

RATIONALE

The Catholic Independent Schools of Nelson Diocese (CISND) recognizes that it has a duty of care to students who are at risk from life-threatening allergic reactions while under school supervision. The CISND also recognizes that this responsibility is shared among the student, parents, the school system, and health care providers.

The purpose of this policy is to minimize the risk to students with severe allergies to potentially life-threatening allergens without depriving the severely allergic student of normal peer interactions or placing unreasonable restrictions on the activities of other students in the school.

This policy is designed to ensure that students at risk are identified, strategies are in place to minimize the potential for accidental exposure to allergens, and staff and key volunteers are trained to respond in an emergency.

POLICY

All children including those at risk of life-threatening allergic reactions have the right to access a safe, healthy learning environment. They cannot guarantee an 'allergy free' environment. It is expected that school staff, parents and students will take reasonable steps to establish an 'allergy aware' environment which minimizes the risk of potential anaphylaxis. Schools must take realistic and practical actions that will encourage the support of everyone involved.

The Board of Directors expects schools will develop an "Anaphylaxis Action Plan" when a student with an anaphylaxis allergy is under their care. The Anaphylaxis Action Plan will include allergy awareness, and prevention and avoidance strategies. These plans will be considered in the context of the anaphylaxis child's age and maturity. Children, as they mature, should take more personal responsibility for avoidance of their specific allergens.

Description of Anaphylaxis

Anaphylaxis is a sudden and severe reaction, which can be fatal, requiring immediate emergency measures be taken.¹

Signs and symptoms of a severe allergic reaction can occur within minutes of exposure to an offending substance. Reactions usually occur within two hours of exposure, but in rarer cases can develop hours later. Specific warning signs as well as the severity and intensity of symptoms can vary from person to person and sometimes from reaction to reaction in the same persons.

An anaphylactic reaction can involve **any** of the following symptoms, which may appear alone or in any combination, regardless of the triggering allergen:

- **Skin:** hives, swelling, itching, warmth, redness, rash
- **Respiratory (breathing):** wheezing, shortness of breath, throat tightness, cough, hoarse voice, chest pain/tightness, nasal congestion or hay fever-like symptoms (runny itchy nose and watery eyes, sneezing), trouble swallowing
- **Gastrointestinal (stomach):** nausea, pain/cramps, vomiting, diarrhea
- **Cardiovascular (heart):** pale/blue colour, weak pulse, passing out, dizzy/light-headed, shock
- **Other:** anxiety, feeling of “impending doom”, headache, uterine cramps in females

Because of the unpredictability of reactions, early symptoms should never be ignored, especially if the person has suffered an anaphylactic reaction in the past.

It is important to note that anaphylaxis can occur without hives.

The following symptoms may lead to death if untreated:

- breathing difficulties caused by swelling of the airways; and/or
- a drop in blood pressure indicated by dizziness, light-headedness or feeling faint/weak.

¹ *British Columbia Anaphylactic and Child Safety Framework, Ministry of Education, September 2007 (minor revision in 2013)*

REGULATIONS

The principal of the school is responsible for developing and maintaining a safe school environment for anaphylactic students with anaphylactic allergies. This includes ensuring parents, students, teachers, and other school staff are aware of and comply with CISND policy.

In accordance with the British Columbia *Anaphylaxis Protection Order*, all schools in CISND must implement the steps outlined in the *British Columbia Anaphylactic and Child Safety Framework*.

Anaphylaxis Protection Order Requirements

(a) Identifying Students with Anaphylaxis

At the time of registration, using the school's registration form, parents/guardians are to report on their child's medical conditions including whether their child has a medical diagnosis of anaphylaxis. When a parent identifies their child has anaphylaxis (indicated as a life-threatening allergy), the school will contact the public health nurse to review the information.

Once the public health nurse confirms the diagnosis of anaphylaxis, the school will provide the parent with the Student Emergency Procedure Plan Form and the Medication Administration Form, and request the parent and physician complete and sign the forms and return these to the office prior to the start of the school year. Together these forms constitute the Student Level Emergency Plan as outlined in the *British Columbia Anaphylactic and Child Safety Framework*.

Schools will meet with the student (where age appropriate) and/or the students' parents to review the Student Emergency Procedure Plan.

