

# **Anaphylaxis Management**



## **Policy**

Janelle Street Centre will:

- Minimise the risk of an anaphylactic reaction occurring while the child is in the care of the children's service;
- Ensure that educators and staff members respond appropriately to an anaphylactic reaction by initiating appropriate treatment, including competently administering an adrenaline auto-injection device; and
- Raise Janelle Street Centre's community's awareness of anaphylaxis and its management through education and policy implementation.

## **Background**

Anaphylaxis is a severe, life-threatening allergic reaction. Up to two per cent of the general population and up to five percent of children (0-5years) are at risk. The most common causes in young children are eggs, peanuts, tree nuts, cows' milk, sesame, bee or other insect stings and some medications. Young children may not be able to express the symptoms of anaphylaxis. A reaction can develop within minutes of exposure to the allergen, but with planning and training, a reaction can be treated effectively by using an adrenaline auto-injection device. The licensee recognises the importance of all educators/staff/carers responsible for children at risk of anaphylaxis, undertaking training that includes preventative measures to minimise the risk of an anaphylactic reaction, recognition of the signs and symptoms of anaphylaxis and emergency treatment, including administration of an adrenaline auto-injection device.

Educators/staff/carers and parents/guardians need to be made aware that it is not possible to achieve a completely allergen-free environment in any service that is open to the general community. Educators/staff/carers should not have a false sense of security that an allergen has been eliminated from the environment. Instead Janelle Street Centre recognises the need to adopt a range of procedures and risk minimisation strategies to reduce the risk of a child having an anaphylactic reaction, including strategies to minimise the presence of the allergen in the centre.

## **Practices**

The Approved Provider will:

- Encourage educators to achieve and maintain first aid and anaphylaxis management training that has been approved by ACECQA,
- Ensure that this policy is provided to a parent or guardian of each child diagnosed at risk of anaphylaxis at the centre.

Where a child diagnosed at risk of anaphylaxis is enrolled the Responsible Person

- Shall also conduct an assessment of the potential for accidental exposure to allergens while children at risk of anaphylaxis are in the care of the centre and develop a risk minimisation plan for the centre in consultation with staff and the families of the children concerned.
- Ensure that a notice is displayed prominently in the main entrance of the service stating that a child diagnosed at risk of anaphylaxis is being cared for or educated at the service.

The Responsible Person will:

- Ask all parents/guardians as part of the enrolment procedure, prior to their child's attendance at the service, whether their child has allergies and document this information on the child's enrolment record. If the child has severe allergies, the parents/guardians will be asked to provide a medical management action plan signed by a Registered Medical Practitioner;

- Ensure that the main educator on duty whenever children are present at the service has completed emergency anaphylaxis management training;
- Ensure all educators know the child/children at risk of anaphylaxis, their allergies, the individual anaphylaxis medical management action plan and the location of the EpiPen;
- Ensure that no child who has been prescribed an adrenaline auto-injection device is permitted to attend the centre without the device. The device is to be brought to the Centre on each day that the child attends, signed in on appropriate record form each morning by parent and staff member, expiry date recorded, and signed out again when child leaves each afternoon.
- Implement the communication strategy and encourage ongoing communication between parents/guardians and educators/staff regarding the current status of the child's allergies, this policy and its implementation;
- Display an Australasian Society of Clinical Immunology and Allergy inc (ASCIA) generic poster called *Action Plan for Anaphylaxis* in a key location at the centre, 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 educators at Janelle Street Centre know the location of the anaphylaxis medical management plan and that a copy is kept with the auto-injection device kit; and
- Ensure that the educator accompanying children outside Janelle Street Centre carries the anaphylaxis medication and a copy of the anaphylaxis medical management action plan with the auto-injection device kit.

Educators 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 centre;
- Follow the child's anaphylaxis medical management action plan in the event of an allergic reaction, which may progress to anaphylaxis;
- In the situation 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 person to be notified in the event of illness if the parent/guardian cannot be contacted
- 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 on all excursions; and
- Provide information to the service community about resources and support for managing allergies and anaphylaxis.

Parents/guardians of children shall:

- Inform educators/staff at Janelle Street Centre, either on enrolment or on diagnosis, of their child's allergies;
- Develop an anaphylaxis risk minimisation plan with service staff;
- Provide educators/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 educators/staff by offering information and answering any questions regarding their child's allergies;

- Notify educators/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; and
- 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.

## **Sources**

- Education and Care Services National Regulations 2017: 90, 91, 94
- [www.cela.org.au](http://www.cela.org.au) (accessed October 25, 2023)

**Adopted: November 07, 2012**

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