



## Anaphylaxis Management Policy

### Quality Area 2: Children's health and safety

**Standard 2.1** Each child's health is promoted.

**Standard 2.2** Healthy eating and physical activity are embedded in the program for children.

**Standard 2.3** Each child is protected.

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Anaphylaxis is a severe allergic reaction which is potentially life threatening. It should always be treated as a medical emergency, requiring immediate treatment. Most cases of anaphylaxis occur after a person with a severe allergy is exposed to the allergen to which they are allergic, usually a food, insect sting or medication.

The aim of this policy is to not only minimise the risk of an anaphylactic reaction occurring while the child is in the care of the children's service, but also to ensure staff members respond appropriately to any anaphylactic reaction. Staff must be able to initiate appropriate treatment, including competently administering an Epi-Pen. The service also aims to raise the community awareness of anaphylaxis and its management through education and policy implementation.

### The Director will ensure:

- That all staff members have completed first aid and anaphylaxis management training approved by the Education and Care Services National Regulations at least every 3 years and is recorded, with each staff members' certificate held on the Service's premises.
- That all staff members, whether or not they have a child diagnosed at risk of anaphylaxis undertakes training in the administration of the adrenaline auto-injection device and cardio-pulmonary resuscitation every 12 months, recording this in the staff records.
- Ensure that all staff members are aware of symptoms of an anaphylactic reaction, the child at risk of anaphylaxis, the child's allergies, anaphylaxis action plan and Epi Pen kit.
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- That a copy of this policy is provided and reviewed during each new staff member's induction process.
- A copy of this policy will be provided to a parent or guardian of each child diagnosed at risk of anaphylaxis at the service
- Ensure updated information, resources and support is regularly given to families for managing allergies and anaphylaxis.

### In services where a child diagnosed at risk of anaphylaxis is enrolled the Director and Nominated Supervisor shall also:

- Conduct an assessment of the potential for accidental exposure to allergens while child/children at risk of anaphylaxis are in the care of the service and develop a risk minimisation plan for the service in consultation with staff and the families of the child/children
- Ensure that no child who has been prescribed an adrenaline auto-injection device is permitted to attend the service without the device
- Display an Australasian Society of Clinical Immunology and Allergy Inc. (ASCIA) generic poster called Action Plan for Anaphylaxis for each child with a diagnosed risk of anaphylaxis, in key locations at the service, for example, in the children's room, the staff room or near the medication cabinet
- Ensure that a child's individual anaphylaxis medical management action plan is signed by a Registered Medical Practitioner and inserted into the enrolment record for each child. This will outline the allergies and describe the prescribed medication for that child and the circumstances in which the medication should be used
- Ensure that all staff responsible for the preparation of food are trained in managing the provision of meals for a child with allergies, including high levels of care in preventing cross contamination during

storage, handling, preparation and serving of food. Training will also be given in planning appropriate menus including identifying written and hidden sources of food allergens on food labels.

- Ensure that a notice is displayed prominently in the main entrance of the children's service stating that a child diagnosed at risk of anaphylaxis is being cared for or educated at the Service
- Ensure that all relief staff members in the Service have completed training in the administration of anaphylaxis management including the administration of an adrenaline auto-injection device, awareness of the symptoms of an anaphylactic reaction, the child at risk of anaphylaxis, the child's allergies, the individual anaphylaxis medical management action plan and the location of the auto-injection device kit
- Implement the communication strategy and encourage ongoing communication between parents/guardians and staff regarding the current status of the child's allergies, this policy and its implementation
- Display an Emergency contact card by the telephone
- Ensure that all staff in the service know the location of the anaphylaxis medical management plan and that a copy is kept with the auto-injection device Kit
- Ensure that the staff member accompanying children outside the Service carries the anaphylaxis medication and a copy of the anaphylaxis medical management action plan with the auto-injection device kit

**Staff responsible for the child at risk of anaphylaxis shall:**

- Ensure a copy of the child's anaphylaxis medical management action plan is visible and known to staff in the service
- Follow the child's anaphylaxis medical management action plan in the event of an allergic reaction, which may progress to anaphylaxis
- In the event where a child who has not been diagnosed as allergic, but who appears to be having an anaphylactic reaction:
  - Call an ambulance immediately by dialling 000
  - Commence first aid measures
  - Contact the parent/guardian
  - Contact the emergency contact if the parents or guardian can't be contacted

In the event that a child suffers from an anaphylactic reaction the Service and staff will:

