



## MOOSONEE DISTRICT SCHOOL AREA BOARD

### ADMINISTRATIVE PROCEDURE STUDENTS: NO. 317

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## ANAPHYLAXIS

### PURPOSE

The Moosonee District School Area Board seeks to ensure that all students and staff are provided with a safe and healthy environment, including an allergen-safe environment and is determined to be a nut-free and scent-free environment.

This administrative procedure has been developed in order to minimize the danger to each student and staff with an anaphylactic allergy while participating in any school-related activity.

This procedure establishes an appropriate response when parents indicate to the principal, in writing, that their child is at risk of anaphylaxis and the student will require assistance at the first sign of any allergic reaction.

### DEFINITIONS

**Anaphylaxis:** Anaphylaxis is a severe life-threatening form of allergic reaction. Anaphylaxis is an instant allergic reaction in all the major body organ systems. The reaction may begin with severe itching of the eyes or face, a sense of constriction in the throat, and difficulty with breathing. Unless there is a medical intervention, the victim may suffer a drop in blood pressure, loss of consciousness, and death. This can occur within minutes of exposure to the triggering substance. Even a small amount of the allergen can be fatal.

**Causative Agents / Triggering Substances:** In addition to peanuts, the foods most frequently implicated in anaphylaxis are tree nuts (e.g. hazel nuts, walnuts, almonds, and cashews), cow's milk, and eggs. Fish, shellfish, wheat, and soy are potentially lethal allergens as well, and anaphylaxis is occasionally induced by fruits and other foods. Non-food triggers of anaphylaxis reactions include insect venom, medications, latex and, rarely, vigorous exercise.

**Emergency Response:** The emergency response to an anaphylactic reaction is the administration of a measured dose or doses of epinephrine (also known as adrenalin) by auto-injector, usually with an Epi-Pen. The epinephrine can be easily and safely administered with these devices by non-medical personnel with minimum training. The Epi-Pen is particularly easy to administer. When in doubt about a response, the staff member should administer the appropriate medication.

**Parents:** Every use of "parents" in this administrative procedure includes legal guardians or a single parent or guardian or caregiver.

### APPLICATION

This administrative procedure applies to any student suffering from anaphylaxis who has been previously diagnosed by an allergist or physician who is responsible for prescribing the appropriate treatment.

This procedure provides expectations for the staff, parents, and students. It applies in school buildings, at school-related events, and on school buses.

## PROCEDURES

### 1. **Shared Responsibility**

- 1.1. Staff members and parents have shared responsibilities, as described in this procedure, with regard to providing a safe environment for students with an anaphylactic allergy.
- 1.2. Students with a life-threatening allergy (anaphylaxis) are expected to develop independence, as age-appropriate, with regard to protecting themselves and advocating for their personal situation within their school community.
- 1.3. This procedure outlines strategies that reduce the risk of exposure to anaphylactic causative agents in the Board's learning and working environments.
- 1.4. It is important to note that an allergen free environment is not guaranteed. Parents of an anaphylactic child are cautioned that traces of certain products, such as traces of peanuts or peanut products, can be hidden. Also, students can fail to recognize that they have allergen-causing products and/or may not admit that they have these triggering substances.

### 2. **Safe Environment**

The four key strategies to implement when providing a safe environment for anaphylactic students are:

- a) providing information and awareness for the entire school community;
- b) avoiding the allergen that causes anaphylactic reactions wherever possible, while acknowledging that it is impossible to ensure the elimination of all allergens in the school;
- c) having clear emergency response procedures in case of accidental exposure; and
- d) fostering a safe, caring, and supportive environment for those at risk of anaphylaxis.

### 3. **Responsibilities of Parents**

- 3.1. Parents are responsible for informing the school if their child has a diagnosed, life-threatening allergy.
- 3.2. Parents must provide principals with a written medical report identifying the student's allergic reactions.
- 3.3. Parents should provide a medic alert bracelet for their child.
- 3.4. Parents shall provide the school with the physician's instructions for administering the medication.
- 3.5. Parents will teach the child, as age-appropriate, to recognize the first symptoms of an allergic reaction; to communicate the problem clearly; to know where the medication is kept and who can get it; to carry his or her own auto-injector in a fanny pack; to avoid sharing snacks, lunches, or drinks; and to take as much responsibility as possible for his or her own safety.
- 3.6. Parents must also complete the required documents and provide the signatures necessary to ensure that the school has the most up-to-date information on their child and the authorization for all staff to administer the Epi-Pen with the assurance that they will not be held responsible

for any adverse reactions resulting from such administration. [Form ADMIN 317-01 Consent for Intervention during an Emergency Allergic Reaction]

