



Anaphylaxis & Medical Plan

1. INTRODUCTION

- 1.1. This policy applies to all divisions of Sudbury Christian Academy (SCA), including its Early Learning Centre (ELC), its elementary (JK-8) division, and its secondary (9-12) division.

2. COMMITMENT STATEMENT

- 2.1. Sudbury Christian Academy understands the importance of providing a safe environment for children with allergies and having emergency procedures in place to protect them.
- 2.2. The following procedures will be in place to protect the children with severe allergies in our care from incidence of anaphylactic reactions.
- 2.3. All staff will possess a current First Aid certificate, including CPR.

3. CHILDREN WITH ANAPHYLACTIC ALLERGIES

- 3.1. Children diagnosed with severe anaphylactic allergies are required to supply their own EpiPen when enrolled in any Sudbury Christian Academy program.
- 3.2. When a child is being enrolled and has a life-threatening allergy, staff will meet with the parents/guardians of the child, develop an Anaphylaxis Emergency Plan that minimizes the risk of the child coming into contact with the identified allergen.
- 3.3. Best practices identify that the EpiPen remains on site to be readily available in the event of an emergency.
- 3.4. Educators are required to bring the child's EpiPen with them, in an approved container, wherever they go.
- 3.5. Academy educators including volunteers placement students are to be made aware of the children in the environment who are at risk of a life-threatening experience due to allergies at the time of orientation, and whenever a change in the Anaphylaxis Emergency Plan is made.
- 3.6. Signs and symptoms of an anaphylactic allergy will be identified on the child's individual Anaphylaxis Emergency Plan.

- 3.7. The administrative staff will review the files of children with identified allergies at least yearly, and parents/guardians will be asked to advise the office of any new allergies, of any change to the child's Anaphylaxis Emergency Plan or treatment or if their child has outgrown an allergy and no longer requires medication.
- 3.8. Up-dated forms for each child will be provided to the parents/guardians yearly.

4. STAFF RESPONSIBILITIES

- 4.1. Staff will help to reduce the risk of exposure to anaphylactic causative agents by identifying and eliminating any food or sensory products with contain or have been contaminated with known allergens.
- 4.2. Staff will stay in regular, direct contact with the parents of a child with anaphylactic allergies.
- 4.3. Staff will review this information and these strategies for reducing exposure to allergens, which will be revised as necessary depending on the life-threatening allergies of the child(ren) enrolled at the Academy.
- 4.4. Staff will participate in training regarding procedures which will be followed in the event of a child having an anaphylactic reaction -- provided upon hire and reviewed annually or as required.

5. NUT SAFE ENVIRONMENT

- 5.1. The Academy is a nut safe environment at all times, regardless of known allergies at any given time.
- 5.2. Parents/guardians are advised not to pack for lunches or bring from home any food items which contain peanuts or tree nuts.
- 5.3. If the academy were to enroll a child who has other severe allergies, such as to latex, the same procedure will be followed.
- 5.4. Staff will support this policy by regularly screening the contents of lunches packed from home during lunchtime monitoring.
- 5.5. The goal of our policy is to provide a safe environment for children with life-threatening allergies, in an attempt to reduce the risks to as low as is reasonably achievable.

6. COMMUNICATION PLAN

- 6.1. Strategies will be followed to reduce the risk of exposure to anaphylactic causative agents