- Follow the child's anaphylaxis action plan.
- Call an ambulance immediately by dialling 000
- Commence first aid measures
- Contact the parent/guardian
- Contact the emergency contact if the parents or guardian can't be contacted
- Practice the administration procedures of the adrenaline auto-injection device using an auto-injection device trainer and 'anaphylaxis scenarios' on a regular basis, preferably quarterly
- Ensure the child at risk of anaphylaxis will only eat food that has been prepared according to the parents or guardians instructions.
- Ensure tables and bench tops are washed down effectively after eating
- Ensure hand washing for all children upon arrival at the service and before and after eating.
- Increase supervision of a child at risk of anaphylaxis on special occasions such as excursions, incursions, parties and family days.
- Ask all parents/guardians as part of the enrolment procedure, prior to their child's attendance at the service, whether the child has allergies and document this information on the child's enrolment

record. If the child has severe allergies, ask the parents/guardians to provide a medical management action plan signed by a Registered Medical Practitioner

- Ensure that an anaphylaxis medical management action plan signed by the child's Registered Medical Practitioner and a complete auto-injection device kit (which must contain a copy the child's anaphylaxis medical management action plan) is provided by the parent/guardian for the child while at the service
- Ensure that the auto-injection device kit is stored in a location that is known to all staff, including relief staff; easily accessible to adults (not locked away); inaccessible to children; and away from direct sources of heat
- Ensure that the auto-injection device kit containing a copy of the anaphylaxis medical management action plan for each child at risk of anaphylaxis is carried by a staff member accompanying the child when the child is removed from the service e.g. on excursions that this child attends
- Regularly check and record the adrenaline auto-injection device expiry date. (The manufacturer will only guarantee the effectiveness of the adrenaline auto-injection device to the end of the nominated expiry month)
- Provide information to the service community about resources and support for managing allergies and anaphylaxis

#### **Parents/guardians of children shall:**

- Inform staff at the children's service, either on enrolment or on diagnosis, of their child's allergies
- Develop an anaphylaxis risk minimisation plan with service staff
- Provide staff with an anaphylaxis medical management action plan signed by the Registered Medical Practitioner giving written consent to use the auto-injection device in line with this action plan
- Provide staff with a complete auto-injection device kit
- Regularly check the adrenaline auto-injection device expiry date
- Assist staff by offering information and answering any questions regarding their child's allergies
- Notify the staff of any changes to their child's allergy status and provide a new anaphylaxis action plan in accordance with these changes
- Communicate all relevant information and concerns to staff, for example, any matter relating to the health of the child
- Comply with the service's policy that no child who has been prescribed an adrenaline auto-injection device is permitted to attend the service or its programs without that device
- Read and be familiar with the policy
- Identify and liaise with the nominated staff member
- Bring relevant issues to the attention of both staff and licensee

#### **Contact details for resources and support:**

- Australasian Society of Clinical Immunology and Allergy (ASCIA), at [www.allergy.org.au](http://www.allergy.org.au), provide information on allergies. Their sample Anaphylaxis Action Plan can be downloaded from this site. Contact details for Allergists may also be provided.
- Anaphylaxis Australia Inc (AAA), at [Allergy Facts](http://Allergy Facts), is a non-profit support organisation for families with food anaphylactic children. Items such as storybooks, tapes, auto-injection device trainers and so on are available for sale from the Product Catalogue on this site. Anaphylaxis Australia Inc provides a telephone support line for information and support to help manage anaphylaxis. Telephone 1300 728 000.
- Royal Children's Hospital Anaphylaxis Advisory Support Line provides information and support about anaphylaxis to school and licensed children's services staff and parents. Telephone 1300 725 911 or Email: [Wilma.Grant@rch.org.au](mailto:Wilma.Grant@rch.org.au)

This policy was made with consideration to:

Education and Care National Regulations 2012

Child Care Services Act 2007

Staying Healthy in Childcare

ACEQCA & National Quality Framework

<http://www.allergy.org.au/health-professionals/papers/prevent-anaphylaxis-in-schools-childcare>

Date that the policy was last updated or revised: April 2016

Signature of Director: \_\_\_\_\_

Nurture and Nature Private Preschool

**WA**

[www.health.wa.gov.au/anaphylaxis/home/](http://www.health.wa.gov.au/anaphylaxis/home/)

[www.det.wa.edu.au/inclusiveeducation/detcms/portal/](http://www.det.wa.edu.au/inclusiveeducation/detcms/portal/)