(b) Record Keeping - Permanent Student Record

Schools will keep a copy of the Student Emergency Procedure Plan in the Student's Permanent Record and update this annually. Information on the student's life-threatening allergy is to be recorded on both the student's electronic file, and the Medical Alert list.

The school will transfer the Student Emergency Procedure Plan with the student's Permanent Student Record when the student changes schools.

(c) Emergency Procedure Plans

Schools will maintain an accurate Student Emergency Procedure Plan for each student with anaphylaxis. The form must be signed by the student's parents, the student (where age appropriate) and the physician and must be kept on file at readily accessible locations.

The Student Emergency Procedure Plan shall include at minimum:

- the diagnosis.
- the current treatment regimen.
- who within the school community is to be informed about the plan - e.g., teachers, volunteers, classmates; and
- current emergency contact information for the student's parents /guardian.

Those exposed to individual Student Emergency Procedure Plans have a duty to maintain the confidentiality of all student's personal health information.

The Student Emergency Procedure Plan shall also explicitly address:

- the parent's responsibility for advising the school about any changes in the student's condition; and
- the school's responsibility for updating records.

All schools must have an emergency protocol in place to ensure responders know what to do in an emergency. The emergency protocol includes:

- administer an auto-injector
- call 911 and ask for an Advance Life Support Ambulance.
- call student's parents.
- administer a second auto-injector within 5 minutes if symptoms have not improved.
- have student transported to hospital by ambulance.

Schools will ensure a Student Emergency Procedure Plan is completed annually, prior to the start of school for every student with anaphylaxis. Schools will provide parents with the

Medication Administration Card and request the student's physician complete the card which confirms the diagnosis of anaphylaxis and indicates emergency medication is required to treat anaphylaxis. The Medication Administration Card is valid indefinitely.

(d) Use of Medical Identification

Schools will inform parents and staff of medical alert program and encourage students to use medic alert bracelet or necklet which indicates the student has anaphylaxis.

(e) Provision and Storage of Autoinjector

Schools will inform parents and students that only single-use single-dose auto injectors (auto-injector) will be administered in the event of anaphylaxis.

Neither oral antihistamines nor double dose auto injectors (Twinject) will be provided.

Schools will request parents to provide two current auto-injectors. One of which will be kept in a central location in the school office. The other auto-injector is to be kept with the student if he/she can self-administer or in the school office if the student is not able to self-administer.

Schools will establish procedures for permitting school staff to administer an auto-injector to a student with a known diagnosis of anaphylaxis where there is no preauthorization from the parent to do so. Schools will purchase at least one auto-injector annually for an emergency and follow emergency protocol in the event of an anaphylaxis.

Schools will not administer auto-injector to a student with a suspected anaphylactic reaction where there is no confirmed diagnosis. Should this situation arise the emergency protocol is to call 911 and request a "Life Support Ambulance".

(f) Monitor and Report

Schools will monitor and report on the number of students with anaphylaxis and any anaphylactic incidents to the CISND Board in aggregate form at a frequency and in a form as directed by the superintendent.

(g) Allergy Awareness, Prevention and Avoidance Strategies

Schools will establish and maintain allergy awareness, allergy avoidance and emergency prevention strategies as outlined in the school's Anaphylaxis Action forms & plans.

(h) Training Strategy

Schools will establish a training strategy and implement the strategy as early as possible in each school year. Training should be provided to:

- school staff who have supervisory responsibility.
- classmates of students with anaphylaxis in elementary schools; and
- peers of students with anaphylaxis in middle and secondary schools.

In consultation with the school Public Health Nurse, training should encompass information relating to:

- signs and symptoms of anaphylaxis.
- common allergens.
- avoidance strategies.
- emergency protocols.
- use of the auto-injector.
- identification of at-risk students.
- emergency plans.

(i) Raise Awareness

Schools will develop a communication plan to educate and raise awareness of parents, students, employees and volunteers about anaphylaxis.

September Anaphylaxis Letter

S a m p l e O n l y

As we begin a new school year, we would like to inform you that _____ Elementary School is an **allergen aware** school. There are children in attendance who suffer from **severe and life-threatening** allergies to certain foods, such as peanut and nut products. Exposure to the smallest quantities can cause severe life-threatening reactions. Anaphylaxis is a severe and life-threatening allergic reaction. The most common allergen triggers are food, insect stings, medications, exercise and latex. An anaphylactic reaction involves symptoms from two or more body systems.

