

Addendum to Parent Handbook

Casa Vera Montessori School
2000 Keele Street, Toronto, ON M6M 3Y4

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ANAPHYLACTIC POLICY

Definition of Anaphylaxis

Anaphylaxis is a severe allergic reaction that can be fatal, resulting in circulatory collapse or shock. The allergy may be related to food, insect stings, medicine, latex, etc.

Purpose of the Policy and Procedures

Casa Vera Montessori School is committed to taking a pro-active position regarding the prevention of anaphylaxis. The purpose of the policy is to provide a process for dealing with anaphylaxis in the centre.

Strategy to Reduce Risk of Exposure

- Children with extreme allergies that the centre cannot accommodate will be asked to bring their own food from home.
- Foods with “May Contain” nut warning will not be served
- All labels will be read by a staff member prior to served
- Staff purchasing food on behalf of the centre must read food ingredient labels every time they purchase a product
- Any persons/company supplying food to the child care will be notified of all life threatening allergies in the centre. List of allergies will be revised as necessary
- All children and staff will wash hands before and after handling food
- Children/staff/volunteers will be insured to not share food
- All surfaces will be cleaned with a cleaning solution (water and germ destroyer approved by Public Health) prior to and after preparing and serving foods
- All cleaning supplies, medicines and any other products that may be of danger and/or commonly produce allergic reactions will be stored away
- Extra special supervision of anaphylactic children during eating (i.e. sitting opposite/next to staff)
- On the bus during field trips children with anaphylaxis will sit within view of staff member
- Playground areas will be checked and monitored for insects such as wasps. Custodian will be notified immediately and children will be forbidden to play in this area

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- On offsite trips, parents will be notified and asked to send an extra Epi-Pen
- Staff will take cell phone on all excursions
- Consent by the child's physician is required for any child carrying their Epi-Pen

Communication Plan for the Dissemination of Information

- Parents will be informed by memo of all allergies in the centre
- A list of all allergies and suggestions of healthy snacks will be handed out
- List of allergies will be posted in:
 - each cooking and serving area
 - each play area or play room and
 - any other area in which children may be present

Where it is not practical to post a food allergy and restriction list in a particular area (such as an outdoor playground), the list is brought to these areas and staff is aware of its location.

- Parents with children with anaphylaxis will provide an individual plan for their child prior to enrolment

Rules for bringing meals or snack from home

Bagged Lunches provided by the parents who choose to bring their own lunches **must meet the nutritional guidelines** of Canada's Food Guide. Please refer to details as in our Bagged lunches policy.

Food and Drink Containers

All food and drink containers must be **labeled** with the **child's name** to ensure each child receives the correct nourishment for him/her.

Back up Procedures (forgotten lunches)

If child whose parents choose to bring their own lunches comes without the lunch, the staff will provide back-up lunch items to the child as soup and/or crackers from back-up package.

Staff may decide to provide catered lunch if any child who is getting lunch from the school is missing that day or if lunch comes in bulk and there is still enough servings left.

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Parents will be notified that if lunch is forgotten repeatedly, the school has the right to remove the child from the Bagged Lunch program. In this case, the parents will have to get and pay for food provided by school.

Teachers are mandated under the Ministry of Education to inspect the bagged lunches of preschool children to ensure they meet the quality standards of Canada's Food Guide and will do so daily.

If lunch content is questionable, teachers will first speak with parents to advise of concerns and work toward a solution.

If bagged lunch content continues to be questionable, the school reserves the right to remove the student from the Bagged Lunch program. In this case, the parents will have to get and pay for food provided by school.

Parent and Guardian's Responsibilities

- The bagged lunch adheres to Canada's Food Guide.
- Lunch is provided in a labelled lunch bag with an ice pack.
- Foods that may have come in contact with nuts are not allowed in the child's lunch.

