



ANAPHYLAXIS AND DIETARY RESTRICTIONS POLICY

A. Non Life-Threatening Allergies/Dietary Restrictions

If the allergy/dietary restriction is not life-threatening, parents shall provide to the school a list of their child's allergies and/or dietary restrictions. A list of all children and their allergies/dietary restrictions shall be posted in all program areas and food preparation and serving areas. Parents shall receive a copy of the menu plan to review. Any food substitutions shall be the responsibility of the parent.

B. Life-Threatening Allergies – Anaphylaxis

Severe allergic reactions (e.g. anaphylactic shock) occur when the body's immune system reacts to a particular allergen or irritant. These reactions can be triggered by certain foods or food ingredients, insect stings and medications. This is a serious reaction and can be life threatening. The most common food products that cause reactions are peanuts, tree nuts, sesame, soy, fish, wheat, eggs, milk and seafood. It requires avoidance strategies and immediate response in the event of an emergency.

Strategy to Reduce the Risk of Exposure to Anaphylactic Causative Agents

1. The Preschool shall implement the following:
 - a) a communication plan to provide information on life-threatening allergies to employees, parents, volunteers and preschool children.
 - b) regular anaphylaxis training for all employees, volunteers and students who are in direct contact with anaphylactic preschool children on a regular basis
 - c) a requirement that the Parent Health Chair ensure that, upon registration, parents, guardians and preschool children shall be asked to supply information on life-threatening allergies
 - d) a requirement that the Parent Health Chair in cooperation and consultation with the teacher and the parent, develop an individual plan for each preschool child who has an anaphylactic allergy
 - e) a requirement that the Parent Health Chair, in cooperation and consultation with the teacher, maintain a file for each anaphylactic preschool child
2. The Preschool shall, at the beginning of the school year and periodically throughout the year, make a voluntary community appeal to help keep the preschool environment allergy-safe by not sending specific allergens in snacks (eg.-peanuts and nut products) Any parent who chooses to send in a snack for their child by their choice will be made aware of any food that may be an allergen to any of the children with an anaphylactic allergy and it will be explained to that parent that the snacks they send may not contain any of those allergens.
3. Depending on the allergies of the children attending the Preschool, the Preschool shall, if possible, avoid food and other causative agents (e.g.-latex, fabrics, medicines, chemicals, etc.) that may be used for craft and sensory programming or for cleaning, and that commonly produce allergic reactions.

Communication Plan

The supervisor states whether there is an enrolled child with an anaphylactic allergy.

- Information about anaphylaxis and strategies that reduce the risk of exposure to triggers of anaphylaxis within the Preschool environment shall be shared with the entire Preschool community at the Fall Orientation night. Any known anaphylaxis allergies at the time of the Orientation Night will be shared with the parents and the plan on how to reduce the risk of exposure to the allergen. This information can also be shared and updated again at the parent information nights as necessary through-out the year.
- All Preschool employees, students and volunteers in regular contact with anaphylactic preschool children shall be familiar with the Preschool's Anaphylactic Policy. If applicable, they shall also be familiar with the individual plan for children under their direct supervision, including the emergency procedure to be followed if the child has an anaphylactic reaction.
Each staff, student and volunteer must read the Anaphylactic policy. Any staff student and volunteer involved in the care of a child with an Individualized Emergency Plan must read and sign it (Individualized Emergency Plan) before beginning in the class where the child is present.

3. Anaphylaxis information provided by the Preschool shall present a balanced picture of anaphylaxis to avoid unnecessary anxiety or unrealistic expectations. While anaphylaxis has the potential to cause death, fatalities are rare.

4. Anaphylaxis information provided by the Preschool shall be easy to understand for everyone.

5. The Preschool shall provide on-going Anaphylaxis reminders in newsletters, bulletins, and during information events.

6. The list of banned foods and other causative agents will be posted and supplied to the Preschool community and will be revised as necessary, depending on the life threatening allergies of the children enrolled.

Identification of the Child at Risk

- It is the responsibility of the anaphylactic child's parents to inform the school of their child's allergy
- The parent shall be responsible to complete the Anaphylaxis Emergency Plan form. This form shall be copied – one kept in the child's file and one kept in the emergency information binder.
- A master list of all anaphylactic children with their photograph and treatment plan summary shall be posted in all program areas and food preparation/serving areas to ensure that all staff members are aware of these children.
- The parent shall be responsible to ensure that their child has an up-to-date auto-injector (labeled with their child's name) and an expiry date that does not expire before the end of school year in June.
- The Epi Pen as well as a copy of the permission form, will be stored in a zippered bag

and kept in the Teacher's backpack who has the child with them for the day. The Teacher's backpack will always travel with the teacher and child wherever they move that day. The Epi pen zippered bag will be unlocked when the child is present and locked when the child is not at the preschool. The Teacher's backpack will always be kept out of reach of the children. A pair of scissors will also be kept attached to the bag in case the lock fails and the teacher needs to gain access in a hurry!

- The parent will be responsible to provide written authorization for administration of the adrenaline auto-injector by staff.
- Parents will be responsible to advise the school if there are changes to their child's treatment protocol.
- An EpiPen poster shall be displayed in appropriate areas in the school.

