

ROLLING RIVER SCHOOL DIVISION POLICY

Students with Anaphylaxis

JHCA/P

This policy and regulation reflect the guidelines and procedures outlined in the provincial Unified Referral and Intake System (URIS) Manual.

Anaphylaxis, sometimes referred to as “allergic shock” or “generalized allergic reaction,” is a severe allergic reaction that can be fatal if untreated. Sufferers of anaphylaxis respond with an extreme body reaction that may begin with itching, hives, vomiting, diarrhea, or swelling of the lips and/or face; within moments, the throat may begin to close, choking off breathing and leading to unconsciousness and death.

Although peanuts may be the most common allergen causing anaphylaxis in school children, there are many others. School personnel must be aware that anaphylaxis is a life-threatening condition, regardless of the substance that triggers it.

Despite the best efforts of parents or schools, no individual or organization can guarantee an “allergy-free” environment. The only way to protect children who are known to be at risk of anaphylaxis is to avoid the allergen. It is a matter of life and death. Schools must have a clear plan for responding to an anaphylactic emergency. When an anaphylactic emergency occurs, the injection of epinephrine usually allows enough time to get a child to the hospital. Without epinephrine, death can occur within minutes. Epinephrine will only be administered in schools through the use of an Adrenaline Auto-Injector, commonly known as an Epi-pen.

The first plan of action calls for the administration of adrenaline (also known as epinephrine) by auto-injection immediately at the first sign of a reaction, followed by immediate transport to the hospital, by ambulance.

Developmental factors such as age and physical or cognitive ability, may affect a child's ability to:

- Safely carry an adrenaline auto-injector (Epi-pen);
- Take responsibility to avoid allergens;
- Recognize and communicate symptoms of anaphylaxis;
- Use the auto-injector.

Whenever possible, student self-management should be encouraged, recognizing that having children take responsibility for their own care is the best approach to personal safety. It should also be recognized that the severity of a reaction may hamper adrenaline self-administration, regardless of age, and that immediate assistance may be required.

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Date Adopted: May 20, 2004

Date Revised: September 8, 2010

Date Revised: June 17, 2015

Date Reaffirmed: October 30, 2019

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A. Roles and Responsibilities

Ensuring the safety of children with known anaphylaxis in a community setting depends on the cooperation of the entire community. To minimize the risk of exposure and to ensure rapid response to an emergency, children, parents / guardians, and program personnel must all understand and fulfill their responsibilities. Failure of any group to respond appropriately will negatively impact all others.

1. Responsibilities of the Student with Anaphylaxis:

- a. Take as much responsibility as possible for avoiding allergens, including checking labels and monitoring intake (as developmentally appropriate);
- b. Eat only foods brought from home;
- c. Wash hands before eating;
- d. Learn to recognize symptoms of an anaphylactic reaction (as developmentally appropriate);
- e. Promptly inform an adult, as soon as accidental exposure occurs or symptoms appear;
- f. Wear a medical identification bracelet;
- g. Keep an auto-injector on their person as required by school (e.g. "fanny pack");
- h. Know how to use the auto-injector (as developmentally appropriate).

2. Responsibilities of the Parents / Guardians of the Student with Anaphylaxis

- a. Identify their child's allergies and needs to the principal by completing, signing and submitting the Unified Referral and Intake System (URIS) application;
- b. Ensure that their child carries an up-to-date auto-injector at all times, including to out-of-school activities;
- c. Ensure that their child has and wears a medical identification bracelet;
- d. Participate in the development of the Individual Health Care Plan (IHCP) for their child, updated annually;
- e. Provide safe foods for their child's snacks, lunches and for special occasions;
- f. Provide support to the school and staff as required;
- g. Teach their child to:
 - Recognize the first signs of an anaphylactic reaction;
 - Know where their medication is kept and who can get it;
 - Communicate clearly when he or she feels a reaction starting;
 - Carry his / her own auto-injector on their person;
 - Eat only snacks, lunches, or drinks provided by home;
 - Understand the importance of hand-washing;
 - Report bullying and threats to an adult in authority;
 - Take as much responsibility as possible for his / her own safety.

Failure by parents / guardians to comply with the procedures outlined in this policy may result in the student being requested to remain at home until such time as compliance occurs.

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3. Responsibilities of All Parents / Guardians:

- a. Respond cooperatively to requests from the school to eliminate allergens from packed lunches and snacks;
- b. Participate in parent information sessions;
- c. Encourage children to support the student with anaphylaxis and respect school / division policies;
- d. Inform the teacher prior to bringing class treats on special occasions.

