

AUSTRALIAN DEFENCE FORCE CADETS – INTERIM POLICY ON THE MANAGEMENT OF ALLERGIES DURING CADET ACTIVITIES

AIM

1.1. The aim of this policy is to provide interim direction on the minimum standards and procedures for managing allergies and for catering and food handling on Cadet activities, where a participant has an allergy. It further outlines the procedures that must be followed prior to any activities where a person with allergies may participate in a cadet activity.

1.2. Further policy, advice and implementation guidelines including forms will be provided at a later date.

1.3. The Cadet Policy Branch (CPB) has responsibility for the development of tri-service policy in respect to the Australian Defence Force Cadets (ADFC) including policy in relation to procedures and standards for the management of allergies.

INTRODUCTION

1.4. This interim advice is provided to give direction on management of allergies, particularly food allergies. This interim policy must be used until further policy is issued.

PROCEDURES FOR MANAGING ALLERGIES ON CADET ACTIVITIES

Policy imperatives

1.5. A number of key policy principles are relevant to these procedures.

Obtain Medical Information for Cadets

1.6. The guiding principle is that:

Comprehensive information on Cadet allergies is required at the point of enrolment in the ADFC and prior to every activity. It is the responsibility of Parents and Carers to advise the ADFC of any potential allergies.

1.7. Prospective Cadets are required to provide full details on any health or medical needs at the point of enrolment into the ADFC. This must include any known allergies and the level of severity of the allergies. Medical records must be updated if any change occurs.

1.8. Where allergies are identified on medical records, parents and carers must provide documentation outlining the scope and degree of the allergy. This documentation must include a letter from the Cadet's Medical Practitioner. The documentation must clearly outline:

- The allergic triggers.
- First aid responses required in the event of an allergic reaction; and
- Identification and contact details of the relevant Medical Practitioner.

1.9. Where allergies are identified, parents, the Cadet and relevant unit staff must meet to discuss the documentation provided, share information and clarify expectations.

1.10. A review of all Cadet records must be undertaken regularly by the Commanding Officer or Officer of Cadets to ascertain the range of allergies identified by Cadets in each unit and the currency of documentation.

1.11. In the case of severe allergies, an action/management plan is to be negotiated and documented between Cadet staff, the Cadet and the parents.

1.12. Medical and other relevant documentation must be provided to any staff member who will be responsible for the supervision of the affected Cadet.

1.13. Updated information must be provided prior to every major activity such as camps, bivouacs or excursions. This must be part of the process of gaining permission for the Cadet to participate in the activity and be included as a component of the staff briefing.

1.14. Cadets must, at all times, carry any necessary medication on them. Cadets must also carry a form of identification and documentation outlining the information at point 1.8 at all times when participating in Cadet activities.

Education for those responsible for welfare of Cadets

1.15. The guiding principle is:

Recognition of the risks and understanding the steps that can be taken to minimise allergic reactions is the basis of prevention.

1.16. Where a Cadet or their parent or carer identifies an allergy, staff should seek to gain information and knowledge of the relevant allergy. In the short term, a range of websites provide this information (see below). In the longer term, resource material must be provided to all Cadet staff.

1.17. Key topics to be understood include:

- What is an allergy
- What is anaphylaxis
- What are the triggers for allergy and anaphylaxis
- How is anaphylaxis recognised
- What should be done in the event of a severe allergic reaction and
- Instructions/training on EpiPen use.

1.18. When seeking information and providing support and training to staff in relation to managing allergies, medical advice must be sought from suitably qualified professionals.

1.19. All relevant staff/instructors and parents who participate in activities with a cadet who has allergies will be made aware of the cadet, their allergy and their emergency first aid requirements.

1.20. Some other general information which may be useful reference sources include:

- Anaphylaxis Australia: www.allergyfacts.org.au
- HealthInsite – an Australian Government health resource: <http://www.healthinsite.gov.au/topics/Anaphylaxis> and
- State and Territory Department of Education websites.

Exposure to allergens must be minimised

1.21. The guiding principle is:

Avoidance of contact with allergens prevents allergic reactions.

Food Allergies

1.22. When dealing with food allergies, suitable catering arrangements, which remove or reduce the risk of contact with allergens, must be implemented.

1.23. Catering for Cadets, particularly those with food allergies must be considered as part of the planning and risk assessment processes. Active consideration of potential allergies within the Cadet participants, strategies for eliminating contact with potential allergens and the likely risk of an affected Cadet coming into contact with an allergen must occur.

1.24. Locally managed catering should, where necessary, exclude foods with the potential to contain allergens from the menu. This can be facilitated by purchasing and using food in its rawest, least processed form, thereby preparing food that does not contain potential allergens as an ingredient.

1.25. It is sufficient to eliminate food that has the allergen as an ingredient. It is not practical to eliminate all foods which have “may contain ...” warnings. However Cadets with known allergies must not be exposed to foods which “may contain ...” allergens without close supervision and prior discussion and approval from the Cadet’s parent or carer.

1.26. If food containing potential allergens is used, preparation of this food must be kept separate from preparation of all other food, including using separate cooking utensils and strict prevention of potential cross contamination.

1.27. Cadets may not share or swap food or use each others cutlery, crockery, utensils or drink bottles.

1.28. Where a Cadet is identified as having allergies, particularly if there are numerous or severe allergies, the Cadet’s parents or carers should be consulted on the proposed menu as part of the activity planning. Parents should be given the opportunity to replace high risk food with safe food from home. The provision of food by parents does not eliminate the need to exclude or minimise the risk of casual contact with allergens or the need to avoid taking precautions to prevent cross contamination during food preparation.

Cadets need to be educated and encouraged to manage their allergies

1.29. The guiding principle is that:

As part of a Youth Development Organisation, young people should be encouraged and supported to manage their conditions. Parents are primarily responsible for this. Cadet staff have a responsibility to support Cadets while in their care and custody and to provide a safe environment for Cadet activities.

1.30. Allergic young people learn what they can and can not consume and develop strategies for avoiding contact with allergens. However, younger Cadets may not always have adequate levels of knowledge or the capacity to exercise good judgment on that knowledge.

1.31. Cadets with allergies are to be given close supervision when exposed to risk. In the case of food allergies, this is during meal or snack times and immediately before and after meals or snacks.

1.32. Cadet staff must recognise the potential risk of peer pressure and/or peer influence on a Cadet with allergies and take steps to ensure this risk is minimised or removed.

Authorised MAJGEN Michael Fairweather Head Cadet Policy 21 May 07	Approved BRIG Andrew Murdoch - AAC CDRE Karel de Laat - ANC GPCAPT Phil Edwards - AAFC
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