

Children's (Health) – Allergy/ anaphylaxis Policy

Aim

Our Centre aims to minimise exposure to any substance which is common in causing severe allergic reactions amongst children.

Implementation

While not common, anaphylaxis is life threatening. Anaphylaxis is a severe allergic reaction to a substance. While prior exposure to allergens is needed for the development of true anaphylaxis, severe allergic reactions can occur when no documented history exists. Anaphylaxis can be caused insect bites such as bees or wasps but is usually caused by a food allergy. Foods most commonly associated with anaphylaxis include **peanuts, seafood, nuts and in children eggs and cow's milk.**

Staff should be on the lookout for the below symptoms. Staff should be on the lookout for symptoms as they need to act rapidly if they do occur. Staff should **immediately call 000** if symptoms arise. If you know a child/staff member is prone to anaphylaxis reactions, and they carry an EpiPen® it should be injected by a staff member trained in first aid. CPR should be initiated should the child/staff member stop breathing.

Steps should be taken to prevent anaphylaxis occurring:

- Upon enrolment, Staff will seek medical information from family members about any known allergies via the **Enrolment Form**. The Director will require family members provide supporting documentation from a recognised Doctor as well as an **Allergy action plan**. This action plan (usually ASCIA) should include a photo of the child, what triggers the allergy, first aid needed and contact details of the doctor who has signed the plan.
- Staff should be educated to recognise how serious anaphylaxis is and under the steps that need to be taken in order to minimise the possibility of occurrence. A number of staff members spread evenly across the Centre and in the room with that child who hold First Aid qualifications will be trained in Anaphylaxis and how to administer an EpiPen®.

Ways to avoid exposure to triggers include:

- Not allowing children to trade food, utensils or food containers.
- Ideally, children who have severe allergies should only be served food prepared at their homes.
- Bottles, drinks and lunchboxes should be clearly labelled with the child's name that they are intended for.
- The use of food products in craft, science experiments and cooking classes may need to be changed in order to allow children with allergies to participate.
- Food preparation staff will be instructed on the necessity to prevent cross contamination.
- Parents will be asked not to send food with their children, or allow their children to consume food from home that contain high allergenic elements even if their child does not have an allergy.
- If appropriate a child with allergies may have to sit at a different table if food is being served that he/she is allergic to.
- Meals prepared at the Centre should not contain ingredients such as nuts.

Legislative Requirements

- Education and Care Services National Law and Regulations (ACT) 2011

Who is affected by this policy?

- Children and Families
- Staff and Management

Sources and further reading:

- The Australasian Society of Clinical Immunology and Allergy (ASCIA) and Anaphylaxis Australia