



YORK CATHOLIC DISTRICT SCHOOL BOARD

No.: 209

Section: Students

Approved: April 18, 2006

Implementation: Director of Education

POLICY:

PROTECTION OF ANAPHYLACTIC STUDENTS

The Board recognizes that there are some students within the school system that are susceptible to severe anaphylactic reactions. Such an allergic reaction could be life threatening.

IT IS THE POLICY OF THIS BOARD that all students are entitled to safe and healthy environments in our schools. While it is impossible to create a risk free environment, school staff and parents can take important steps to minimize potentially fatal allergic reactions. There are three key factors to consider in providing a safe environment for anaphylactic students:

- information and awareness for the entire school community
- avoidance of the allergen; and
- an action emergency plan in case of accidental exposure.

This policy is established and shall be maintained in accordance with Sabrina's Law, 2005, S.O.c.7.

CROSS REFERENCE

PROCEDURES:	Administration of Prescription Medication to Students
FORMS:	Form S15 Parental Acknowledgment & Consent
	Form S15(a) Administration of Prescription Medication for Anaphylaxis
OTHER RESOURCES:	Anaphylaxis Resource Kit An Act to Protect Anaphylactic Pupils (Sabrina's Law)

PROCEDURES

PROTECTION OF ANAPHYLACTIC STUDENTS

AVOIDANCE STRATEGIES (Elementary):

Protecting anaphylactic students from exposure to life threatening substances creates a major challenge to elementary schools. The following are avoidance strategies to be implemented:

- a) Establish an “allergy safe” school environment via food restrictions, no food sharing rules and hand washing routines. School environment includes entire school grounds, buses and other modes of transportation, school trips, before/after school / weekend programs, and school sanctioned events involving pupils.
- b) Communicate to the entire school community stressing “allergen safe” schools via newsletter, and posting of “allergy safe” signs throughout the school.
- c) Take special precautions around holidays and special celebrations, along with attempts to plan activities that are not food oriented.
- d) Special communication to individual classrooms regarding allergens in that classroom and through the classroom to the community regarding specific allergens.
- e) Ensure that all products sold through the school for fundraising or otherwise are allergen free.
- f) Prohibit food outdoors to minimize exposure to insects (i.e. wasps, etc.).
- g) Ensure that permit holders, visitors and all school staff are aware of the Protection of Anaphylactic Students Policy.

AVOIDANCE STRATEGIES (Secondary):

Protecting anaphylactic students from exposure to life threatening substances creates a major challenge to secondary schools. The following are avoidance strategies to be implemented:

- a) Alert the school community that vending machines and the cafeteria may contain food allergens with appropriate signage.
- b) Ensure that permit holders, visitors, parents/guardians, and all school staff are aware of the Protection of Anaphylactic Students Policy via school newsletters and school website if applicable.
- c) Ensure that all students are aware of the Protection of Anaphylactic Students Policy via student agendas and regular assemblies.

A. RESPONSIBILITY OF PARENT/GUARDIAN

When a student has a LIFE THREATENING allergy to insects, peanuts/nuts and/or other foods, or other allergens as described on form S15(a), the parent/guardian shall:

- a) Advise school immediately upon registration and / or diagnosis of an anaphylactic allergy.
- b) Provide the principal with a completed copy of form S15 and S15(a) prior to, or immediately after, the beginning of the school year. Ensure that the information is kept current.
- c) Provide the school with one (1) up-to-date application of the EpiPen®, to be stored in the office, and clearly marked with student's name and known allergen.
- d) Provide one (1) up-to-date application of the EpiPen®, to be carried by the student to be clearly marked with the student's name and known allergen.
- e) Encourage your child to wear a MEDIC ALERT BRACELET at all times.

B. RESPONSIBILITY OF THE STUDENT WITH AN ANAPHYLACTIC ALLERGY

Where a student has a LIFE THREATENING allergy to insect, peanuts/nuts and/or other foods, or other allergens as described on form S15(a), the student shall:

- a) Use best efforts to avoid allergens.
- b) Learn to recognize symptoms of an anaphylactic reaction.
- c) Promptly inform an adult as soon as accidental exposure occurs or symptoms appear.
- d) Take responsibility for keeping their EpiPen® with them at all times and know how to use the EpiPen® auto injector.
- e) Wear Medic Alert identification.