Individual Plan and Emergency Procedures

Prior to enrolment, the Parent/Guardian will meet with the Principal to provide input for the child's individual plan emergency procedure. This plan will include but is not limited to:

- Description of the child's allergy
- Monitoring and avoidance strategies
- Signs and symptoms of an anaphylactic reaction
- Child care staff roles and responsibilities
- Parent/Guardian consent or administering allergy medication, sharing information and posting Emergency Plan
- Emergency Contact information
- Location of Epi-Pen and back up Epi-Pen
- Physicians note to carry own Epi-pen

Parents are requested to advise the Principal if their child develops an allergy, requires medication and/or of any changes to the child's individual plan or treatment. Individual Plans will be revised yearly and as directed by the parent or physician.

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Copies of Individual Plans are in each child's emergency bags and are also posted in every room operated by the child care, including child care office.

A person having an anaphylactic reaction might have ANY of these signs & symptoms:

- **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 & 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, headache, feeling of "impending doom"

Early recognition of symptoms & immediate treatment could save a child's life.

Act quickly. The first signs of a reaction can be mild, but symptoms can rapidly worsen

Asthmatic: Child is at greater risk. If child is having a reaction and has difficulty breathing, give epinephrine auto-injector before asthma medication.

Food: The key to preventing an anaphylactic emergency is absolute avoidance of the allergen. People with Food Allergies should not share or eat unmarked/bulk foods or products with a "*may contain*" warning.

Emergency Protocol

- One person stays with the child at all times
- One person goes for help or calls for help
- Follow emergency procedures as outlined in child's individual plan (i.e. **administer epinephrine** at first sign of reaction occurring in conjunction with a known or suspected contact with allergen. Give a second dose in 10-15 minutes or sooner **IF** the reaction continues or worsens.)
- **Call 911.** Tell them a child is having a life-threatening allergic reaction – use word "anaphylactic". Request an ambulance immediately. Have the child transported to hospital even if symptoms have subsided. Symptoms may occur hours after exposure to allergen.
- **Call contact person.**

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- **Escort child in ambulance** and remain with child until parent or guardian arrives. The child's back-up Epi-pen auto injector should be taken.
- Administered Epi-pen is to be given to hospital employee or child's parent for disposal.

Training

- Prior to employment and annually (each September) all staff will be trained by Parent/Guardian or physician of each child with anaphylaxis enrolled in the centre.
- Volunteers and students will be given a handout and the Principal or parent will give training.
- Volunteers and Students are not permitted to administer medication unless under extreme circumstances (i.e. staff member is unconscious)
- Training will include procedures to be followed in the event of a child having an anaphylactic reaction, recognizing the signs and symptoms and administering medication
- Staff will conduct a check to confirm child/children have their required medication with them before each transition (i.e. moving from the class or the gym, leaving the school, etc.)
- The staff will be required to sign and date that they have received training
- The school will keep a log on file of all training dates, trainers and staff signatures

Medication must be kept in a locked box inaccessible to children. However, in the case of asthma medication or emergency allergy medication licensees may allow children to carry their own asthma medication or emergency allergy medication in accordance with the child care centre's medication administration policy and with a parent's permission for the child to self-administer asthma or emergency allergy medication kept on file. This includes all medication that must be administered quickly in an emergency, such as antihistamines, epinephrine and puffers.

It is important to confirm that children who carry their own asthma or allergy medication have the required medication in their possession prior to leaving the child care centre (for example, transition to school, leaving on a field trip).

If children do not self-administer asthma or emergency allergy medication, staff must ensure it is easily accessible at all times but kept out of children's reach.

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Emergency allergy and asthma medication should not be locked up with other medication. Staff must also ensure that emergency asthma and allergy medication is in the staff's

Review

The anaphylactic policy, the individual plan for a child with anaphylaxis and the emergency procedures in respect of the child will be reviewed by:

- all employees before they begin their employment
- volunteers and students before they begin providing care or supervision of children
- all employees, volunteers and students at least annually after the first review and at any other time when substantive changes are made to the policy, plan or procedure