Individual Anaphylaxis Emergency Plan

An individual treatment plan needs to be established by the parent and if desired with the advice from the child's doctor. This treatment plan will be outlined in the Anaphylaxis Emergency Plan form that parents are required to complete upon identification of their child's allergy. A copy of this plan will be placed in the child's file and the emergency information binder. A master list of all anaphylactic children with their photo and treatment plan summary shall be posted in all programs areas and food preparation/serving areas to ensure all staff members and volunteers are aware of these children. Any new child may not start at the preschool until the completed Individual Plan has been received along with the Epi Pen and permission written authorization for administration of the adrenaline auto-injector by staff.

Emergency Response Plan

1. Give the EpiPen. Note time of administration. Call 911.
2. NEVER leave the child who is experiencing an anaphylactic reaction alone. It is essential that the child having the reaction be taken to a hospital to receive immediate medical attention even if the EpiPen has been given.
3. Contact the child's parent(s) or guardian.
4. The staff member who administered the EpiPen should stay with the child until Emergency Medical Services arrive.
5. Following treatment, ensure that the incident is documented and a Serious Occurrence Report is completed and filed with the Ministry of Education, and the County of Wellington Child Care Services.

Anaphylaxis Training

1. All Preschool employees, students and volunteers who are in contact with preschool children with life-threatening allergies must have regular Anaphylaxis training through a First Aid Course, qualified parent or online video instructions on the procedures to be followed if a child has an anaphylactic reaction, including how to recognize the signs and symptoms of anaphylaxis and administer medication.
2. Once a staff member has received training then they in turn can also train all other staff, parents and volunteers.
3. Training shall include risk reduction strategies, an overview of signs and symptoms and what to do in case of an emergency.
4. All Preschool employees, students and volunteers who are in contact with anaphylactic children should be encouraged to practice with an epinephrine auto-injector trainer device throughout the year.
5. Substitute teachers must review and sign the individual plans for anaphylactic children.



Appendix A: INDIVIDUALIZED PLAN AND EMERGENCY PROCEDURES FOR A CHILD WITH AN ANAPHYLACTIC ALLERGY

Child's Name: Click here to enter text.

Child's Date of Birth (dd/mm/yyyy): Click here to enter text.

List of allergen(s)/causative agent(s):

- Click here to enter text.

Asthma: Yes (higher risk of severe reaction)
 No

Location of medication storage: Teacher's backpack.

Epinephrine auto-injector brand name: Click here to enter text.

Epinephrine auto-injector expiry date (dd/mm/yyyy):
Click here to enter text.

Other emergency medications*: Click here to enter text.

Emergency Services Contact Number: Click here to enter text.

Photo of Child
(recommended)

CHILD'S SPECIFIC SIGNS AND SYMPTOMS OF A NON-LIFE THREATENING ANAPHYLACTIC REACTION: *(specific to the child, e.g. wheezing and itchy skin)*

Click here to enter text.

CHILD'S SPECIFIC SIGNS AND SYMPTOMS OF A LIFE THREATENING ANAPHYLACTIC REACTION: *(specific to the child, e.g. inability to breathe, sweating)*

Click here to enter text.

DESCRIPTION OF PROCEDURE TO FOLLOW IF CHILD HAS A NON-LIFE THREATENING ANAPHYLACTIC REACTION:

Click here to enter text.

DESCRIPTION OF PROCEDURE TO FOLLOW IF CHILD HAS A LIFE-THREATENING ANAPHYLACTIC REACTION:

Click here to enter text.

STEPS TO REDUCE RISK OF EXPOSURE TO CAUSATIVE AGENT/ALLERGEN: (e.g. nut-free environment)

Click here to enter text.

ADDITIONAL NOTES (if applicable): (e.g. use of other emergency allergy medication(s) to implement the emergency procedures)

Click here to enter text.

Parental Statement

I [Click here to enter text.](#) (parent/guardian) hereby give consent for my child

[Click here to enter text.](#) (child's name) to (check all that apply):

carry their emergency allergy medication in the following location (e.g. blue fanny pack around their waist):

[Click here to enter text.](#)

self-administer their own medication in the event of an anaphylactic reaction

AND/OR

I [Click here to enter text.](#) (parent/guardian) hereby give consent to any person with training on this plan at the home child care premises to administer my child's epinephrine auto-injector and/or asthma medication and to follow the procedures set out in my child's Individualized Anaphylaxis Plan and Emergency Procedures.

Parent/Guardian initials: _____

EMERGENCY CONTACT INFORMATION

Contact Name	Relationship to Child	Primary Phone Number	Additional Phone Number
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.

HEALTHCARE PROFESSIONAL CONTACT INFORMATION: (optional)

Contact Name	Primary Contact Number
Click here to enter text.	Click here to enter text.

SIGNATURE OF HEALTHCARE PROFESSIONAL (optional)

X	Date: Click here to enter text.
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SIGNATURE OF PARENT/GUARDIAN (required)

Print name:	Relationship to Child: Click here to enter text.
X	Date: Click here to enter text.