- 3.7. Parents must provide the school with two in-date epinephrine auto-injectors to be used in the event of an anaphylactic reaction. It is important to have a backup device in case two doses are required, or one device is not functioning or has been misplaced by a student. One of the auto-injectors (Epi-Pens) will be carried with the student at all times, as age and/or developmentally appropriate. The other, or both in the case of a student who is not responsible for carrying an Epi-Pen, will be placed in a secure location that is known to all staff members.
- 3.8. Parents are responsible for practicing allergen avoidance measures.
- 3.9. Parents will review the student's Emergency Action Plan with the staff. [Form ADMIN-317-02 Emergency Action Plan for Anaphylaxis]

#### 4. **Responsibilities of the Principal**

- 4.1. The principal or designate is responsible for:
  - a) informing parents of the need to let the school know if their child has a life-threatening allergy;
  - b) ensuring that all staff members are made aware of students who could require immediate medication due to life-threatening allergies and where their medication is located;
  - c) informing the bussing company of the safety requirements of anaphylactic students;
  - d) ensuring that all staff members are aware of this administrative procedure;
  - e) creating an action plan for emergencies;
  - f) ensuring a designated space for anaphylactic medication for students;
  - g) providing regular and current training on anaphylaxis for all staff, including new teachers, occasional teachers, volunteers, and bus drivers;
  - h) identifying the issue to all parents through letters, newsletters, and/or an education session; [Form ADMIN 317-03 Sample Letters Regarding Anaphylaxis]
  - i) requesting the cooperation of all parents in reducing student exposure to the allergen(s); and
  - j) fostering a safe, caring, supportive, and inclusive environment for those at risk of anaphylaxis.
- 4.2. Where the parent of a student with a food allergy has given the principal medical documentation of a possible anaphylactic reaction, the principal shall:
  - a) consult with that parent regarding arrangements for lunch and other classroom activities involving food;
  - b) discuss possible options with the parent, as suggested in subsection 4.3; and
  - c) confirm in writing the option chosen by the parent.
- 4.3. The teacher (or lunch supervisor) of a student who has an identified allergy will ask students prior to the start of a nutrition break or classroom activity involving food, whether any of them have brought food products with allergens. The students may be asked to show all of the food items that they have brought to school so that the teacher can examine the food or read the labels. Where a student identifies that they have brought a food product with allergens, or the teacher identifies a food item that contains, or may possibly contain, allergens, two options will be offered:
  - a) *Option A:* The food product containing, or suspected of containing, an allergen, will be handed in to the office. The parent may be called to pick up the food item, or the student may collect the food item once the school day has been completed.
  - b) *Option B:* If the parent of the student with the allergy wishes the student to be removed, the student with the allergy will be sent to an eating area designated for students with allergies.

- 4.4. If the parent of a student with an allergy wishes, the student will be removed daily to an area designated as an eating area for students with allergies.

## 5. Responsibilities of Teachers

- 5.1. Classroom teachers are responsible for:
- discussing anaphylaxis with the class in age-appropriate terms;
  - practicing allergen avoidance measures within the school, at school events, and out-of-school activities;
  - instructing students not to share lunches or trade snacks;
  - instructing the anaphylactic student to eat only food brought from home;
  - reinforcing with all students the importance of hand washing before and after eating;
  - reviewing the anaphylaxis procedures and emergency actions regularly;
  - taking appropriate action in the event of an emergency; and
  - fostering a safe, caring, supportive, and inclusive environment for those at risk of anaphylaxis.
- 5.2. Where students in a class with an identified allergy bring in food products that are known allergens, they shall be reminded by the teacher of the allergen procedure. In the event the same student(s) continues to bring allergen products to school on two more occasions, the teacher will notify the principal. The principal shall follow up with the student's parents.

## 6. Responsibilities of Students

- 6.1. Anaphylactic students are responsible for:
- being aware of and acting on the preventative measures necessary to avoid contact with allergens;
  - washing hands before eating;
  - where age and/or developmentally appropriate, ensuring that they carry their epinephrine auto-injectors with them at all times;
  - wearing a medic alert bracelet;
  - knowing at all times where an auto-injector is located and, as age-appropriate, knowing how to use it; and
  - informing the staff immediately if they have been in contact with a known allergen or have any concerns related to potential allergens.
- 6.2. The responsibilities listed above will be assessed based on the student's age and capability to understand his or her life-threatening condition. Students with special education needs will require additional assistance by staff and parents.
- 6.3. All students in the school are responsible for:
- avoiding sharing food, especially with anaphylactic children;
  - following school rules about keeping allergens out of the classroom, school, and buses;
  - washing hands before and after eating;
  - learning to recognize signs of an anaphylactic reaction; and
  - learning to respect the rights and needs of others.

## 7. Responsibilities of Bus Drivers

- 7.1. Bus drivers are responsible for following bus company procedures for anaphylactic students as provided by the school.

