Anaphylactic Policy

Purpose

Anaphylaxis is a serious allergic reaction and can be life threatening. It requires avoidance strategies and immediate response in the event of an emergency. These policies and procedures are intended to help meet the needs and save the lives of children with severe allergies and provide relevant and important information on anaphylaxis to parents, staff, students, volunteers, and visitors at Angus Valley Montessori Schools.

The allergy may be related to food, insect stings, medicine, latex, exercise etc. Angus Valley Montessori School programs will make every attempt to reduce the risk of exposure to anaphylactic causing agents.

This policy is intended to fulfill the obligations set out under Ontario Regulation 137/15 for an anaphylactic policy for childcare centers. The requirements set out in this policy align with Sabrina's Law, 2005.

Note: definitions for terms used throughout this policy are provided in a Glossary at the end of the document.

Policy

Individualized Plans and Emergency Procedures for Children with Life-Threatening/Anaphylactic Allergies

- We will obtain information regarding anaphylactic allergies of the students, which is included in the medical history section of their registration package.

- Before a child attends Angus Valley Montessori or upon discovering that a child has an anaphylactic allergy, an Individualized Plan and emergency procedures will be developed for each child with anaphylaxis in consultation and collaboration with the child's parent, and any regulated health professional who is involved in the child's care that the parent believes should be included in the consultation (the form in Appendix A may be used for this purpose).

- All Individualized Plans and emergency procedures will include a description of symptoms of an anaphylactic reaction that are specific to the child and the procedures to be followed in the event of an allergic reaction or other medical emergency based on the severity of the child's symptoms.

- The individualized plan and emergency procedures for each child will include information for those who are in direct contact with the child on a regular basis about the type of allergy, monitoring and avoidance strategies and appropriate treatment. Signs that explain the types of allergies children currently have and what a child and staff is allowed to bring into the campus will be posted where it is easily visible to all staff, parents and others entering the campus.

- All Individualized Plans and emergency procedures will be made readily accessible at all times to all staff, students and volunteers at Angus Valley Montessori Schools and will be kept in a binder titled "AVMS Individualized Plans" in the office.

- All staff, volunteers and students will be informed of our Anaphylactic Policy and will be required to sign the policy indicating that they have read and understood these policies and procedures prior to starting care or guidance in the room. Staff and volunteers will review this policy annually.

- All individualized plans and emergency procedures will be reviewed with a parent of the child yearly or whenever there is a change to the plan to ensure the information is current and up to date.

- Every child's epinephrine auto-injector must be carried everywhere the child goes otherwise the child cannot attend.

- Parents will submit a picture of the child to be posted with the child's name and medical information including casual agents. This information is to be added to the allergy list in each room and in the kitchen. Teachers, volunteers and the cook will be notified upon the child's enrolment and get them to sign their emergency plan at least annually.

Strategies to Reduce the Risk of Exposure to Anaphylactic Allergens:

The following strategies to reduce the risk of exposure to anaphylactic causative agents must be followed at all times by employees, students and volunteers at Angus Valley Montessori.

- Foods where ingredients are not known will not be served.

- Items with 'may contain' warnings on the label in a room where there is a child who has an individualized plan and emergency procedures specifying those allergens will not be served.

- The caterer or cook must provide the known ingredients for all food provided. The ingredients will be reviewed before food is served to children to verify that causative agents are not served to children with anaphylactic allergies.

- In cases where a child has food allergies and the meals and snacks provided by Angus Valley Montessori cannot meet the child's needs, the child's parent must supply snacks/meals for their child. All written instructions for diet provided by a parent will be implemented.

- AVMS will serve meals and snacks brought from home for children 44 months and older, enrolled in Camps/ PA Days and After School Program.

- AVMS will serve meals and snacks brought from home for children 6 months to 43 months, enrolled at AVMS but supervisor approval is needed to make that arrangement.

- Ensure that parents label food brought to Angus Valley Montessori with the child's full name, the date the food arrived, and gather information from ingredients from the parent.

- The food that is provided from home for children must be ensured that appropriate supervision of children is maintained so that food is not shared or exchanged.

- Parents who serve foods containing allergens at home to ensure their child has been rid of the allergens prior to attending Angus Valley Montessori (e.g. by thoroughly washing hands, brushing teeth, etc.).

- Angus Valley Montessori will not use craft/sensory materials and toys that have known allergens on the labels.

- Enforce Proper cleaning procedures. All surfaces will be cleaned with a cleaning solution (water and germ destroyer approved by Public Health) prior to and after preparing and serving foods. All cleaning supplies, medicines and any other products that may be of danger and/or commonly produce allergic reactions will be stored away. Garbage bins will be cleaned as needed.

