

POLICY

It is the policy of the Upper Grand District School Board to minimize risks for students who have life-threatening allergies (anaphylaxis) through the development and implementation of school Anaphylactic Management Plans.

Administrative Detail

1. This is an Interim Policy (effective January 1, 2006). It is subject to a review of Policy #509 Health Support Services.
2. It is the responsibility of the appropriate Superintendent to administer this policy.
3. It is the responsibility of Principals to implement this policy and procedures.
4. Principals may consult with the Wellington-Dufferin-Guelph Public Health and the Board's Health and Safety Officer when establishing in-school procedures in support of this policy.
5. This policy shall be administered in accordance with Policy and Procedures Manual # 509 Health Support Services and the Health Support Services Resource Handbook, and Sabrina's Law – An Act to Protect Anaphylactic Pupils.

A. GENERAL

Policy # 509 Health Support Services and Procedures #509-A, and the Health Support Services Resource Handbook shall be consulted when reviewing current school plans and implementing strategies to help ensure the safety of anaphylactic students in schools. This interim Policy and additional direction and strategies are designed to ensure compliance with Sabrina's Law.

B. THE ROLE AND RESPONSIBILITIES OF THE PRINCIPAL

1. Principals shall:
 - a) Ensure that parents/guardians of each student who has an anaphylactic allergy are asked to supply information on the student's life-threatening allergy at the time of registration, provide appropriate medications, and ensure that the information is kept up-to-date throughout the school year.
 - b) Review and revise, as necessary, each anaphylactic student's Life-Threatening Management Plan (Health Support Services Policy Form # 509-4) to ensure that these plans comply with this policy and legislation and include:
 - i. information on the type of life-threatening allergy,
 - ii. school monitoring and avoidance strategies,
 - iii. current treatment (medications),
 - iv. an emergency action plan which is accessible in the school,
 - v. copies of any prescriptions,
 - vi. instructions from the student's physician, and
 - vii. current emergency contacts.

(Note: Principals should attach additional information to the Life-Threatening Management Plan if not included on the form.)

- c) Review and revise, as necessary, their school plans and strategies to reduce the risk of exposure to anaphylactic causative agents in classrooms and common school areas. (See Policy and Procedures #509 Health Support Services, and the Health Support Services Handbook.)
- d) Ensure that a communications plan is in place to disseminate information on life-threatening allergies to students, parents, employees and volunteers on a regular basis throughout the school year (newsletter inserts, letters, etc).
- e) Ensure that all employees and others who are in direct contact with pupils on a regular basis are provided with appropriate information on each anaphylactic student which will include identification of the student(s), the type of allergy, monitoring and avoidance strategies in place, and appropriate treatment procedures for an emergency.
- f) Provide training for all employees and others who are in direct contact with anaphylactic students on a regular basis on emergency procedures such as the administration of an epinephrine auto-injector (Epi-Pen™).
- g) All anaphylactic students should carry an epinephrine auto-injector (Epi-Pen™) with them at all times.
- h) Ask parents to provide, where possible, at least one additional epinephrine auto injector (Epi-Pen™) where it will be stored in a readily accessible location in the school.

Note: Upper Grand District School Board staff will not administer the second dose of the Twinject™ epinephrine auto injector (manual injection) in compliance with Board policy (Policy and Handbook #509 – Health Support Services) and its collective agreements as it is considered to be an invasive procedure. Staff will administer Epi-Pen™ and the first, or auto-injector portion of the Twinject™. Wellington-Dufferin-Guelph Public Health will not provide training to Board staff on the use of the manual portion of a Twinject™.

C. EMERGENCY ADMINISTRATION OF MEDICATION

Note: While an individual may know how to self-administer epinephrine, he or she may not be capable to do so during a reaction.

1. If a school employee has reason to believe that a student is experiencing an anaphylactic reaction, the employee may administer the appropriate medication prescribed to the student even if there is no preauthorization to do so by an individual (parent/guardian/student) with the capacity to consent to treatment under the Health Care Consent Act.
2. No action for damages against an employee shall be instituted for any act done in good faith or for any neglect of default in good faith in response to an anaphylactic reaction in accordance with the legislation and this policy and procedures unless damages are the result of the employee's gross negligence

D. STRATEGIES FOR CREATING AN ALLERGEN-SAFE SCHOOL

1. The Board cannot assume responsibility for providing an "allergen-free" environment. The risk of accidental exposure can be significantly reduced although it can never be completely removed.
2. While the key responsibility lies with anaphylactic individuals and their families, in the case of young students, the school community must also be aware and special care must be taken to avoid allergens.
3. The Health Support Services Handbook contains strategies for schools to reduce the risk of accidental exposure to an allergen.
4. Anaphylactic students should be able to choose without penalty not to participate in food preparation or consumption.
5. Vending machines should not be stocked with products that contain potential allergens (e.g. nut products). The Board will request that its suppliers exclude such products from school vending machines.
6. Fund-raising activities should avoid the use of products containing potential allergens (e.g. nut products).

7. Secondary Schools

Secondary schools should review the monitoring and avoidance strategies listed in the Health Support Services Policy and Handbook, and adapt those that are compatible with the secondary school setting. In addition, the following should be considered:

- a) Procedures must be developed that take into account the age, maturity, and responsibility level of anaphylactic students.
- b) Secondary students with a risk of anaphylaxis should carry an epinephrine auto injector (Epi-Pen™) at all times.
- c) Cafeterias should not be stocked with products that contain potential allergens (eg. peanuts/tree nuts).
- d) Ingredient lists should be available to students.
- e) Food used in Family Studies classes should be as allergen-free as possible.