7.2. Bus drivers are responsible for participating in training offered by the bussing company or by the school board as required.

## 8. **The Emergency Action Plan**

8.1. The Emergency Action Plan for a student with an anaphylactic allergy must be kept current and shall include:

- a) a complete copy of the Form ADMIN 317-01 Consent for Intervention During an Emergency Allergic Reaction;
- b) details regarding the type of allergy, monitoring and avoidance strategies, and appropriate treatment;
- c) provisions for riding the bus;
- d) a readily accessible emergency procedure for the student, including emergency contact information; and
- e) storage instructions for epinephrine auto-injectors where necessary. Note: See Form ADMIN 317-02 Emergency Action Plan for Anaphylaxis.

8.2. A copy of the current Emergency Action Plan shall be filed in the student's Ontario Student Record (OSR) and copies must be located in the areas designated by the principal. The Emergency Action Plan must be readily available in the event of an emergency.

8.3. The principal shall post a flyer that includes a recent picture of the at-risk student and vital emergency information such as the location(s) of the medication and emergency contact numbers in the school office, staff room, student's classroom, occasional teacher's book, bus, etc. as needed.

8.4. The principal shall send a letter to parents of the other students in the classroom of the at-risk person, informing them of the situation and requesting that the specific allergens not be sent to school. [Form ADMIN 317-03 Sample Letters Regarding Anaphylaxis]

8.5. Where a student is identified as having an anaphylactic reaction to peanuts or nuts, the principal shall make every effort to enlist the support and cooperation of all staff, students, and parents to reduce the potential risk to the student.

8.6. The principal shall send communication home to all members of the school community indicating the presence of a student with a life-threatening allergic reaction, outlining the need to take appropriate action, and requesting that parents cooperate.

8.7. Prior to or on the first day of school each year, it is the responsibility of the parents to initiate the process again and present the school with updated information and the appropriate medication.

8.8. At the end of the school year all medication shall be picked up by the parents. Medication not picked up will be taken to the pharmacy for disposal.

## 9. **General Anaphylaxis Emergency Guidelines**

9.1. When a student known to be at risk of anaphylaxis displays initial symptoms, it must be presumed that the student is in need of the assistance outlined in the Emergency Action Plan. Immediate intervention is essential.

- 9.2. It is important to note that no ill side effects will result from the administration of the student's medication if she or he is not experiencing an anaphylactic reaction. Unless otherwise agreed to, the following steps are to be followed when a student is experiencing an anaphylactic reaction:
- Use the Epi-Pen immediately.
  - Have someone call 9-1-1 (ambulance) and advise the dispatcher that a person is having an anaphylactic reaction.
  - Notify the parents. [Note: Other arrangements for transporting a student may be arranged by the parents, in agreement with all parties.]
  - If the ambulance has not arrived in 10-20 minutes, breathing difficulties are present, and the student is not responding to the first injection, give a second Epi-Pen injection, if authorized by the doctor and parents.
  - Even if symptoms subside entirely, the child must be taken to the hospital immediately.
- 9.3. Students Not Known to Be at Risk: A student not known to be at risk of anaphylaxis may also display symptoms of severe allergic reaction. In such circumstances, the school will assess the situation and take action as appropriate. Should anaphylaxis appear imminent, any available Epi-Pen must be used.
10. **Communication and Training**
- 10.1. A communication plan shall be developed for the dissemination of information on life-threatening allergies to parents, students, and staff members.
- 10.2. Staff members and others who are in direct contact with students shall receive training on dealing with life-threatening allergies, including the use of an auto-injector (e.g. Epi-Pen) at least once a year.
- 10.3. The Board shall provide the school with an auto-injector training device.
- 10.4. The Moosonee District School Area Board authorizes staff, where a student is known to have anaphylactic reactions, to respond to a perceived anaphylactic reaction with an auto-injector device. Staff members have the assurance that they will not be held responsible for any adverse reactions resulting from such administration. In all such cases, staff members will also seek medical attention for the student immediately.

## REFERENCE DOCUMENTS

### **Legal:**

*Sabrina's Law, 2005 An Act to protect anaphylactic pupils*

*Education Act, Section 265 Duties of Principal: Attention to the Health of Pupils* Guideline  
OSR—Ontario Student Record (OSR) Guideline, clause 3.1.5 Special Health Information

### **Board:**

Administrative Procedure 304 School Registration Requirements

Administrative Procedure 330 Administration of Medication / Medical Procedures

Form ADMIN 317-01 Consent for Intervention during an Emergency Allergic Reaction

Form ADMIN 317-02 Emergency Action Plan for Anaphylaxis

Form ADMIN 317-03 Sample Letters Regarding Anaphylaxis