



# ANAPHYLAXIS

This Factsheet has been prepared to assist OOSH centres in developing a basic understanding of their responsibilities in relation to anaphylaxis. The information provided is of a general nature and should not be used as a substitute for professional advice.

### WHAT IS ANAPHYLAXIS?

Anaphylaxis is a severe and sudden allergic reaction. It can occur when a susceptible person is exposed to an allergen (such as food or an insect sting). Reactions usually begin within minutes of exposure and can progress rapidly over a period of up to two hours or more. Anaphylaxis is potentially life threatening and always requires an emergency response.

Common allergens that can trigger anaphylaxis are:

- ★ Foods - peanuts and Tree nuts (cashew, hazelnut, walnut, Brazil nut, almond, pecan), shellfish and fish; and in pre-school age children, milk and egg
- ★ Insect stings – for example, bee, wasp, jack jumper ants (Note: these ants are a type of “bull-ant”, distantly related to other stinging insects such as honey bees and wasps. They have a black body and orange/brown jaws/pincers and limb and are generally 1.5 – 2.5cm long)
- ★ Medications – for example, antibiotics, aspirin
- ★ Latex – for example, rubber gloves, balloons, swimming caps.

### WHAT ARE THE IMPLICATIONS FOR AN OOSH CENTRE?

#### Planning and responding

*Effective policy and planning should:*

- ★ Minimise the risk of an anaphylactic reaction occurring while the identified child is in the care of the centre
- ★ Provide, as far as practicable, a safe and healthy environment in which children identified as at risk of anaphylaxis can participate equally in all aspects of the children's program and experiences



- ★ Actively involve the parents/guardians of each identified child in assessing risks, developing risk minimisation strategies and management strategies for their child
- ★ Ensure each staff member has adequate training and knowledge of allergies, anaphylaxis and emergency procedures
- ★ Facilitate communication with all users of the centre to ensure the safety and wellbeing of children at risk of anaphylaxis, and
- ★ Raise awareness about allergies and anaphylaxis amongst the centre's community and children in attendance.

*Effective policy and planning needs to:*

- ★ Outline clear procedures for provision of medical and other information at enrolment, and when diagnosis occurs once a child has commenced at a service, so that staff are fully informed and comprehensive planning can take place
- ★ Outline clear procedures for emergencies so that staff members respond appropriately to an anaphylactic reaction by initiating appropriate first aid, including competently administering an EpiPen®
- ★ Outline clear day-to-day management procedures that are:
  - preventative – for example, reduce risk of exposure to allergens, including safe environments, food and nutrition practices; and
  - responsive – for example, first aid and emergency response, including communication and training

## THINGS TO CONSIDER

- ★ Is your service prepared for an emergency for identified child/ren?
- ★ Are all staff aware of any child/ren within the service who are at risk of severe allergy and what the allergen is? Does this include casual/relief staff, cleaners and administration staff?
- ★ Are volunteers aware of the policy and procedures? Will they be able to alert staff to the issue if necessary?
- ★ Is there a plan for on-going management to reduce risk of exposure to allergens?
- ★ Have staff received practical training in responding to anaphylaxis? Do staff attend refresher training?
- ★ Has a management plan for identified child/ren been negotiated with their parents? Is the plan kept up-to-date?
- ★ Have parents provided an Anaphylaxis Action Plan for their child following negotiation with their doctor/specialist? Is the plan kept up-to-date? Is the Action Plan displayed in the best possible location/s? Are all staff aware of the need to deal with such information sensitively and confidentially?
- ★ Is the centre as safe as is practicable for child/ren with severe allergy?
- ★ Are service policy and procedures reviewed regularly so that information is up-to-date, and staff are confident and prepared in case of an emergency?
- ★ Is the whole centre community informed about the issue and the service policy?

## SHOULD THE CENTRE BE NUT-FREE?

There are currently no regulations that state an OOSH centre must be nut free. However, if your centre has children enrolled with allergies, it is the centre's responsibility to ensure the safety of those children – this is part of your duty of care. Therefore it may be necessary to ban peanuts and all tree nut products to ensure the environment is free of allergens.

If this is not possible then it is essential that strategies be implemented to ensure cross-contamination does not occur and children with allergies are not exposed to allergens. There is no need to isolate children from others if someone is eating something that contains an allergen. For an anaphylactic reaction to occur the allergen must be ingested. Vigilant observation whilst eating, hand washing and prevention of cross contamination where the centre provides meals or snacks can prevent a trace allergic reaction. Consult with staff, families and management and evaluate the risk surrounding the centre's choice in managing the environment.

Remember, this is a severe form of allergic reaction which is potentially life threatening for children in your care, so it is important to be prepared, help prevent and be able to care for a child who has food allergies.

Please note - an OOSH service is not permitted to prevent, refuse or exclude a child with anaphylaxis from their centre, to do so would place the service at risk of discrimination.

## DEVELOPING AN ANAPHYLAXIS ACTION PLAN

Following identification of children with allergies, the next step is the provision of documentation by parents, such as an ASCIA Anaphylaxis Action Plan, which has been provided by a registered medical practitioner and includes the following:

- ★ Clear identification of the child (photo)
- ★ Documentation of the allergic triggers
- ★ Documentation of the first aid response including any prescribed medication
- ★ Identification and contact details of the doctor who has signed the action plan.

Examples of Anaphylaxis Action Plans can be found at: [www.allergyfacts.org.au/actionplans.html](http://www.allergyfacts.org.au/actionplans.html)

## FOR MORE INFORMATION VISIT:

[www.allergyfacts.com.au](http://www.allergyfacts.com.au)  
[www.foodallergy.org](http://www.foodallergy.org)  
[www.health.gov.au](http://www.health.gov.au)

Reference: The following document was referred to when developing this Factsheet:

*Australasian Society of Clinical Immunology and Allergy (ASCIA) Guidelines for prevention of food anaphylactic reactions in schools, preschools and childcare centres* [www.allergy.org.au/content/view/31/258/](http://www.allergy.org.au/content/view/31/258/)

## THIS FACTSHEET LINKS TO QA 6 'HEALTH, NUTRITION AND WELL-BEING' AND QA7 'PROTECTIVE CARE AND SAFETY'.



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