- Share information about anaphylaxis, strategies to reduce the risk of exposure to known allergens and treatment will be shared with all families enrolled at Angus Valley Montessori.

Admin will:

- Make sure each child's individual plan and emergency procedure are kept-up-to-date and that all staff, students, and volunteers are trained on the plans and signed off on the plan.

- Refer to the allergy list and ensure that it is up to date and implemented.

- Update staff, students, and volunteers when changes to a child's allergies, signs and symptoms, and treatment occur and review all updates to individualized plans and emergency procedures.

- Update families when changes to allergies occur while maintaining the confidentiality of children.

- Update or revise and implement the strategies in this policy depending on the allergies of children enrolled at the childcare centre.

Communication Plan

For each child with the life-threatening allergy:

Angus Valley Montessori will request a written step-by-step emergency procedure from the parents regarding what the staff should do in case of an allergic reaction. This must be prepared prior to the first day of attendance. Parents will be requested to inform the Director of any changes to their child's Individual Plan or treatment. Individual Plans will be revised yearly and as directed by the parent or physician. It is recommended that the parent train the staff, as much as possible, how to respond to their child's allergic reaction. The supervisor will train any staff or volunteers not present in the training session.

The following is our communication plan for sharing information on life-threatening and anaphylactic allergies with staff, students, volunteers, parents and families.

- Parents will be informed and encouraged not to bring foods that contain ingredients to which children may be allergic.

- Parents and families will be informed about anaphylactic allergies and all known allergens at Angus Valley Montessori.

- A list of all children's allergies including food and other causative agents will be posted in all cooking and serving areas, in each play activity room, and made available in any other area where children may be present.

- Each child with an anaphylactic allergy will have an individualized plan and emergency procedures that detail signs and symptoms specific to the child describing how to identify that they are having an allergic reaction and what to do if they experience a reaction.

- Each child's Individualized Plan and emergency procedures will be made available and accessible wherever the child may be present while receiving child care.

- The caterer, cook, individuals who collect groceries on behalf of Angus Valley Montessori and/or other food handling staff, where applicable, will be informed of all the allergies at Angus Valley Montessori, including those of children, staff, students and volunteers. An updated list of allergies will be provided to the caterer or cook as soon as new allergies are identified. The supervisor or designate will communicate with the caterer/cook about which foods are not to be used in food prepared for Angus Valley Montessori and will work together on food substitutions to be provided.

- Angus Valley Montessori will communicate with the Ministry of Education by reporting serious occurrences where an anaphylactic reaction occurs in accordance with the established serious occurrence policy and procedures.

- This communication plan will be continually reviewed to ensure it is meeting the needs of Angus Valley Montessori and that it is effectively achieving its intended result.

Individual Plan:

All staff, students & volunteers will be trained by the parent to administer the Epi-pen based on the child's individual plan. A description of the child's allergy along with a picture of the child with the child's name and medical information will be posted in every classroom and placed in each child's file, emergency bags. The action plan will include but is not limited to:

1. Monitoring and avoidance strategies.

2. Signs and symptoms of an anaphylactic reaction.

3. Action to be taken by Angus Valley Montessori's staff in the event of a reaction, individual plan consent to administer the EpiPen.

4. Location of EpiPen.

5. Emergency contact information of child's doctor, parents and/or guardians (including name, address and telephone number).

6. Anytime a child appears to be having an anaphylactic reaction and/or if the Epi-pen is administered, 911 will be called. When a child is transported to the hospital, they will be accompanied by a trusted adult and parents that are contacted.

School and staff duties: The child's individual plan must be reviewed and signed by all staff, volunteers & students prior to provide care to the identified child; at least annually thereafter or whenever there are changes.

Emergency Protocol

- One staff member stays with the child at all times.
- One staff member goes for help or calls for help.
- Follow emergency procedures as outlined in child's individual plan (i.e. administer epinephrine at first sign of reaction) .
- Call 911. Have the child transported to hospital even if symptoms have subsided. Symptoms may occur hours after exposure to allergen.
- Administered Epi-Pen is to accompany child to hospital.
- Administered Epi-Pen is to be given to hospital employee or child's parent for disposal.
- One calm staff member must stay with the child until parent or guardian arrives. The child's back-up Epi-Pen auto injector should be taken.

