JAMES BAY LOWLANDS SECONDARY SCHOOL BOARD

ADMINISTRATIVE PROCEDURE STUDENTS: N0. 319		
Effective	August 21, 2019	
Last Revised	August 15, 2023	

ANAPHYLAXIS

PURPOSE

The James Bay Lowlands Secondary School Board believes that all students are entitled to a safe and healthy environment, including an allergen-safe environment. This administrative procedure has been developed to minimize the danger to each student with an anaphylactic allergy at school or at a related event.

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.

These administrative procedures and the accompanying Handbook, *Prevention and Management of Anaphylactic Shock* are intended to educate students, parents, and the staff about the prevention and management of anaphylactic shock.

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. Nonfood 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.

ADMINISTRATIVE PROCEDURES

1. Application

- 1.1. 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.
- 1.2. This procedure and the related Handbook, *Prevention and Management of Anaphylactic Shock*, provide expectations for the staff, parents, and students. It applies in school buildings, at school-related events, and on school buses.

2. Shared Responsibility

- 2.1. Staff members and parents have shared responsibilities, as described in this procedure and the Handbook, with regard to providing a safe environment for students with an anaphylactic allergy.
- 2.2. 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.
- 2.3. This procedure outlines strategies that reduce the risk of exposure to anaphylactic causative agents in the Board's learning and working environments.
- 2.4. 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.

3. 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;
- avoiding the allergen that causes anaphylactic reactions wherever possible by enlisting staff and parent support, 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.

4. Responsibilities of the Principal

- 4.1. The principal shall:
 - a) ensure that upon registration the parents and students supply information on life threatening allergies;
 - b) communicate to parents at the beginning of each year the need to provide up-todate information about treatment and/or other allergies as soon as they are known;
 - c) develop an individual plan for each student who has an anaphylactic allergy; [Form ADMIN-319-01 Extreme Allergy Management and Prevention Plan: Appendix A]
 - d) maintain a file for each anaphylactic student of current treatment and other information, including a copy of any prescriptions and instructions from the student's physician or nurse and a current emergency contact list; and
 - e) ensure that occasional teachers as well as regular staff are aware of students with anaphylactic allergies.

5. **Responsibilities of Teachers**

- 5.1. Classroom teachers are responsible for:
 - a) discussing anaphylaxis with the class in age-appropriate terms;
 - b) practicing allergen avoidance measures within the school, at school events, and out-of-school activities;
 - c) instructing students not to share lunches or trade snacks;
 - d) instructing the anaphylactic student to eat only food brought from home;
 - e) reinforcing with all students the importance of hand washing before and after eating;
 - f) reviewing the anaphylaxis procedures and emergency actions regularly;
 - g) taking appropriate action in the event of an emergency; and
 - h) 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 Parents**

6.1. Parents are responsible for informing the school if their child has a diagnosed, lifethreatening allergy.

- 6.2. Parents must provide the principal with a written medical report identifying the student's allergic reactions.
- 6.3. Parents will provide a medic alert bracelet for their child.
- 6.4. Parents shall provide the school with the physician's instructions for administering the medication.
- 6.5. 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.
- 6.6. 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 319-02 Consent for Intervention during an Emergency Allergic Reaction in Appendix B.]
- 6.7. 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 labeled and placed in the office transportable first aid bag, which is taken to all first aid calls.
- 6.8. Parents are responsible for practicing allergen avoidance measures.
- 6.9. Parents will review the student's Extreme Allergy Management and Prevention Plan with the staff. [See Appendix A in this procedure and the Handbook, *Prevention and Management of Anaphylactic Shock*.]

7. Responsibilities of Students

- 7.1. Anaphylactic students are responsible for:
 - a) being aware of and acting on the preventative measures necessary to avoid contact with allergens;
 - b) washing hands before eating;
 - c) where developmentally appropriate, ensuring that they carry their epinephrine auto-injectors with them at all times;
 - d) wearing a medic alert bracelet;
 - e) knowing at all times where an auto-injector is located and knowing how to use it; and
 - f) informing the staff immediately if they have been in contact with a known allergen or have any concerns related to potential allergens.

- 7.2. 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.
- 7.3. All students in the school are responsible for:
 - a) avoiding sharing food, especially with anaphylactic children;
 - b) following school rules about keeping allergens out of the classroom, school, and buses;
 - c) washing hands before and after eating;
 - d) learning to recognize signs of an anaphylactic reaction; and
 - e) learning to respect the rights and needs of others.

