care service must ensure that the following are notified as soon as practicable—

- (a) a parent of the child;
- (b) emergency services.

The risk of accidental exposure to food allergens can also be reduced by:

- Asking parents of all children not to send foods that contain the most common allergens for celebrations and occasions when food might be shared
- Not allowing any sharing of food, containers and utensils
- Ensuring eating areas and utensils are thoroughly cleaned with warm soapy water, or put through a dishwasher cycle if appropriate, to remove traces of potential allergens.
- making sure materials such as cow's milk cartons, egg cartons or eggshells are clean and free of contamination before using for art and craft activities
- being aware of the risk to an identified child of using allergenic foods in cooking activities (e.g. baking cakes, frying eggs)
- keeping grassed areas mown, and reducing plants that attract stinging insects
- working together with the parents of the identified child to gain a shared understanding of the level of risk in routine activities, such as cooking and craft, and the overall philosophy of inclusiveness for all children. For example, medical specialists advise there is little risk to a child with an egg allergy of another group of children mixing eggs into cake batter at a distance in the same room. Clean-up after the activity should ensure that no traces of egg are left that the identified child might inadvertently pick up at a later time. Advice from the identified child's medical specialist and the child's parents can be sought to clarify any concerns
- continuing education and awareness strategies.

Families will:

- Ensure that the child's auto injection device is always on the premises whilst the child is in attendance. This can be done by permanently locating their medication in a nominated allergy buddy within the centre or by signing the medication in each day. This will be noted within the child's risk management plan along with the expiry date of any medication
- promptly notify the Centre if they are aware that their child has been diagnosed as being at risk of a severe allergic reaction
- promptly notify the Centre if the health needs of their child change
- promptly notify the Centre if their child has a severe allergic reaction while not at the service, either at home or at another location
- inform the Centre of any other health care needs, disability or learning or behaviour difficulties which may impact on the management of anaphylaxis
- promptly notify the Centre if they are aware that their child has been diagnosed as being at risk of a severe allergic reaction
- promptly notify the Centre if the health needs of their child change
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Approved Training organisations can be found at:

Australian Children's Education and Care Quality Authority – Approved anaphylaxis management training

<http://www.acecqa.gov.au/First-aid-qualifications-and-training>

Statutory Legislation

- *Work Health and Safety Act 2010*
- *Education and Care Services National Amended Regulations 2018, Regulations 90, 136, 168(2)(d), 169, 170*
- *National Quality Standards for Early Childhood Education and Care and School Age Care 2018*

- *St John DRSABCD Action Plan*

Sources

- Anaphylaxis Guidelines for Early Childhood Education and Care Services, NSW Department of Education and Communities, www.dec.nsw.gov.au/ecec
- Australasian Society of Clinical Immunology and Allergy (ASCIA), 2016: <http://www.allergy.org.au>;
- *Guidelines for the prevention of anaphylaxis in schools, preschools and childcare: 2012 update*, ASCIA, 2012
- *Australian First Aid*, St. John Ambulance Australia, 2002: <http://www.stjohn.org.au>
- Anaphylaxis Australia Inc. (AAI): <http://www.allergyfacts.org.au> .
- The Children's Hospital at Westmead Allergy factsheets <http://kidshealth.w.edu.au/fact-sheets>
- *Community Early Learning Australia*