Policy: 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.

Background: Food allergies in children are common and can be due to peanuts (legume), tree nuts (brazil, cashew, hazelnuts, almonds), fish, shellfish, eggs, wheat, milk, milk products, soy, seed and some fruits. Food allergies are more common in children under 5 years of age than in older children because young children may grow out of food allergies. The most common food allergies are due to milk, egg and peanut. Peanut allergy is the most likely allergy to need availability of adrenaline. Other substances to which children can have a severe allergic reaction are drugs (especially antibiotics and vaccines), bees, other insect stings, and some plants. The most severe form of allergic reaction to any substance is anaphylaxis and effective immediate management requires adrenaline.

Relevant Legislation Centre Based and Mobile Child Care Services Regulation 1996 (NSW); Occupational Health and Safety Act 2000 and Regulations 2001 (NSW).


Practices:
This policy will be reviewed annually at minimum or as needed to coincide with the enrolment of new children. If a child with a severe allergy or anaphylaxis (to a food that is not on the restricted food list) is enrolled, we will complete a risk assessment in consultation with staff and parents. This will ensure the best outcome for the safety of the child with the allergy and the needs of the other children in our care.

To facilitate effective care and management of anaphylaxis or other emergencies in a child with food allergies or susceptibility to anaphylaxis, Port Macquarie Community Preschool 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, an Anaphylaxis First Aid Plan or Emergency Medical Plan approved by their doctor following enrolment and prior to the child starting at the service.

• Ensure families provide documentation from their doctor confirming their child's allergies and their management in the form of an Allergy Emergency Medical Plan.

• Ensure all staff are aware of children that have allergies and what they are allergic to prior to the children starting at the service.

• 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.

- In any case where a child is having a severe allergic reaction or any symptoms or signs of anaphylaxis, the preschool staff or centre managing director will immediately administer first aid or medical treatment according to either:

  - the child's Anaphylaxis First Aid or Emergency Medical Plan,
  - a doctor's instructions,
  - 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,
  - if these are not available, use the First Aid Plan for Severe Allergic Reaction from Australian First Aid, St John Ambulance Australia, 2002, on the following pages, and, dial 000 for an ambulance and notify the families in accordance with the Regulation and guidelines on emergency procedures.

- If a centre staff member is to be responsible for the emergency administration of adrenaline (EpiPen or EpiPen Jr) to a child with anaphylaxis, this should be by prior written agreement between the centre, children’s centre staff and child's parent or guardian, and with written consent from the parent or guardian, and under the following conditions:

  - it is a requirement of and included in the child's Emergency Management Plan.
  - the parent or guardian has provided the appropriate authorisation and consent and understands their responsibilities under the Regulation and these Guidelines.
  - the parent or guardian understands and acknowledges any potential risks or side effects of the administration of adrenaline to their child.
  - the preschool staff member has been adequately trained by an appropriate organisation in the administration of adrenaline and use of the EpiPen and the safe disposal of contaminated material.

  - the preschool staff member feels they are confident and competent to administer the medication.
  - the parent or guardian understands that the preschool staff member who has been specifically trained to administer adrenaline may not always be present in the centre when an emergency occurs, and in that case, the centre will implement their emergency procedures and first aid plan.

Individual Action Plan

An Anaphylaxis Action Plan is a useful addition to the identified child's records. It is a medical management plan prepared and signed by a medical practitioner relating to a child with a diagnosis of severe allergy or anaphylaxis, and developed in collaboration with the child’s parents. It includes the child’s name and allergies, a photograph of the child and clear instructions on treating an anaphylactic episode. A copy should be kept with the EpiPen at all times so that the Plan is always at the scene of an emergency along with the medication. It may also be displayed in an accessible location (see under privacy concerns).

Review procedure for epipens-
Parents are responsible for making sure their child’s epi-pen or other medication related to the allergy is kept in date.
Storage procedure for epipens-

Munster St
Rooms 1 and 2
Epipens will be stored in a locked box that is clearly labeled in the bathroom area.