4. Responsibilities of the Principal:

- a. Ensure that parents / guardians have completed the necessary forms;
- b. Submit a URIS Application to the Director of Student, Clinical, & Pre-Kindergarten Services;
- c. Liaise with the URIS nurse and identify a designate to do so in case of absence;
- d. Ensure that an Individual Health Care Plan, which includes an Emergency Response Plan, is completed and reviewed annually for each child with a life-threatening allergy;
- e. Post Emergency Response Plans in the office and staff room;
- f. Assist with the implementation of policies and procedures for reducing risk in classroom and common areas;
- g. Notify staff of the student with anaphylaxis, the allergens and the treatment;
- h. Maintain up-to-date emergency contacts and telephone numbers;
- i. Ensure that all staff and volunteers have received instruction from the URIS nurse in the use of the auto-injector on an annual basis;
- j. Ensure that all substitute staff are informed of the presence of the student with anaphylaxis and that all appropriate supports are available in case of emergency;
- k. Inform parents / guardians of other students who are in contact with student with anaphylaxis, ask for their support and cooperation (see Appendix A – Sample Letter to Parents/Guardians Regarding Anaphylaxis);
- l. Arrange annual training through the URIS nurse to train staff and monitor personnel involved with the student with anaphylaxis;
- m. Ensure that the auto-injector is kept in a safe and easily accessible location, if it is not developmentally appropriate for the child to carry;
- n. Ensure that safe procedures are developed for field trips and extra-curricular activities;
- o. Develop procedures for dealing with bullying or threats;
- p. If the student with anaphylaxis is on a regular bus route, ensure that the bus driver has received a current copy of the Individual Health Care Plan, which includes the Emergency Response Plan.

5. Responsibilities of the Teacher:

- a. Participate in the review of the Individual Health Care Plan and Emergency Response Plan;
- b. Discuss anaphylaxis with the class, with parental permission;
- c. Teach students not to share lunches or to trade snacks;
- d. Instruct students with anaphylaxis to eat only what he / she brings from home;
- e. Reinforce hand-washing before and after eating;
- f. Facilitate communication with other parents;
- g. Follow policies for reducing risk in classrooms and common areas;

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- h. Enforce rules about bullying and threats;
 - i. Leave information in an organized, prominent and accessible format for substitute staff;
 - j. Plan appropriately for field trips, ensuring that Emergency Response Plans are considered and that auto-injectors are taken along;
 - k. Participate annually in training for use of the auto-injector.
- 6. Responsibilities of All Children in the School (as Developmentally appropriate):**
- a. Learn to recognize the symptoms of an anaphylactic reaction;
 - b. Avoid sharing or trading food, especially with student with anaphylaxis;
 - c. Follow rules about keeping allergens out of the classroom and washing hands;
 - d. Ensure that no bullying or teasing of students with anaphylaxis occurs.
- 7. Responsibilities of the URIS Nurse:**
- a. Develop an Individual Health Care Plan and an Emergency Response Plan for the student with anaphylaxis;
 - b. Facilitate staff training and provide monitoring to personnel involved with the student with anaphylaxis.
- 8. Responsibilities of the Transportation Supervisor:**
- a. Liaise with the Director of Student, Clinical, and Pre-Kindergarten Services for a current list of transported students with anaphylaxis;
 - b. Keep Individual Health Care Plans on file in case of emergency;
 - c. Assist with the implementation of policies and regulations for reducing risk in buses;
 - d. Ensure that all bus drivers who transport students with Individual Health Care Plans have current copies;
 - e. Arrange annual training with the URIS nurse for bus drivers with student with anaphylaxis;
 - f. Assist in developing an emergency action plan that relates directly to bussing.
- 9. Responsibilities of Bus Drivers:**
- a. Attend training sessions as provided by the Division;
 - b. Receive annual training in the use of an auto-injector;
 - c. Carry a copy of the Emergency Response Plan on the bus;
 - d. Assist in developing procedures to minimize risk while travelling on the bus;
 - e. Ensure that an auto-injector is stored in a safe and accessible place in the bus, or that the child is carrying the auto-injector in an identified location while on the bus.

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APENDIX "A"

Sample letter to Parents / Guardians regarding Anaphylaxis

(Name of School)

Date:

Dear Parents/Guardians:

There is a child in our school and/or your child's classroom who has a severe allergy to _____ . Exposure to even a tiny amount of this could be life threatening. Although the affected student and his/her family will take responsibility to avoid exposure, staff, other students and their families can all help to make the school safer. We ask for your cooperation by:

1. Checking the list of ingredients on all food items that you send to school.
2. Avoid sending _____ or items containing _____ .
3. Discouraging your child from sharing lunch or trading snacks at school.
4. Helping your children to understand and respect this life-threatening medical condition.

Thank you for understanding how important this is. For more information, please call _____ .

Yours truly,

Principal