

4545 Anaphylaxis

Policy 4545

STATUS: ADOPTED

ANAPHYLAXIS

Board Approved: October 21, 2009

Last Reviewed: June 19, 2013; March 2014; June 22, 2016

Description:

Anaphylaxis is a sudden, severe allergic reaction that may be fatal. Anaphylactic reaction requires that immediate medical measures are taken, in order to minimize the affect of the allergen until emergency medical attention is available.

The Board of Education for School District #59 (Peace River South) has a duty of care to students who may experience a life-threatening allergic reaction while under the care and supervision of the school. While the School District cannot guarantee an allergen-free environment, it is expected that school staff, parents and children will take important steps to minimize the risk of potentially fatal anaphylactic reactions, without depriving the child with anaphylaxis of normal peer interactions or placing unreasonable restrictions on the activities of other children in the school.

The Board believes that the child and the parent share primary responsibility for avoiding the allergen(s) that may cause anaphylaxis. The development and maintenance of a safer school environment for anaphylactic students are dependent on the cooperation of parents, students, the school and health care providers. They will work together to develop and communicate to school staff the Anaphylaxis Emergency Plan for a student with the risk of anaphylaxis.

Each school will develop practices that create and maintain as safe and healthy environment as possible for students with anaphylaxis. The practices will include accurate records, the education of staff and students on the signs and symptoms of an anaphylactic reactions and the development of an emergency response plan. These plans will be considered in the context of the child's age and maturity. As children mature, they should be expected to take increasing personal responsibility for avoidance of their specific allergens.

Staff will be trained to administer an epinephrine auto-injector i.e., Epi-pen®, Twinject®, Alleject® and to respond as documented in the Emergency Plan.

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Description:

Within the BC Anaphylactic and Child Safety Framework, when a student is identified as having a life-threatening allergy, the school will work with the parent(s) and student to prevent contact with the allergen. The school will also work with the parent(s), student and health care provider to establish an emergency plan if the student were exposed to the allergen and was experiencing an anaphylactic reaction.

Parent

- inform teacher(s) of the allergy, the typical symptoms evident, the emergency treatment, and the location of the epinephrine auto-injector i.e., Epi-pen®, Twinject®, Alleject®;
- keep the medication up to date;
- maintain open communication with the classroom teacher and Principal in providing a safer learning environment for their child;
- ensure student wears a Medical Alert bracelet or necklace;
- ensure student with food allergies eats only food and drink from home or food and drink approved by the parent/guardian;
- ensure the epinephrine auto-injector is carried on all field trips and attend field trips and/or arrange for a back up vehicle when deemed necessary;
- review the child's responsibilities with the child frequently;
- Work with the staff to complete the Anaphylaxis Emergency Plan.

Student with Anaphylaxis:

- wear a Medical Alert bracelet or necklace;
- eat only food and drink from home or food and drink approved by the parent/guardian;
- take responsibility for checking labels and monitoring intake (age appropriate)
- wash hands before and after eating;
- learn to recognize signs and symptoms of an anaphylactic reaction;
- ensure the epinephrine auto-injector is carried on all field trips;
- promptly inform an adult, as soon as exposure occurs or symptoms appear.
- is not be expected to be fully responsible for self-administration of an epinephrine auto-injector; assistance may be required.

School Responsibilities:

- Principal:
 - maintain a procedure at registration for identification of students at risk for anaphylaxis and ensure that the information is recorded in the student information system
 - work with the parent, student and health personnel to complete the Anaphylaxis Emergency Plan involving consultation with health care professionals. These plans will include:
 - Name
 - Contact Information
 - Diagnosis
 - Symptoms
 - Emergency procedures and treatment
 - Physician section
 - in consultation with Public Health, provide training to any school personnel expected to have supervisory responsibilities for the child, including volunteers where deemed necessary, so that they may respond adequately and confidently to an anaphylactic emergency (Example: auto-injector training)
 - depending on age and maturity, there may be situations where peers could be trained to respond adequately and confidently to an anaphylactic emergency (Example: auto-injector training)
 - ensure that training occurs at least once per year at the elementary level and twice a year at the secondary level as staff changes.
 - in consultation with parent(s), student and Public Health, provide allergy awareness education to classmates;
 - ensure staff know the severity of the allergy, and the symptoms of exposure to the allergen;
 - store medications in easily accessible, unlocked locations and ensure that staff is familiar with these locations;
 - speak to parents and have them indicate when students are able to self-carry their medication. Having a second dose of medication stored in the school is recommended
 - establish procedures for off site and extra curricular activities
 - establish a disciplinary approach for dealing with bullying and threats to student with anaphylaxis;
 - inform parents/guardians that a student with life-threatening allergies is attending the school and ask for their support.
 - ensure that signage is present in the school and classroom indicating an allergy-aware space;
 - report to the Superintendent on the numbers of students with anaphylaxis and the number of anaphylactic incidents which will be reported to the Board of Education in aggregate form.

- Teacher
 - encourage the students to wash their hands and desktops after snacks and meals;
 - encourage students NOT to share food with others.

- encourage other students not to bring allergenic foods to the classroom environment, or onto the bus;
- do not use allergenic food in crafts or instructional aids;

- when on field trips, take an epinephrine auto-injector or ensure the student is self-carrying, the student's medical alert information, a copy of the emergency plan and a cell phone;
- ensure students in the class receive education about the risk of anaphylaxis;
- ensure that appropriate signage is in the classroom to educate about anaphylaxis and procedures such as handwashing.

Emergency Plan:

- a copy of the emergency plan to be kept in the student's cumulative file and in the teacher's classroom;
- know the location of the student's epinephrine auto-injector when in the school or off-campus;
- know the effective time for a dose from the epinephrine auto-injector, administer a second dose 5 to 15 minutes after the first dose if symptoms have not improved;
- know the number of doses that may be required if transportation to hospital over longer distances were necessary.

Emergency Response (typical):

- refer to student's emergency plan;
- know your 911 address before arrival;
- administer the epinephrine auto-injector;
- call 911 and begin an emergency response;
- notify parent;
- have ambulance transport student to the hospital, or if over a longer distance, arrange to meet the ambulance enroute;
- notify the Board Office.

Resources:

British Columbia Anaphylactic and Child Safety Framework
Ministry of Education 2007 (minor revision 2013)

Anaphylaxis in Schools & Other Settings
Canadian Society of Allergy and Clinical Immunology 2005

www.allergyaware.ca