

ANAPHYLAXIS & ALLERGIC REACTIONS POLICY

QUALITY AREA 2 – VERSION 1.2



PURPOSE

This policy provides guidelines for Denzil Don Kindergarten to:

- Minimise the risk of an allergic reaction, including anaphylaxis, occurring while children are in the care of the service.
- Ensure that all staff respond effectively and appropriately to allergic reactions, including anaphylaxis, by following each child's ASCIA Action Plan for Anaphylaxis and/or Allergic Reactions.
- Promote awareness and understanding of allergies and anaphylaxis among staff, children, and families through education and implementation of this policy.
- Work collaboratively with parents/carers of children who have an ASCIA Action Plan for Anaphylaxis or Allergic Reactions to understand risks, identify and implement appropriate risk minimisation strategies, and develop clear communication plans to support the child's health, safety, and wellbeing.

This policy should be read in conjunction with the *Dealing with Medical Conditions Policy* and *Incident, Injury, Trauma and Illness Policy*.

POLICY STATEMENT

The safety, health, wellbeing, rights and best interests of every child guide all decisions, actions and practices of Denzil Don Kindergarten staff.

VALUES

Denzil Don Kindergarten is committed to:

- Ensuring that every reasonable precaution is taken to protect children from harm and from any hazard likely to cause injury.
- Providing a safe, inclusive, and healthy environment where children at risk of anaphylaxis can fully participate in all aspects of the program.
- Raising awareness among families, staff, children, and visitors about allergies and anaphylaxis, including strategies for prevention and response.
- Actively involving parents/carers of children at risk of anaphylaxis in assessing risks and developing and implementing appropriate, child-specific risk minimisation and management strategies.
- Ensuring that all staff members and other adults at the service have appropriate knowledge and understanding of allergies, anaphylaxis, and emergency response procedures.
- Promoting effective communication between staff, families, and the broader service community to support the safety and wellbeing of children at risk of anaphylaxis.

SCOPE

This policy applies to the Approved Provider, all service staff (educational and non-educational), students, volunteers, parents/carers, children, and others attending the programs and activities of Denzil Don Kindergarten.

This policy will apply regardless of whether a child diagnosed by a registered medical practitioner as being at risk of anaphylaxis is enrolled at the service.

Parent/Carer Responsibilities Under This Policy:
Inform the service during enrolment if your child has an allergy or is at risk of anaphylaxis
Provide a current ASCIA Action Plan for Anaphylaxis or ASCIA Action Plan for Allergic Reactions, completed by your child's medical practitioner
Participate in the development of your child's individual anaphylaxis or allergy risk minimisation and communication plan in collaboration with educators
Review and update all plans at least annually or whenever your child's condition changes
Notify the service immediately of any changes to your child's allergy, diagnosis, or treatment
Provide an in-date, unused adrenaline injector (if required), along with any other medication prescribed in your child's Allergy and/or Anaphylaxis Plan
Replace all medication prescribed on your child's Anaphylaxis and/or Allergy Action Plan prior to its expiry date

Communicate concerns regarding your child's anaphylaxis and/or allergy management, health, or participation
Read, understand and follow the service Code of Conduct at all times
Adhere to this policy and all other service policies at all times

Responsibilities: R indicates legislation requirement	Approved provider & persons with management or control	Nominated Supervisor and Person in Day-to-Day Charge	All service staff (educational & non-educational)	Contractors, Volunteers & Students
Develop, implement, and display an anaphylaxis policy that meets legislative requirements (Regulation 90), including a medical management plan, risk minimisation plan (Attachment 2), and communication plan. Review all plans annually	R	√		
Identify children at risk of anaphylaxis during the enrolment process and inform all relevant staff	√	√	√	
Obtain written consent from parents/carers or an authorised person for emergency medical treatment and ambulance transport (Regulation 161), and retain this in each child's enrolment record	R	√	√	
Ensure parents/carers or an authorised person listed in the child's enrolment record provide written authorisation for excursions outside the service premises (Regulation 102) in line with the Excursions and Service Events Policy	R	√	√	
Ensure all staff, parents/carers, contractors, volunteers, and students receive and read this policy and the Dealing with Medical Conditions Policy (Regulation 91) *Policies can be found on the kindergarten website and in the Policy Folder in the kindergarten office*	R	√		
Ensure that at least one educator with current approved anaphylaxis management training is in attendance and immediately available at all times the service operates (Regulations 136, 137) * Denzil Don Kindergarten requires that all educational staff hold current first aid qualifications *	R	√		
Ensure that at least one educator (Denzil Don Kindergarten requires all educators) hold current (within three years) approved first aid qualifications, anaphylaxis management training, and emergency asthma management training that meet the requirements of the National Act (Section 169(4)) and National Regulations (Regulation 137), and are approved by ACECQA (Section 169(4) , Regulation 137)	R	√		
Provide approved anaphylaxis management training to staff as required under the National Regulations	R	√		
Ensure staff complete ASCIA anaphylaxis refresher training, practice administration of an adrenaline injector using a trainer device annually, and record participation on staff records	√	√		
Record details of approved anaphylaxis management training, including training in adrenaline injector use, on the Staff Currency Register (Regulations 145, 146, 147)	R	√	√	
Ensure all staff understand and follow first aid procedures for anaphylaxis (see Attachment 3)	R	√	√	
In the event of a child experiencing first-time anaphylaxis at the service, administer a general use adrenaline injector immediately and call an	√	√	√	√