8. Responsibilities of Bus Drivers

- 8.1. Bus drivers are responsible for following bus company procedures for anaphylactic students as provided by the school.
- 8.2. Bus drivers are responsible for participating in training offered by the bussing company or by the school board as required.

9. The Individual Plan

- 9.1. The individual plan for a pupil with an anaphylactic allergy shall include:
 - a) details regarding the type of allergy, monitoring and avoidance strategies, and appropriate treatment;
 - b) a readily accessible emergency procedure for the student, including emergency contact information; and
 - c) storage for an epinephrine auto-injection where necessary.

10. School Plans

- 10.1. The school principal and staff shall implement avoidance strategies to minimize all allergic students' exposure to:
 - a) Peanuts and nuts
 - b) Other foods (e.g. milk, wheat, fish, shell-fish, soy, egg) as identified by the student's physician
 - c) Insects causing anaphylactic reactions (e.g. bees, wasps)
 - d) Latex products (e.g. gloves, balloons)
 - e) Scented products

- 10.2. A communication plan for the dissemination of information on life-threatening allergies to parents, pupils, and employees shall be developed.
- 10.3. Staff members and others who are in direct contact with pupils shall receive training on dealing with life-threatening allergies, including the use of an auto-injection (e.g. EpiPen) at least once a year.
- 10.4. The Board shall provide the school with an auto-injector training device.
- 10.5. The Board authorizes staff where a student/staff member is known to have anaphylactic reactions to respond to a perceived anaphylactic reaction with an auto-injector device (with the assurance that they will not be held responsible for any adverse reactions resulting from such administration) and have them seek medical attention immediately.
- 10.6. Staff will review the Handbook, *Prevention and Management of Anaphylactic Shock* each year.

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

Ontario Regulation 298 Operation of Schools, section 20 Duties of Teachers: Ensure all reasonable safety procedures are carried out

Guideline OSR—Ontario Student Record (OSR) Guideline, clause 3.1.5 Special Health Information

Ministry of Education Policy/Program Memorandum 161 Supporting Children and Students with Prevalent Medical Conditions (Anaphylaxis, Asthma, Diabetes, and/or Epilepsy) in Schools (2018)

Board:

Board Policy GOV-01 Values, Vision, and Mission

Board Policy GOV-23 Emergency Response Plans

Administrative Procedure 143 Student Accidents and Illness

Administrative Procedure 320 Supporting Students with Prevalent Medical Conditions (Anaphylaxis, Asthma, Diabetes, and/or Epilepsy)

Administrative Procedure 321 Administration of Medication and Medical Procedures Appendix A Form ADMIN 319-01 Extreme Allergy Management and Prevention Plan Appendix B Form ADMIN 319-02 Consent for Intervention during an Emergency Allergic Reaction

Handbook, Prevention and Management of Anaphylactic Shock

APPENDIX A

FORM ADMIN 319-01 EXTREME ALLERGY MANAGEMENT AND PREVENTION PLAN JAMES BAY LOWLANDS SECONDARY SCHOOL BOARD

A. **Student Information** (To be Completed by Parent/Guardian)

	Name of Student:			
	Student Health Card No.:			
	Address:			
	Home Phone #:	Date of Birth:		
	Name of Father:	Work No.:		
	Name of Mother:	Work No. :		
	Emergency Contact Person:			
	Emergency Contact No.:			
В.	Physician Information (To be Completed by Family Physician)			
	Nature of Allergy:			
	Symptoms of Reaction:			
	Recommended Response to Reaction:			
	Medication: Additional Instructions or Information:			
	Name of Physician:	Telephone:		
	Signature of Physician			
	Date		Insert Student Photo Here	

APPENDIX B

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FORM ADMIN 319-02 Consent for Intervention during an Emergency Allergic Reaction

Consent for Intervention during an Emergency Allergic Reaction STUDENT INFORMATION: (to be completed by the parent/guardian)					
Name of Student:	to be completed by the par	Date of Birth:			
Street Address:					
Name of Mother:	Home Phone:	Work Phone:			
Name of Father:	Home Phone:	Work Phone:			
Emergency Contact Person:		Phone:			
PHYSICIAN INFORMATION:	(to be completed by the p	bhysician)			
Nature of Allergy:					
Symptoms of Reaction:					
Recommended Response to Rea	action:				
Medication:		Dosage:			
Additional Instructions or Informa	ation:				
Signature of Physician:		Date:			
Parent Consent is required for so child in case of an extreme allerg		ster the recommended medication to the le this consent by signing below:			
I give the school my consent to a					
Student's Name	during an extreme	allergic reaction.			
	Parent(s)/Guardia	n(s) Signature			