



Board Approval Date: November 12, 2012

Anaphylactic Policy

In an effort to provide a safe environment for all children attending Hope Academy, the school community will take prudent measures to reduce the risk of exposure to conditions that could lead to anaphylactic reaction on the school property.

On January 1, 2006 Sabrina's Law came into force. This law directly affects children with allergies that could result in an anaphylaxis reaction. Schools have a responsibility with regards to students with life threatening allergies or illnesses. Sabrina's Law requires the Principal of the school to have an individual file for each student with an anaphylactic allergy and keep very specific information for that file. Specifically: *"a medical file including current treatment, prescriptions, instructions from the pupil's physician or nurse, a current emergency contact list, and a readily accessible emergency procedure."*

Purpose: One of the paramount concerns and obligations of Hope Academy is to provide a safe and healthy environment for all those who work, learn, play and visit within school facilities. In keeping with this obligation, Hope Academy will act responsibly to address identified risks within its control.

It is to be noted that a "nut free" environment is virtually impossible to obtain. This policy and associated procedures are a prudent attempt to provide an environment where the risk of anaphylaxis is reduced.

DEFINITIONS:

Anaphylaxis

Anaphylaxis refers to a collection of symptoms affecting multiple systems in the body. The most dangerous are breathing difficulties, and a drop in blood pressure or shock, which are potentially fatal. Common examples of potentially life threatening allergies are to foods, especially nuts, and insects.

Symptoms of an anaphylactic reaction are:

- Tingling, itching, swelling
- Throat tightness
- Difficulty swallowing
- Wheezing, coughing, difficulty breathing

- Chest tightness
- Sense of fear
- Flushing of the face and body
- Weakness or dizziness
- Hives
- Stomach cramping, vomiting, diarrhea
- Feeling faint
- Runny nose, voice change
- Sudden fatigue
- Rapid heartbeat or chills
- Pallor, loss of consciousness, coma, death

Not all have to be present for an anaphylactic reaction to be taking place; and reactions can be delayed for up to 2 hours.

Epipen

An epipen is the medically prescribed instrument used to auto-inject the drug epinephrine in the event of an anaphylactic allergy reaction. This instrument is only to be used under trained adult supervision.

Nuts

Includes food products made from or including ingredients defined by:

- Peanuts
- hydrolyzed vegetable protein
- Ground nuts
- Peanut butter
- Cold pressed peanut oil

Nut Safe Environment

An environment where it is relatively assured that nuts or their derivatives will not be present.

RESPONSIBILITIES:

Parents/Guardians:

1. Parents/Guardians will:
 - Fill out the Emergency Allergy Alert Form that will be posted at school.
 - Provide an epinephrine auto-injector device labeled by name and expiry date, as well as two current photos, one for the office, one for staff room.
 - Instruct their child to wear a fanny pack at all times, if necessary.
 - Sign a consent form that allows the school to administer epinephrine.
 - Provide information to students and staff at the school. This can be done in individual classes or at an assembly.

2. It is required that the parent/guardian ensures that the student with a potentially life threatening allergy is provided with a Medic-Alert bracelet/necklace.
3. Parents/guardians are asked to refrain from sending food containing nuts to school.
4. Parents/guardians will discuss birthday treats with teacher to ensure a safe eating environment for all students. No home-made baked goods should be brought into the classroom for sharing.

Students:

1. When documented by parents on the Emergency Allergy Alert Form, students will be responsible for having the epipen on them (in a fanny pack) at all times.
2. Trading and sharing of foods, food utensils, and food containers is discouraged.
3. Children with food allergies should only eat lunches and snacks that have been prepared at home.
4. It is required that the student with a potentially life threatening allergy wear a Medic Alert bracelet/necklace.

Staff Members & Teachers:

1. At the beginning of the school year, staff members and teachers will be instructed as to the potentially severe nature and proper treatment of the allergic problem.
2. The Principal will inform staff members and teachers of those students who may require epinephrine treatment.
3. Principal will: post a current photo (3x5" approx.) of child on the Medical Alert Board in the office and a photo with a form outlining a child's allergy in the staff room.
4. Teacher of allergic child will:
 - Introduce the student to all staff members and students, describing the specific allergy, possible symptoms and necessary emergency response action.
5. For "special lunch" days, the teacher will remind at-risk student(s) to bring their own lunch, unless the parent has specifically approved the menu.
6. The homeroom teacher will make classroom volunteers and supply teachers aware of at risk children.
7. The use of food in crafts and cooking classes will comply with this policy.
8. School sponsored class parties will be directed by the teacher who will monitor and endeavor to arrange for safe and nutritious snacks.
9. Where curriculum units are extended to include a sampling of food, the teacher will endeavor to provide a safe eating environment for all students.

School:

1. Food served by the school for snacks, special programmes, class trips, etc., will comply with this policy. (Please note that an Allergen Alert will be posted for events which will not be nut-free.)
2. The Property Maintenance Committee or Principal will:

- Conduct bi-yearly yard surveys for the purpose of removing insect nests on school property.
 - Provide proper storage of garbage in well-covered containers.
 - Post appropriate signs around the school to inform and remind all visitors, staff, and students of the policy.
3. The Principal will inform bus drivers of children on their route identified as having severe allergies and train them in anaphylactic emergency response techniques.
 4. Normally, eating areas during school hours will be restricted to inside school buildings.
 5. At the beginning of each school year, the Principal will ensure that all volunteers be made aware of at risk children. In cases of emergency, volunteers will contact a staff member immediately.
 6. Effort will be made regularly to educate the staff, students, and community regarding the understanding and treatment of Anaphylaxis.

TREATMENT:

Accidental food ingestion and insect bites can occur despite avoidance measures:

- Epinephrine must be administered **IMMEDIATELY** after the onset of symptoms of severe allergic reaction.
- Adult supervision is mandatory.
- The epipen will be kept in the office on the “Medic-Alert” board.
- Dial 911 and request an ambulance.
- Instruct emergency personnel of nature emergency and treatment already given so that additional epinephrine will be available.
- **DO NOT ATTEMPT TO DRIVE INDIVIDUAL TO HOSPITAL.**
- Parents of the child must be notified.

PROCEDURES TO ENACT THE POLICY:

1. Identify children at risk as per policy.
2. Remove risks as per policy.
3. Educate in-school population as per policy and:
 - Within each enrolment/re-enrolment package forwarded by office staff to all parents, a notification of this policy will be included.
 - At the initial staff meeting, the Principal will review the typical emergency response actions as well as the list of students at risk.
4. Educate Bus Drivers and Playground Volunteers as per policy.