Drug and Medication Requirements

- Where drugs or medications will need to be administered to a child in response to an anaphylactic reaction, the drug and medication administration policy will be followed including the completion of a parental authorization form to administer drugs or medications.
- Parent must provide the adrenaline kit (i.e. Epi-pen) for use by injection or as an inhaler. The adrenaline kit, or inhaler, must contain specific instructions by the child's physician.
- These instructions should include "when" and "how" to use the adrenaline.
- Emergency allergy medication (e.g. oral allergy medications, puffers and epinephrine auto-injectors) will be allowed to remain unlocked or carried by children with parental authorization so that they can be administered quickly when needed. The child, with written permission from a doctor, should have a belt to always carry it on their person, otherwise we recommend the teacher to carry a belt.

Training

- Angus Valley Montessori will ensure that the supervisor/administrator and/or all staff, students and volunteers receive training from a parent of a child with anaphylaxis on the procedures to follow in the event of a child having an anaphylactic reaction, including how to recognize the signs and symptoms of anaphylaxis and administer emergency allergy medication.

- Where only a parent has trained the supervisor/administrator, the supervisor/designate will ensure training is provided to all other staff, students and volunteers at the childcare centre.

- Training will be repeated annually, and any time there are changes to any child's individualized plan and emergency procedures.

- A written record of training for staff, students and volunteers on procedures to be followed for each child who has an anaphylactic allergy will be kept, including the names of individuals who have not yet been trained. This will ensure that training is tracked, and follow-up is completed where an individual has missed or not received training. The form in Appendix B may be used for this purpose.

Confidentiality

Information about a child's allergies and medical needs will be treated confidentially and every effort will be made to protect the privacy of the child, except when information must be disclosed for implementing the procedures in this policy and for legal reasons (e.g. to the Ministry of Education, College of Early Childhood Educators, law enforcement authorities or a Children's Aid Society).

Procedures to be followed in the circumstances described below:

Circumstance	Roles and Responsibilities
A) A child exhibits an anaphylactic reaction to an allergen	1. The person who becomes aware of the child's anaphylactic reaction must immediately: • implement the child's individualized plan and emergency procedures; • contact emergency services and a parent/guardian of the child, or have another person do so where possible; and • ensure that where an epinephrine auto-injector has been used, it is properly discarded (i.e. given to emergency services, or in accordance with the drug and medication administration policy). 2. Once the child's condition has stabilized or the child has been taken to hospital, staff must: • follow Angus Valley Montessori's serious occurrence policies and procedures; • document the incident in the daily written record; and • document the child's symptoms of ill health in the child's records.
B) A child is authorized to carry his/her own emergency allergy medication.	1. Staff must: • ensure that written parental authorization is obtained to allow the child to carry their own emergency allergy medication; • ensure that the medication remains on the child (e.g., fanny pack, holster) and is not kept or left unattended (e.g. in the child's cubby or backpack); • ensure that appropriate supervision is maintained of the child while carrying the medication and of children in their close proximity so that other children do not have access to the medication; and • Where there are safety concerns relating to the child carrying his/her own medication (e.g. exposure to other children), notify the centre supervisor/designate and the child's parent of these concerns, and discuss and implement mitigating strategies. Document the concerns and resulting actions in the daily written record.

Glossary

Anaphylaxis: a severe systemic allergic reaction, which can be fatal, resulting in circulatory collapse or shock. Symptoms can vary for different people, and can be different from one reaction to the next, including:

- Skin: hives, swelling, itching, warmth, redness, rash
- Breathing (respiratory): coughing, wheezing, shortness of breath, chest pain/tightness, throat tightness/swelling, hoarse voice, nasal congestion or hay fever-like symptoms (runny nose and watery eyes, sneezing), trouble swallowing
- Stomach (gastrointestinal): nausea, pain/cramps, vomiting, diarrhea
- Heart (cardiovascular): pale/blue colour, weak pulse, passing out, dizzy/lightheaded, shock
- Other: anxiety, feeling of “impending doom”, headache, uterine cramps, metallic taste in mouth

(Source: http://foodallergycanada.ca/about-allergies/anaphylaxis/)

Causative Agent (allergen/trigger): a substance that causes an allergic reaction. Common allergens include, but are not limited to:

- eggs
- milk
- mustard
- peanuts
- seafood including fish, shellfish, and crustaceans
- sesame
- soy
- sulphites which are food additives
- tree nuts
- wheat
- latex
- insect stings

Epinephrine: A drug used to treat allergic reactions, particularly anaphylaxis. This drug is often delivered through an auto-injector (e.g. EpiPen or Allerject).

Staff (Employee): Individual employed by the licensee (e.g. program room staff).

Licensee: The individual or corporation named on the license issued by the Ministry of Education responsible for the operation and management of the child care center.

Parent: A person having lawful custody of a child or a person who has demonstrated a settled intention to treat a child as a child of his or her family (all references to parent include legal guardians, but will be referred to as “parent” in the policy).