ambulance. If a general use injector is not available, follow the ASCIA First Aid Plan (<i>Attachment 3</i>) and call an ambulance				
Follow reporting procedures outlined in the <i>Incident, Injury, Trauma and Illness Policy</i> when a child becomes ill, experiences a medical emergency, or is involved in an incident resulting in injury or trauma (<i>Regulation 87</i>)	R	√	√	√
In addition to the above, when a child diagnosed as being at risk of anaphylaxis is enrolled at the service, Denzil Don Kindergarten will:				
Display a prominent notice at the service stating that a child diagnosed as at risk of anaphylaxis attends the service (<i>Regulation 173(2)(f)</i>)	R	√		
Complete the enrolment checklist for children diagnosed as at risk of anaphylaxis (<i>Attachment 1</i>)	R	√		
Obtain from the child's family, an ASCIA Action Plan for Anaphylaxis or ASCIA Action Plan for Allergic Reactions, and file it in the child's enrolment records. All Action Plans must be reviewed annually	R	√	√	
Develop a risk minimisation and communication plan for all children diagnosed at risk of anaphylaxis, in consultation with parents/carers. All plans must be reviewed annually	R	√	√	
Maintain enrolment records that include allergy details, ASCIA Action Plan, and risk minimisation plan, accessible to all staff (<i>Regulation 162</i>)	R	√	√	
Compile and maintain a current list of children at risk of anaphylaxis, including their ASCIA Action Plans, in a secure and accessible location	√	√	√	
Review individual plans when allergies change, after exposure to a known allergen, and before special or off-site activities	√	√	√	√
Ensure all staff, including casual and relief staff know which children are at risk, recognise signs and symptoms, and know the location of adrenaline injectors and ASCIA Action Plans	R	√	√	√
Require parents/carers to provide an in-date, unused prescribed adrenaline injector at all times; do not permit attendance if not provided	√	√	√	√
Store adrenaline injectors in a location known to all staff, accessible to adults, inaccessible to children, and protected from heat, sunlight, and cold	R	√	√	√
Maintain adequate adrenaline injector kits and ensure they remain complete and functional	R	√	√	√
Check expiry dates of adrenaline injectors (prescribed and general use) at least quarterly and replace as required	R	√	√	√
Implement and follow risk minimisation strategies identified in each child's plans	R	√	√	√
Ensure children at risk of anaphylaxis do not experience discrimination, and that they can participate safely and fully in all service activities	R	√	√	√
Plan and deliver programs that consider the individual needs of all children, including those at risk of anaphylaxis	R	√	√	√
Communicate any concerns about a child's allergy management to parents/guardians immediately	R	√	√	√
Follow the child's ASCIA Action Plan in the event of an allergic reaction, including progression to anaphylaxis		√	√	√
Follow the ASCIA First Aid Plan and ensure all staff understand emergency procedures (<i>Attachment 3</i>)	R	√	√	√
Ensure staff accompanying children off-site carry a complete adrenaline injector kit and ASCIA Action Plan (<i>see Excursions and Service Events Policy</i>)	R	√	√	
Administer medication in accordance with Regulations 95 and 96 (<i>see Administration of Medication Policy and Dealing with Medical Conditions Policy</i>)	R	√	√	√

Notify emergency services and parents/carers as soon as practicable after administering an adrenaline injector in an emergency without prior authorisation (<i>Regulation 94</i>)	R	√	√	√
Maintain a medication record for each child that includes all required details (<i>Regulation 92(3)</i>)	R	√	√	√
Provide written notice to parents/carers as soon as practicable after administering medication in an emergency (<i>Regulation 93(2)</i>)	R	√	√	√
Follow reporting requirements and notify the Department of Education in writing within 24 hours of any incident or complaint that places a child's health, safety, or wellbeing at risk	R	√		
Displaying the Australasian Society of Clinical Immunology and Allergy (ASCIA) First Aid Plan for Anaphylaxis poster in key locations at the service	√	√		
Display Ambulance Victoria's "How to Call" card near all service telephones	√	√		
Provide support, including counselling where appropriate, to staff involved in managing an anaphylaxis incident, the affected child, and any witnesses	√	√	√	√

BACKGROUND & LEGISLATION

BACKGROUND

Allergies, particularly food allergies, are common in children. The most common triggers in young children include foods, insect stings (such as bees), and certain medications. A reaction can develop rapidly, often within minutes of exposure to an allergen, and young children may not be able to recognise or communicate symptoms.

Anaphylaxis is a severe and life-threatening allergic reaction.