- 6.2. The communication plan for the provision of information on any child with life-threatening/anaphylactic allergies will be as follows:
- 6.2.1. At intake, with the new family identifying a child with life-threatening allergies, the administration will notify all staff in their division of the allergy and severity. It is important that educators add this child's name to the existing allergy list.
 - 6.2.2. Allergy list will be posted in each program room, the kitchen where food is prepared, and all spaces where children may be present; listing the names of all children with allergies to food or food intolerances, regardless if they are anaphylactic.
 - 6.2.3. Confirmed enrolment, all parents/guardians, staff, placement students, and volunteers will be informed of a child with an anaphylactic allergy.
 - 6.2.4. Anaphylaxis emergency plans are to be posted in each program room, above the first aid kit, in each educator's emergency binder of the program the child attends, the office and the kitchen, where meals are prepared.
 - 6.2.5. Identified anaphylactic children will eat only the food that is prepared and labelled by the meal provider for their consumption in the Early Learning Center.
 - 6.2.6. This anaphylaxis emergency plan posting will be reviewed by the team of educators, parents/guardians and administrative staff prior to the child starting Sudbury Christian Academy.
 - 6.2.7. Each anaphylaxis emergency plan will be read and signed off by all staff, placement students and volunteers who will be in contact with the identified child.
 - 6.2.8. Parents will be asked to demonstrate the proper use and handling of the EpiPen directly to program educators.
 - 6.2.9. EpiPens will be carried by the child's educator in a specific, labelled container within their emergency bag that is carried with them at all times.
 - 6.2.10. The individual anaphylaxis emergency plan will identify the emergency procedure for that specific child with a life-threatening allergy.

7. ANAPHYLACTIC EMERGENCY PLAN PROCEDURES

- 7.1. Sudbury Christian Academy has developed policies and procedures that will be followed for the development of individualized plans and

emergency procedures for each child with an anaphylactic allergy, in consultation with a parent of the child and any regulated health professional who is involved in the child's health care and who, in the parent's opinion, should be included in the consultation]

7.2. Strategies to Reduce the Risk of Exposure to Anaphylactic Allergens

- 7.2.1. The emergency procedure will include the immediate use, following the directions of the parent/ guardian, of the EpiPen.
- 7.2.2. An educator or office administration will call 9-1-1 immediately after the Anaphylaxis Emergency Plan procedures have been initiated.
- 7.2.3. An educator will go in the ambulance with the child, and remain with the child at all times until a parent/guardian is available.
- 7.2.4. Parents/guardians or the emergency contact person will be notified at the same time of the Anaphylaxis Emergency Plan is being implemented.
- 7.2.5. The Serious Occurrence Policy and Procedures will be followed after the incident is passed the emergency state.
- 7.2.6. A follow up of why there was a life-threatening situation will be reviewed as well as the review of the procedures followed.

7.3. Lists of causative agents will be revised and shared with all involved if necessary.

7.4. If at any time the parent/guardian informs the Academy that his/her child no longer requires an EpiPen; a letter from a physician is required.

7.5. Events resulting in activating the Anaphylaxis Emergency Plan will be reported to the HOS and the board of directors immediately.

8. ANAPHYLACTIC EMERGENCY PLAN PROCEDURES

8.1. Field Trips

8.1.1. In addition to the current field trip safety precautions, the following procedures will be in place to protect the identified anaphylactic child:

8.1.2. A Severe Allergy Information/Health Care Plan section will be included in the registration permission forms for all field trips in which the details of the anaphylactic child's allergies, symptoms and treatment can be recorded. A copy of this information must be available at any time during the trip.

- 8.1.3. All supervisors, educators, volunteers and placement students to be aware of the identity of the anaphylactic child, the allergens, symptoms and treatment.
- 8.1.4. Ensure that all educators are trained in the use of Epipens before being assigned responsibility for anaphylactic children.
- 8.1.5. Ensure all participants have access to a telephone, cell phone or radio communication in case of emergency.
- 8.1.6. If it's felt that the risk factors are too great to control, the anaphylactic child may be unable to participate in the field trip. Academy staff will consult with parents regarding this decision.

8.2. Holiday and Special Celebrations

- 8.2.1. Following procedures will help protect the anaphylactic child when there are holidays and special celebrations for the children:
 - 8.2.1.1. Parents/guardians will be notified in advance of any special event involving food.
 - 8.2.1.2. If foods are to come into the Academy from home, we will remind parents regarding the anaphylactic child's allergens and insist on an ingredient list.
 - 8.2.1.3. Limit the anaphylactic child to food brought from home or from the designated food supplier.

8.3. Allergens in the Classroom and Activities

- 8.3.1. Allergic reactions may or may not be the only result of exposure at mealtimes. All educators must be made aware of the possible allergens present in curricular materials such as:
 - 8.3.1.1. Play-Doh
 - 8.3.1.2. Bean bags, stuffed toys (peanut shells are not used)
 - 8.3.1.3. Counting aids (beans, peas are not used)
 - 8.3.1.4. Toys, books and other items that may have become contaminated in the course of normal use
 - 8.3.1.5. Special seasonal activities, such as Easter eggs and garden projects.

