Allergy (and anaphylaxis) aware Policy

Purpose: The purpose of this policy is encourage staff to use the best possible practise to maintain the health and safety of children with an allergy that causes anaphylaxis. That children with an allergy, which can result in anaphylaxis are identified and all staff are aware of the causes of the allergy, appropriate procedures are applied if anaphylaxis occurs and all staff have appropriate training in the event of anaphylaxis occurring.

First aid

- All Staff must be trained in first aid, according to DECD protocols, including anaphylaxis first aid using prescribed adrenalin via an autoinjector.
- First aid protocols ensure safe secure storage and immediate access to a child/student’s autoinjector, and other first aid equipment. Storage needs to ensure autoinjector will remain at the correct temperature (according to direction on packaging). We keep autoinjectors in a secure cupboard centrally located in the kitchen.
- All children’s medication is stored in a secure place, within the centre kitchen, with clear instructions according to DECD protocols. Use by dates should be regularly checked with all medication should have doctors instructions.
- Staff are responsible for managing first aid emergencies.

Planning for safety

- Our preschool will ask for medical information at the time of enrolment of children. If families indicate that their child has an allergy/anaphylaxis, the person responsible for administration will send appropriate form to the families which will be completed and returned before their child commences preschool.
- Every child/student with anaphylaxis will have a care plan
- Every child/student/adult with anaphylaxis has an agreed worksite support plan. This reflects the ages and stage of development of the child, and the nature of the service, and includes planning for:
  - informing all relevant staff including all relieving teachers
  - camps and excursions
  - special programs such as swimming, sports days and visiting presenters/programs
  - movement between services, for example between preschool and out of schools hours care
  - evacuation and invacuation
– activities such as craft where exposure to egg and milk cartons, seeds, play dough (chocolate essence) and egg shells may occur

- **Parents** are responsible for providing the care plan and any medication and ensuring that medication provided has a current expiry date

- **Parents and families** of children with a care plan are included in, but not ultimately responsible for, worksite education and planning for their child

- Care and support planning is **reviewed routinely** (for example at times of parent/family-teacher interviews) and always at times of transition (home → preschool → new school)

- Staff and children/students **understand and apply allergy aware practices** Families of children with anaphylaxis can contribute to planning for cooking lessons and celebrations etc

- **All families** in the pre/school community are regularly informed about allergy aware policy and practice in education and children’s services.

- Parents of all children will be asked not to send meals containing highly allergenic foods such as egg and nut products to preschool when there is a child at risk of anaphylaxis to these foods.
**Food Allergy**

- Everyone is encouraged to wash their hands before and after eating. Note: Some students may require non-soap based washes, eg those with eczema.
- Food is not given as a reward/treat.
- Children do not share or swap food, food utensils and food containers unless under supervision (for example special events, as pre-arranged and agreed with the family).
- Bottles, other drinks and lunch boxes provided by the parents for their children should be clearly labelled with the name of the child for whom they are intended.
- Food and nutrition education incorporates education about food allergy and any practical activities are planned with an assumption that some participants have a food-related allergy.
- Food is not supplied to children with anaphylaxis unless pre-arranged and agreed with the family. It is assumed any product might have traces of nut or other food allergy ingredients unless confirmed otherwise. (Meals prepared at preschool which contain ingredients with "May contain traces of nuts" on a label will not be given to nut allergic children).
- Food preparation follows standard precautions to avoid cross contamination. People preparing food (including volunteers, teachers) will be given advice on strategies to ensure that food is not cross contaminated.
- In some circumstances it may be appropriate that a highly allergic child does not sit at a table where the food to which they are allergic is being served.
- Planning camps and excursions takes into account food supply services, including discussing the full menu with families (including product details).
- Be aware of using food as a fundraising exercise, eg supplying chocolates to all students in the school to sell.

- It is realised that it is not possible to eliminate all food products such as milk products in bread or margarines from the foods brought to preschool.
- Food removal from preschool will only occur following recommendation by a relevant medical specialist and provision of documentation of this recommendation.

**Messages adapted from**

**be a MATE: Make Allergy Treatment Easier**

- Take food allergies seriously
- Know what your friends are allergic to
- Don’t share your food/drink with friends who have food allergies
- Don’t pressure your friends to eat/drink something
- Use your “bullying no way” strategies if you see anyone being bullied, including someone being bullied about their allergies
- Get adult help immediately if your friend feels sick, especially after eating something.