C. RESPONSIBILITY OF PRINCIPAL

Elementary:

When an elementary student has a LIFE THREATENING allergy to insects, peanuts/nuts and/or other foods, or other allergens as described on form S15(a), the principal shall:

- a) Place form S15(a) (Administration of Prescription Medication for Anaphylaxis) in a prominent place in the staff room and student's classroom. If a parent/guardian does not wish the S15(a) posted in the classroom/staffroom, the principal shall direct the classroom teacher to place the form in the "Student Information File" or an acceptable alternative.
- b) Require the parent/guardian to provide the school with TWO (2) EpiPens®, one for the office and one to be carried by the student.

- c) i) Ensure that staff are fully briefed, and students are aware, that some students have life-threatening allergies. Schools must develop and implement practical and realistic avoidance strategies.
- ii) File in the school office an ACTION PLAN as specified on Form S15(a).
- d) Ensure that all staff and volunteers are inserviced twice annually on how to recognize symptoms of an anaphylactic attack and how to respond to life-threatening allergic reactions. This inservice shall include how to administer medication (e.g. EpiPen®).
- e) Ensure, in the case of an out-of-school activity, that the staff, parent/guardian or an adult designated by the parent is acquainted with the procedure, accompany the student on such activity, and bring a copy of form S15(a), along with the EpiPen®.
- f) Maintain a supply of non allergic snacks in the office to replace inappropriate snacks as needed.
- g) Strongly encourage a parent/guardian to have their child wear a MEDIC ALERT BRACELET.
- h) Provide STS (Student Transportation Services) with a current copy of form S15(a) immediately upon receipt from the parent/guardian.

Secondary:

When a secondary student has a LIFE THREATENING allergy to insects, peanuts/nuts and/or other foods, or other allergens as described on form S15(a), the principal shall:

- a) Place form S15(a) (Administration of Prescription Medication for Anaphylaxis) in the main office.
- b) Require the parent/guardian to provide the school with TWO (2) EpiPens®, one for the office and one to be carried by the student.
- c) i) Ensure that staff are fully briefed, and students are aware, that some students have life-threatening allergies. Schools must develop and implement practical and realistic avoidance strategies.
- ii) File in the school office an ACTION PLAN as specified on Form S15(a).
- d) Ensure that all staff and volunteers are inserviced twice annually on how to recognize symptoms of an anaphylactic attack and how to respond to life-threatening allergic reactions. This inservice shall include how to administer medication (e.g. EpiPen®).
- e) Ensure, in the case of an out-of-school activity, that the staff, parent/guardian or an adult designated by the parent is acquainted with the procedure, accompany the student on such activity, and bring a copy of form S15(a), along with the EpiPen®.
- f) Strongly encourage the parent/guardian to have their child wear a MEDIC ALERT BRACELET.
- g) Strongly encourage the student to wear a MEDIC ALERT BRACELET.

- h) Provide STS (Student Transportation Services) with a current copy of form S15(a) immediately upon receipt from the parent/guardian.
- i) Provide clear information for occasional teachers on students with anaphylaxis attending the school.
- j) Provide Food Service provider (cafeteria services) with a current copy of form S15(a) immediately upon receipt from the parent/guardian.

D. RESPONSIBILITY OF SCHOOL STAFF:

Elementary:

Where an elementary student has a LIFE THREATENING allergy to insects, peanuts/nuts and/or other foods, or other allergens as described on form S15(a), the school staff shall:

- a) Provide clear information for occasional teachers including a copy of the form S15(a) (which includes a photo of the student).
- b) Discuss anaphylaxis with the class, in age appropriate terms. Outline the allergen in the class, describe symptoms of an anaphylactic attack and procedures to follow should an attack occur.
- c) Regularly remind students to help minimize risk by not bringing food allergens to school.
- d) Enforce no food sharing rule.

Secondary:

Where a secondary student has a LIFE THREATENING allergy to insects, peanuts/nuts and/or other foods, or other allergens as described on form S15(a), the school staff shall:

- a) Discuss anaphylaxis with students. Outline the allergen in home room class, describe symptoms of an anaphylactic attack and procedures to follow should an attack occur.

E. RESPONSIBILITY OF STUDENT TRANSPORTATION SERVICES

When a student has a LIFE THREATENING allergy to insects, peanuts/nuts and/or other foods, or other allergens as described on form S15(a), and where Student Transportation Services is informed of this allergy, they shall:

- a) Ensure that the current form S15(a) (notification form(s)) received from the principal is available on file:
 - i) in Student Transportation Services office.
 - ii) in the appropriate service provider's dispatch office.
 - iii) in the appropriate school vehicle(s).
- b) Require the service provider to ensure there has been adequate EpiPen® inservicing of all

regular drivers and substitute drivers that transport a student with life threatening allergies. The drivers will also be inserviced on how to recognize the symptoms of an anaphylactic attack.

This inservicing will include:

- i) the correct method of administering an EpiPen®.
 - ii) instruction to contact their dispatch office for an ambulance and to wait for EMS to arrive.
- c) Ensure that an EMERGENCY PLAN has been developed. The current standard plan is that the driver radios dispatch for an ambulance and waits for the EMS to arrive.
 - d) Work with the school principal and service provider to assign a specific seat to a student with life threatening allergies, if required.
 - e) Advise bus drivers to enforce a no food/beverage consumption rule on school buses.

F. RESPONSIBILITY OF FOOD SERVICES (SECONDARY)

When a student has a LIFE THREATENING allergy to insects, peanuts/nuts and/or other foods, or other allergens as described on form S15(a), and where a Food Service provider is informed of this allergy, they shall:

- a) Ensure that the current form S15(a) (notification form(s)) received from the principal is available on file in the Food Service provider's office.
- b) Ensure that all personnel are trained to reduce the risk of cross-contamination through purchasing, handling, preparation and serving of food.
- c) Ensure that the contents of all foods served in school cafeterias and brought in for special events are clearly identified.
- d) Participate in the school's anaphylaxis training on how to recognize the symptoms of an anaphylactic attack and on how to respond to life threatening allergic reactions. This training shall also include how to administer medication (e.g. EpiPen®).

G. RESPONSIBILITY OF THE BOARD

In order to protect students with life threatening allergies to insects, peanuts/nuts and/or other foods or other allergens the Board shall:

- a) Ensure that all occasional teachers and casual support staff are inserviced upon hiring and annually by Human Resources on how to recognize symptoms of an anaphylactic attack and on how to respond to life threatening allergic reactions. This inservice shall also include how to administer medication (e.g. EpiPen®).
- b) Encourage all school councils to establish an Allergy Awareness Committee that will assist school principals on educating the school community.

- c) Ensure the school premises are maintained and necessary maintenance/repairs are completed so as to minimize student exposure to insects/other allergens.
- d) Consider a food service provider's allergen management policy and anaphylaxis training as part of the evaluation criteria when awarding contracts for secondary school cafeteria services.

H. RESPONSIBILITY OF THE COMMUNITY AS A WHOLE

Our Shared Vision

“We are a Catholic Learning Community of collaborative partners, called to serve one another by being committed to and accountable for quality learning by all, with Jesus as our inspiration.”

Jesus Teaches Us

“Whatsoever you do the least of my people that you do unto me.”
Gospel of Matthew

The challenge posed by Anaphylaxis is a test of our Catholic identity and a call to serve our Lord. As a Catholic community, we are obligated to treat anaphylactic students as if they are our own, children, brothers and sisters.

In keeping with our Catholic faith, all members of the community including students, parents and staff shall work together to establish an allergy safe school which recognizes the sanctity of life and its obligation to protect all of its members, including students and staff. In doing so, the community shall take all necessary precautions to ensure an allergy safe environment including entire school grounds, buses and other modes of transportation school trips, before/after school/weekend programs and school sanctioned events involving pupils to ensure the safety of all its students.



ADMINISTRATION OF MEDICATION
for ANAPHYLACTIC STUDENTS
Acknowledgement and Consent
(Students Under 18 Years of Age)

It should be understood that parents are asking non-medical persons to undertake the administration of prescription medications (i.e. epinephrine auto injector) and must, therefore, assume the associated inherent risks. School staff members providing assistance in the administration of prescription medication to students are not medically trained personnel. They will endeavour to follow all reasonable instructions, as provided on the Board forms S15(a), in order to ensure the safety and security of each student.

If you choose to request school staff to administer prescription medication to your child, you must understand that you bear the responsibility of any accident that might occur.

s.3(4) Sabrina's Law, 2005

No action for damages shall be instituted respecting any act done in good faith or for any neglect or default in good faith in response to an anaphylactic reaction in accordance with this Act, unless the damages are the result of an employee's gross negligence.

In order to minimize these risks, parents should ensure that their requests include all information that might be needed to safely administer prescription medications, including the identification of possible side effects as identified, on the Board S15(a), by a licensed physician.

The York Catholic District School Board does not provide medical expense insurance on behalf of its students who require assistance in the administration of prescription medication.

It is your legal obligation to ensure that the information in your child's file is kept up to date with the medication that your child is taking.

ACKNOWLEDGEMENT and CONSENT

WE HAVE READ AND ACKNOWLEDGE THE ABOVE, AND HEREBY
CONSENT TO THE ADMINISTRATION OF PRESCRIPTION MEDICATION
TO _____ BY SCHOOL STAFF.
(name of student)

Signature of Parent/Guardian: _____

Date: _____

Parents/Guardians may request a copy of his/her Acknowledgement and Consent Form
from the School Principal.

Questions about this form should be addressed to the School Principal.



ADMINISTRATION OF PRESCRIPTION MEDICATION FOR ANAPHYLAXIS

THE FOLLOWING REQUEST(S) WILL EXPIRE ON JULY 1ST OR WHEN THE PRESCRIPTION EXPIRES - MEDICATION SHALL BE REMOVED FROM THE SCHOOL AT THAT TIME.

STUDENT'S NAME: _____ **TEACHER'S NAME:** _____

Address _____ _____	PLACE STUDENT'S PHOTO HERE (MUST BE KEPT CURRENT)	MEDICATION KEPT: With Student <input type="checkbox"/> Specify location: In Office <input type="checkbox"/> Other: _____
Phone # _____ _____ contact during the day		
Physician's Name _____		
Phone # _____		

POSSIBLE ANAPHYLACTIC SYMPTOMS:	LIST ADDITIONAL/OTHER SYMPTOMS FOR YOUR CHILD:						
flushed face, hives, tingling in the mouth, swelling or itchy lips, tongue, eyes	<table border="1"> <tr><td><input type="checkbox"/></td><td>I have provided an EpiPen® for the office.</td></tr> <tr><td><input type="checkbox"/></td><td>I have provided an EpiPen® for my child to carry at all times.</td></tr> <tr><td><input type="checkbox"/></td><td>I have provided a Medic Alert Bracelet and will encourage my son/daughter to wear it at all times.</td></tr> </table>	<input type="checkbox"/>	I have provided an EpiPen® for the office.	<input type="checkbox"/>	I have provided an EpiPen® for my child to carry at all times.	<input type="checkbox"/>	I have provided a Medic Alert Bracelet and will encourage my son/daughter to wear it at all times.
<input type="checkbox"/>		I have provided an EpiPen® for the office.					
<input type="checkbox"/>		I have provided an EpiPen® for my child to carry at all times.					
<input type="checkbox"/>		I have provided a Medic Alert Bracelet and will encourage my son/daughter to wear it at all times.					
tightness in throat, chest							
difficulty breathing or swallowing, wheezing, coughing, choking							
vomiting, nausea, diarrhea, stomach pains							
loss of consciousness							
fear and/or panic							

ACTION – EMERGENCY PLAN: (See Reverse for Additional Information)
➤ Use EpiPen® immediately and try to keep child calm
➤ DESIGNATE SOMEONE TO CALL 911 and advise the dispatcher that a student is having an anaphylactic reaction (a severe life-threatening allergic reaction).
➤ Call parent or guardian
➤ If ambulance has not arrived in 10-15 minutes and breathing difficulties are present (e.g. wheeze, cough, throat clearing), or student is unconscious give a second EpiPen®.
➤ The student must be taken to a hospital immediately, even if symptoms subside entirely.
➤ Send an additional EpiPen® (if available) with the ambulance driver.

Parent/Guardian Signature: _____	Date: _____
Physician Signature: _____	Date: _____
NAME OF MEDICATION(S): _____	

Personal information on this form is collected under the authority of the *Education Act*, R.S.O. 1990, c.E.2 and the *Municipal Freedom of Information and Protection of Privacy Act*, R.S.O., 1990, c.M.56. If you have any questions, please call the Freedom Of Information Administrator at the York Catholic District School Board, 320 Bloomington Rd. W., Aurora, Ontario L4G 3G8, (905) 713-2711.

c.c. Student Transportation Services
Office File
Food Service Provider (Secondary)

Cont'd. on reverse

PARENT INPUT ON EMERGENCY PLAN:

DESCRIPTION OF ALLERGY

THIS STUDENT HAS A LIFE-THREATENING ALLERGY TO THE FOLLOWING:

**AND ALL FOODS CONTAINING THESE ALLERGENS IN ANY FORM OR AMOUNT,
INCLUDING THE FOLLOWING:**

STRATEGIES (List avoidance/safety rules for your child, if any):