9. CHILDREN WITH MEDICAL NEEDS

- 9.1. When a child is enrolled with identified medical needs, staff will meet with the parents/guardians of the child, the child's health care professional if

necessary and develop an Individualized Plan. The plan includes steps to be followed to minimize the risk to the child being exposed to any causative agents or situations that may exacerbate a medical condition or cause an allergic reaction or other medical emergency.

- 9.2. The Individualized Plan will also include a list of any medical devices required, the instructions for use of the medical device, and procedures to be followed in the event of a medical emergency or allergic reaction.
- 9.3. A full and comprehensive description of support required for the child with medical needs will be included in the Individualized Plan, as well as any additional procedures to be followed when a child with a medical condition is part of an evacuation or participating in an off-site field trip.
- 9.4. Sudbury Christian Academy is required to maintain the confidentiality of a child's medical history including diagnosis. Sensitive or confidential medical information and detailed reports from medical professionals will not be included in the plan unless consent, in writing, has been given by the parent.
- 9.5. All educators, including volunteers and placement students, are to be made aware of the children in the environment who have an Individualized Plan at the time of orientation, annually and whenever a change in the plan is made.
- 9.6. A review of each Individualized Plan supports the child's ability to participate in the program and provides educators with all necessary information to deal with any medical situation pertaining to the child.
- 9.7. The Individualized Plans are reviewed with staff, volunteers and students, and will be implemented and monitored for compliance and interventions in accordance with Monitoring and Compliance Policies & Procedures.
- 9.8. The administrative staff will review the files of children with identified allergies or medical needs at least annually. The parents/guardians will be asked to advise the office of any new allergies, or any new changes to the child's Individualized Plan or treatment. Parents/guardians will notify if their child has outgrown an allergy and therefore no longer require medication. All IPs for each child will be provided to the parents/guardian annually for their review..
- 9.9. Educators will help to reduce the risk of exposure to causative agents or situations that may worsen a condition by identifying and eliminating the risks from the program rooms, and by staying in regular, direct contact with the parents of a child with medical needs.

9.10. This information and these strategies for reducing exposure to situations will be reviewed as necessary depending on the medical needs of the child enrolled.

10. GLOSSARY

10.1. *Licensee*: The individual or corporation named on the licence issued by the Ministry of Education responsible for the operation and management of the child care centre.

10.2. *Staff (Employee)*: Individual employed by the licensee (e.g. program room staff).

10.3. *Student*: Individual who is enrolled in an education program/school and is completing a placement.

10.4. *Volunteer*: An individual who participates in the child care program and interacts with children in care but is not paid by the licensee (e.g. parents assisting on an occasional or recurring basis with child care programming, such as excursions, field trips, etc.).

11. REGULATORY REQUIREMENTS: ONTARIO REGULATION 137/15 ANAPHYLACTIC POLICY 39

(1) Every licensee shall ensure that each child care centre it operates and each premises where it oversees the provision of home child care or in-home services has an anaphylactic policy that includes the following:

- a) A strategy to reduce the risk of exposure to anaphylactic causative agents.
- b) A communication plan for the dissemination of information on life-threatening allergies, including anaphylactic allergies.
- c) Development of an individualized plan for each child with an anaphylactic allergy who,
 - i) receives child care at a child care centre the licensee operates, or
 - ii) is enrolled with a home child care agency and receives child care at a premises where it oversees the provision of home child care or in-home services.
- d) Training on procedures to be followed in the event of a child having an anaphylactic reaction.

(2) The individualized plan referred to in paragraph 3 of subsection (1) shall,

- a) be developed in consultation with a parent of the child and with any regulated health professional who is involved in the child's health care and who, in the parent's opinion, should be included in the consultation; and
- b) include a description of the procedures to be followed in the event of an allergic reaction or other medical emergency.

Sudbury Christian Academy Early Learning Centre & School Age Divisions

Date Policy and Procedures Established: June 4, 2020.

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