Room 3
Epipens will be stored in a locked box that is clearly labeled

Annex
Epipens will be stored in a locked box in the entrance to the bathroom area

Privacy concerns
If an emergency response is needed because an identified child is having an anaphylactic reaction, it is crucial to be able to access the child’s Action Plan as quickly as possible. However, displaying the Action Plan containing personal health information where it is readily visible may raise concerns about privacy. When developing a management plan, the location where the Anaphylaxis Action plan will be displayed should be discussed with the identified child’s parents, and any privacy concerns they may have addressed as far as possible before displaying the Action Plan in the best location(s) possible.

They should be informed that:

• it is important for all staff, as well as other parents or visitors who may be in the service, to be aware that their child is at risk of anaphylaxis if accidentally exposed to the allergen,

• it is important that the Action Plan is immediately accessible to staff and others who may be called upon to give first aid and administer an EpiPen®, if an emergency response is necessary for an anaphylactic reaction.

Food Allergies and Restricted Foods
Staff and parents need to be aware that it is not possible to achieve a completely allergen-free environment in any licensed service that is open to the general community. Staff should not have a false sense of security that an allergen has been eliminated from the environment. Instead, it is important to recognise 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 children’s service.

If a child has a known food allergy, PMCP requests that a specialist’s letter or certificate documenting the identified allergen(s), be provided to the centre as food allergies are taken very seriously. Anaphylactic reactions can be life threatening and if a child with a known food allergy enrols in the centre, strict avoidance strategies will be implemented for the offending food allergen and all care will be taken to reduce risk of exposure, inhalation or consumption of the offending food.

Port Macquarie Community Preschool is a Peanut/Nut/Egg reduced zone ensuring we are minimising high risk food coming into Preschool. Any food with whole peanut, nut or egg or ‘contains traces’ as part of their ingredients will be removed from the child’s lunchbox and placed in a sealed container in the staff kitchen for the parent to collect. A note will be sent home with an explanation of why it was unsafe for this food to be consumed at pre-school. In the event of the child being left with insufficient food a sandwich will be provided by the preschool.
Products that state “may contain” traces are not considered high risk and can be consumed while at Preschool.

The restricted foods will be reviewed annually at minimum or as needed to coincide with the enrolment of new children. If a child with a severe allergy or anaphylaxis to a food that is not on the restricted food list is enrolled we will complete a risk assessment in consultation with staff and parents to ensure the best outcome for the safety of the child with the allergy and the needs of the other children in our care.

Annex 2011
We have a child enrolled at the Annex this year with severe allergies to dairy products. In consultation with staff, board and parents the consumption of milk will be restricted on the days of attendance of the children with the allergy (Tuesday, Thursday and Friday). No milk will be provided by the preschool on these days however the consumption of ‘contained’ dairy such as cheese and yogurt will still be acceptable to ensure the nutrition needs of the other children are met. Milk will still be provided by Preschool on Monday and Wednesdays at the Annex and on all days at Munster St.

Procedure for mealtimes at the Annex:

**Allergy Aware Procedures for Meal times.**

- Children with food allergies will sit at a designated table separate to, but not isolated from the main group with a staff member.
- Children with dairy foods such as yogurt or custard will sit at a designated table separate to, but not isolated from the main group (at the opposite end) with a staff member. This table will have a plastic washable re-usable table cloth, to be cleaned after each use.
- Dairy foods will only be consumed at lunch time.
- All children and staff to wash and dry their face and hands after meal times using the outside sink. Children with allergies will use the bathroom sinks.
- Staff will clean the outdoor sink after all children have washed up.
- Dairy spills are to be cleaned up with warm soapy water, and hosed down in the case of a large spill.
- CLEANING PROCEDURE. Tables and chairs exposed to dairy will be washed with warm soapy water using the RED cloth and the WHITE bucket.
- The red cloths will be soaked in hot water at the end of each day.
- Children with dairy allergies will have their own labelled cups which will be washed up first.

Staff training
Port Macquarie Community Preschool provides permanent staff with training in this area as required.