Effective planning and staff training can prevent many allergic reactions. However, when a reaction occurs, preparation, communication, and prompt response are critical to ensure effective treatment using an adrenaline injector.

Denzil Don Kindergarten cannot guarantee a completely allergen-free environment. However, the implementation of appropriate procedures and risk minimisation strategies significantly reduces the risk of exposure to known allergens and the likelihood of allergic reactions, including anaphylaxis.

Legislation governing approved children's services prioritises the health, safety, and wellbeing of children and requires protection from hazards and harm. In accordance with the *Education and Care Services National Regulations 2011 (Regulation 136(1)(b))*, at least one educator with current approved anaphylaxis management training must be in attendance at all times. As a matter of best practice, Denzil Don Kindergarten requires all educators to hold and maintain current approved anaphylaxis management training.

LEGISLATION & STANDARDS

Relevant legislation and standards include but are not limited to:

- Education and Care Services National Law Act 2010: Sections 167, 169
- Education and Care Services National Regulations 2011: Regulations 90–96, 102, 136, 137, 146, 147, 160–162, 168(2)(d), 173, 177, 181, 183, 184.
- Health Records Act 2001 (Vic)
- National Quality Standard, Quality Area 2: Children's Health and Safety
- Occupational Health and Safety Act 2004 (Vic)
- Occupational Health and Safety Regulations 2017
- Privacy and Data Protection Act 2014 (Vic)
- Privacy Act 1988 (Cth)
- Public Health and Wellbeing Act 2008 (Vic)
- Public Health and Wellbeing Regulations 2009 (Vic)

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: www.legislation.vic.gov.au
- Commonwealth Legislation – Federal Register of Legislation: www.legislation.gov.au

DEFINITIONS

Anaphylaxis and Allergic Reactions – Date reviewed: 08/0

Denzil Don Kindergarten – admin@denzildonkindergarten.o

The terms defined in this section relate specifically to this policy. For regularly used terms, see the Definitions File located online: <https://denzildonkinder.org.au/policies/> OR in the Policies Folder in the kindergarten office.

Adrenaline injector: an intramuscular injection device containing a single dose of adrenaline for administration by untrained people. Two brands are available in Australia - EpiPen® or an Anapen. As EpiPen and Anapen products have different administration techniques, ASCIA Action Plans for Anaphylaxis must specify the brand.

Adrenaline injector kit: an insulated container with an unused, in-date adrenaline injector, a copy of the child's ASCIA Action Plan for Anaphylaxis, and contact details for the child's parents/carers, doctor/medical personnel and the person to be notified in the event of a reaction, if the parents/carers cannot be contacted. Adrenaline injectors must be stored away from direct heat and cold.

ASCIA Action Plan for Anaphylaxis/Allergic Reactions: a standardised emergency response management plan for anaphylaxis prepared and signed by the child's treating, registered medical or nurse practitioner that provides the child's name and confirmed allergies, a photograph of the child, a description of the prescribed anaphylaxis medication for that child and clear instructions on treating an anaphylactic episode.

SOURCES & RELATED POLICIES

SOURCES

- [ACECQA provides lists of approved first aid training website](#)
- [All about Allergens for Children's education and care \(CEC\) training](#)
- [The Allergy Aware website includes a Best Practice Guidelines for anaphylaxis prevention and management](#)
- [Allergy & Anaphylaxis Australia](#)
- [The Australasian Society of Clinical Immunology and Allergy \(ASCIA\)](#)
- [Department of Education \(DE\): anaphylaxis information and training](#)
- [The Royal Children's Hospital Melbourne: Department of Allergy and Immunology](#)
- [Royal Children's Hospital: Allergic and anaphylactic reactions fact sheet](#)

POLICIES

- Administration of First Aid
- Administration of Medication
- Asthma Management
- Child Safe Environment and Wellbeing
- Dealing with Medical Conditions
- Diabetes
- Enrolment and Orientation
- Excursions and Service Events
- Food Safety
- Hygiene
- Incident, Injury, Trauma and Illness
- Inclusion and Equity
- Nutrition, Oral Health and Active Play
- Occupational Health and Safety
- Privacy and Confidentiality
- Supervision of Children

EVALUATION

To assess whether the values and purposes of the policy have been achieved, we will:

- seek feedback from all parties affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify all stakeholders affected by this policy at least 14 days before any significant change is made to the policy or its procedures, unless a lesser period is necessary due to risk ([Regulation 172 \(2\)](#)).

PROCEDURES

- NIL

ATTACHMENTS

- Attachment 1: [Enrolment checklist for children diagnosed as at risk of anaphylaxis](#)
- Attachment 2: [Anaphylaxis risk minimisation plan template](#)
- Attachment 3: [First Aid Treatment for Anaphylaxis](#)
- Attachment 4: [Individualised anaphylaxis care plan template](#)

AUTHORISATIONS

This policy was adopted by the approved provider of Denzil Don Kindergarten on 08/06/2026.

REVIEW DATE: **08 June 2028**