We at _____ School would appreciate the co-operation of the entire school community in **NOT** sending any lunches or snacks that contain peanuts or nuts, which could potentially harm a child. Please make sure that all your children's caregivers are aware of the food restrictions. Please avoid sending food for birthdays or special occasions. There are many alternatives such as stickers and pencils.

If you have any questions, please talk to your child's teacher or the school staff.

We look forward to your co-operation in making this a safe year for all our students.

Sample School Newsletter Insert

We would like to inform you that there are children in our school, with severe life-threatening allergies to (name allergen). This is a medical condition (anaphylaxis) that causes a **severe reaction** to specific foods and can result in death within minutes. As this affects the entire school community, we are requesting that you **not** send foods with you child to school that contain the allergen,

If you have any questions, please contact your child's teacher or the school staff.

Thank you for your understanding and cooperation.

Best Practices

When setting up a school to be **allergen aware**, these are some “best practices”:

- identify students with allergen, upon registration/new diagnosis
- send home appropriate forms
- create a questionnaire asking pertinent questions regarding allergy
- have meeting with all parents of anaphylactic children
- in-service all staff about protocol, use of auto-injector and your school emergency procedures
- exchange information about school procedures, and what parental expectations are
- put up **allergy alert** signs at all entrances as well as doors of classrooms of the anaphylactic children
- send home letters to the whole school population, notifying parents that specific allergens are discouraged from entering the school
- follow up with a letter or a telephone call to the parents of a child that has brought an allergen into the school. (This should be performed by teacher or principal.)
- if a child brings an allergen in their lunch or snack, you should have that child eat in an area that is not normally used by the general student population. (An office or a conference room has been the general practice for most schools.)
- medication should be stored in a location that is easily accessible and **NEVER LOCKED**.

School Guide Checklist for Anaphylaxis Protocol

Anaphylaxis is life threatening and can appear suddenly without warning. Working as a team of parents and school staff, anaphylaxis can be a manageable condition. The anaphylactic student needs the support of the entire school community to stay safe and to prevent an anaphylactic reaction.

Here are some suggestions to make the school safer for students with anaphylaxis:

- Annual in-service about anaphylaxis and practice with an Epi-Pen trainer.
- Establish classroom rules: ***No Sharing Food.***
- Discourage allergic foods in the classroom.
- Send a letter to the entire school community that the allergic food is not sent to the school as a snack or lunch.
- Inform the student's parents well in advance of special events involving food.
- Establish a procedure for informing substitute teachers and support staff.
- ***Listen to and believe the student. He or she may be having a reaction before you see it.***
- Reassure the student that you are aware of his/her needs and that you know how to keep him/her safe.
- Train the student to self advocate regarding their allergy. E.g., how to approach an adult.
- Ensure that auto-injector is kept with the student, or the supervising teacher knows the location of the auto-injector.
- Be aware that there are cases of anaphylactic students being threatened with the allergen by bullies. School staff shall deal with such a situation as a serious incident.

Checklist for Parents of an Anaphylactic Student

- ☐ arrange meeting with principal to exchange information
- ☐ notify school personnel of your child's allergens in order of severities
- ☐ provide the school with a recent photograph of your child if they do not have one
- ☐ complete *The Student Emergency Procedure Plan*
- ☐ complete *The Request for Administration of Medication at School Form*
- ☐ provide the school with required number of auto-injectors and make sure they are not expired
- ☐ consider a Medic Alert ® bracelet for your child
- ☐ educate yourself about foods that can cause anaphylactic reactions
- ☐ stress with your child and the school staff that only foods from home are to be eaten
- ☐ keep up to date about education and new information in this field
- ☐ research field trip sites for allergen risks
- ☐ verify all posted information about your child
- ☐ inform school staff of any allergic reactions that occur outside of school hours

STUDENT EMERGENCY PROCEDURE PLAN

Re: ALLERGY ALERT INFORMATION - EPI-PEN

STUDENT NAME _____

ADDRESS _____

HOME PHONE _____

PARENT/GUARDIAN WORK PHONE _____

PARENT/GUARDIAN WORK PHONE _____

PARENT/GUARDIAN CELL PHONE _____

PARENT/GUARDIAN CELL PHONE _____

ALTERNATE EMERGENCY CONTACT PERSON _____

ALTERNATE EMERGENCY CONTACT PHONE _____

TEACHER _____

CLASS/GRADE _____ ROOM # _____

CARE CARD # _____

PHYSICIAN _____

PHYSICIAN'S TELEPHONE _____

Picture
of
Student

ALLERGY-DESCRIPTION: This child has a **DANGEROUS**, life-threatening allergy to the following items and to all foods containing them in any form in any amount (list items on line below):

AVOIDANCE: The key to preventing an emergency is **always ABSOLUTE AVOIDANCE of these foods. WITHOUT AN EPI-PEN THIS CHILD MUST NOT BE ALLOWED TO EAT ANYTHING THAT THEY DID NOT BRING THEMSELVES FROM HOME or WITHOUT THE CONSENT OF THE PARENTS/GUARDIANS.**

EATING RULES: *(List eating rules for child, if any, in this space)*

POSSIBLE SYMPTOMS:

- ☐ Flushed face, hives, swelling or itchy lips, tongue, eyes
- ☐ Tightness in throat, mouth, chest
- ☐ Difficulty breathing or swallowing, wheezing, coughing, choking
- ☐ Vomiting, nausea, diarrhea, stomach pains
- ☐ Dizziness, unsteadiness, sudden fatigue, rapid heartbeat
- ☐ Loss of consciousness
- ☐ Other _____

ACTION – EMERGENCY PLAN: At any sign of difficulty (e.g., hives, swelling, difficulty breathing):

- ☐ Administer **auto-injector** immediately
- ☐ Call 9-1-1
- ☐ Call parent/guardian
- ☐ Administer second auto-injector, within 5-15 minutes, or sooner, if symptoms do not improve
- ☐ (Even if symptoms subside entirely, this child **must** be transported to a hospital immediately)
- ☐ One person always stays with child; one person goes for help or calls for help.

Auto-injectors are kept in _____

Classroom/lunchroom/staff room/office/with student

Expiry date on auto-injector: _____

I agree to this information being placed in key areas around the school:

Parent/Guardian signature: _____

**REQUEST FOR ADMINISTRATION
OF MEDICATION AT SCHOOL FORM**

A. TO BE COMPLETED BY PARENT OR GUARDIAN

Name	Birthdate (Year, Month, Day)	
Parent or Guardian	Home Phone	Business/Cell Phone
Physician	Phone	

B. ATTACH A DUPLICATE PHARMACY LABEL OF PRESCRIBED MEDICATION

OR

**REQUEST THAT THE PRESCRIBING PHYSICIAN COMPLETE THE FOLLOWING:
Conditions Which Make Medication Necessary**

Name of Medication	Dosage	Directions for Use
1.		
2.		
3.		
4.		

Additional Comments (possible Reactions, Consequences of Missing Medication, Etc.)	
If prescribing epinephrine emergency medication, it must be a single dose, single-use auto-injector for school setting with a second injector, if parents have provided a second injector, which can be given 5-15 minutes if symptoms do not improve. An oral antihistamine will not be administered by school personnel.	Physician's Signature _____ Date

C. TO BE COMPLETED BY PARENT OR GUARDIAN

I request the school to give medication as prescribed to my child whose name is recorded below Name of Child: _____ Date: _____ I will Notify the School Promptly of Any Changes in Medications Ordered Signature of Parent or Guardian: _____ Additional information can be provided on reverse side.

D. EACH SCHOOL STAFF MEMBER WHO IS RESPONSIBLE FOR THE ADMINISTRATION OR SUPERVISION OF THE MEDICATION MUST REVIEW THE INFORMATION ON THIS CARD THEN DATE AND SIGN BELOW

Date	Signature	Comments, If Any

The information collected will be used for educational program purposes and when required, may be provided to health services, social services or other support services as required by law. The information collected on this form will be protected under the Protection of Information Privacy Act (PIPA). Questions about the collection and use of this information should be directed to the principal of your school or to the Superintendent of Schools, Nelson Diocese, Kelowna, B.C., (250) 762-2905.

Additional Information:

Date Approved: November 2009
Date(s) Revised: August 2023
Date Reviewed: