



POLICY 7340  
**ALLERGIES AND LIFE-THREATENING  
ALLERGIES IN SCHOOLS**

Adopted: 2008-06-24	Reviewed: n/a	Amended: 2010-04-13 2018-10-09
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**POLICY**

SUBJECT: **ALLERGIES AND LIFE-THREATENING ALLERGIES IN SCHOOLS**

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The Board of Education for School District #78 believes that children who have anaphylaxis or any life-threatening allergy have a right to a safe, healthy learning environment. In accordance with this policy and its regulations, the safety, health and well-being of students is a shared responsibility of parents, school and district personnel and the Board.



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**REGULATIONS**

SUBJECT: **ALLERGIES AND LIFE-THREATENING ALLERGIES IN SCHOOLS**

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**Definition:**

Anaphylaxis is a sudden, severe, and potentially fatal allergic reaction that requires immediate medical emergency intervention.

**Signs and Symptoms:**

The signs and symptoms of a severe allergic reaction can occur anywhere from within minutes to hours of exposure to an offending substance. Warning signs include but are not limited to:

- Hives, swelling rash or itching of the skin.
- Wheezing, shortness of breath, throat tightness, coughing, chest pain, problems swallowing, and nasal congestion.
- Nausea, pain/cramps, vomiting, and diarrhea.
- Pale/blue color, weak pulse, passing out, dizziness, and shock.
- Anxiety, feeling of impending doom, headache, and uterine cramps.

**Responsibility:**

The Board will ensure through policy that all employees receive the necessary training and instruction regarding preventative and emergency response to anaphylactic and other allergic reactions.

The district will ensure that all school leaders receive the necessary training and instruction in mitigating and responding to anaphylactic and other allergic reactions.

The principal of each school will ensure that all staff are trained and informed regarding their responsibility in dealing with anaphylactic and other allergic reactions, and that the school's policies and procedures are in place for both preventing and responding to such reactions.

**General Procedures:**

Each school will have an anaphylactic policy that identifies:

- Staff training commitments.
- Staff's responsibility to respond.

- The development and implementation of individual student emergency response plans.
- Procedures for informing TTOCs and volunteers.
- The location of and quick access to necessary medications.
- The meaningful involvement of parents in developing and implementing the emergency response plan.

#### **Identifying Students/Monitoring and Reporting:**

- At the beginning of each school year, using the district registration form, parents will be asked to report on their child's medical conditions, including whether the child has a medical diagnosis of anaphylaxis. Information on a student's life threatening conditions will be recorded and updated on the student's Permanent Student Record annually.
- Parents and students will provide schools with all the necessary information and details regarding any medical conditions and/or allergies. (Appendix A). This form will be revisited annually to ensure the information is updated regularly.

Principals will report information on each anaphylactic incident to the Board of Education via the superintendent in aggregate form using the Schools Protection Program Incident Form.

#### **Emergency Procedure Plans:**

- For anaphylaxis and all other significant medical concerns, schools will work cooperatively with the health nurse, parents, students and pertinent staff to develop and implement an emergency response plan that adequately addresses:
  - Pertinent medical information and symptoms.
  - Parent and student's responsibility.
  - Mitigating factors.
  - Necessary emergency responses in the event of a reaction.
  - Staff awareness and training needs.
  - Location and access to necessary medications.
  - Necessary preparations for off-site activities.
- Parents will provide all necessary equipment and medical resources so the school can respond to emergency situations as per the emergency medical plan.
- Students with identified medical conditions will wear a Medic Alert bracelet for all significant medical conditions that require particular responses in the case of an emergency.
- Information on all students with medical conditions will be posted in an agreed to visible area of the school so all volunteers, TTOCs and staff have access to this information as needed. Medical information and picture (Appendix B) will also be included in the Teacher's day planner for TTOCs and volunteers.

- When deemed necessary by the team developing the student's emergency response plan, the parents of all students or of a particular group of students will be notified of a particular student's medical condition and of their needed cooperation in ensuring that the school environment remains a safe place.(Appendix C)
- **Student's medical conditions will be considered when planning field trips and off-site activities, with all the necessary preparations as per the student's emergency response plan.**
- Each school will have a medical emergency protocol in place that will include:
  - Administering an auto-injector at first sign of reaction (Appendix D).
  - Calling emergency medical assistance, 911, (Appendix E).
  - Calling parents.
  - Administering a second dose.
  - One person remains with the student at all times
  - One person goes for help or calls for help
  - Student is transported to hospital by ambulance (the effects of the auto-injector may not last, and the student may have another anaphylactic reaction)
- On or before October 30th of each year, schools will submit to the Superintendent or designate, an annual inventory of student emergency response plans. This inventory will provide the student's name, medical condition, date the response plan was developed or reviewed, and the date of expiration of all necessary medications.

**Procedures for Permitting School Staff to Administer an Epinephrine Auto-Injector: No Preauthorization from parents:**

- Schools will keep records of communication with parents/guardians regarding the Parental Consent Form (Appendix B). Documentation will be made of each date of communication or when communication was initiated. If there was no verbal contact, documentation will be made that a message was left on the answering machine or email.
- **NOTE:** After three attempts to obtain the Parent Consent Form (Appendix B) from the parents/guardians (communication documented) and the form is not returned, the parents/guardians must be notified that the Standard Procedure of Care for an anaphylactic or diabetes episode is:
  1. Call 911; and
  2. Contact the child's parents/guardians

**Procedures: No Confirmed Diagnosis:**

- Schools will **not** administer epinephrine 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".

**Provision and Storage of Medication:**

- Parents/Guardians will provide a minimum of two epinephrine auto injectors available for staff access and use in the case of an emergency involving any persons in the facility with a need for the immediate administration of such medication.
- Schools will provide parents with MedicAlert application brochure and inform parents of the MedicAlert “No Child Without” program which provides free MedicAlert bracelets for children up to 14 years of age.
- Children at risk of anaphylaxis who have demonstrated maturity (as determined by the child’s parents/guardians) should carry one auto-injector with them at all times and have a back-up auto-injector at the school in a central, easily accessible, unlocked location. For children who have not demonstrated maturity, their auto-injectors will be stored in a designated school location.

Parents will be informed that it is the parent’s responsibility to:

- Provide the appropriate medication
- Inform the school where the anaphylactic child’s medication will be kept (i.e. with the student, in the student’s classroom, and/or other locations)
- Inform the school when they deem the child competent to carry their own medication(s). Children who have demonstrated maturity, usually Grade 1 or Grade 2, should carry their own auto-injector, and it is their duty to ensure their child understands they must carry their medication on their person at all times
- Provide a second auto-injector to be stored in a central, accessible safe but unlocked location
- Ensure anaphylaxis medications have not expired
- Ensure they replace expired medications

**Allergy Awareness, Prevention and Avoidance Strategies:**

The school principal will ensure that the necessary training and information is provided in order to support an allergy-aware environment and support prevention and avoidance; as outlined in the *Responsibilities of the School Principal*.

**Training Strategy:**

All staff members reasonably expected to have supervisory responsibility of school-age and pre-school students will be formally trained in administering an epinephrine auto-injection device such as EpiPen by a Public Health Nurse or other qualified trainer in September with an update at the end of January annually. Depending on maturity, best practice suggests training should include student peers.

Efforts will be made to include the parents, and students (where appropriate), in the training. The provision of training will be provided by individuals trained to teach anaphylaxis management.

The training sessions will include:

- signs and symptoms of anaphylaxis;
- common allergens

- avoidance strategies
- emergency protocols
- use of single dose epinephrine auto-injectors
- identification of at-risk students (as outlined in the individual student emergency procedure plan)
- emergency plans
- method of communication with and strategies to educate and raise awareness of parents, students, employees and volunteers about anaphylaxis

Related Policies, Procedures, Resources:

[Policy 7300 \(Treatment of Pupils with Medical Problems\)](#)

[Policy 7330 \(Pupils – Illness or Accident at School\)](#)

[Anaphylaxis Protection Order \(BC Ministry of Education\)](#)

[British Columbia Anaphylactic and Child Safety Framework](#)

**Responsibilities of the Parents of an Anaphylactic Child**

- Inform the school of their child's allergies
- Provide a MedicAlert® bracelet for their child
- Provide the school with current medical instructions from their physician
- Provide the school with up-to-date auto-injectors, and keep them current
- Inform the school where the anaphylactic child's medication will be kept (i.e. with the student, in the student's classroom, and/or other locations)
- Inform the school when they deem the student competent to carry his/her own medication(s) and to ensure that the student
  - understands that he/she must carry the medication on their person at all times
- Provide the school with an auto-injector trainer if necessary
- Provide support to school and teachers as requested
- Provide in-service for staff if requested
- Participate in parent advisory/support groups
- Assist in school communication plans
- Assist in developing policies and procedures for reducing risk to their child
- Participate in the development of an emergency response plan for their child
- Review both the emergency protocol and the procedures for reducing risk with school personnel annually
- Provide transportation for their child until emergency procedures are in place for busing or when, for any reason, the bus company cannot provide a trained driver
- In cooperation with the principal and classroom teacher, implement a "buddy" system to identify unusual behaviour
- Supply information for school publications:
  - recipes
  - foods to avoid
  - alternate snack suggestions
  - resources
- Be willing to provide safe food/food ideas for special occasions
- Teach their child:
  - to recognize the first symptoms of an anaphylactic reaction
  - to know where medication is kept, and who can get it
  - to communicate clearly when he or she feels a reaction starting
  - to carry his/her own auto-injector in a fanny-pack
  - not to share snacks, lunches, or drinks

- the importance of hand-washing
  - to cope with teasing and being left out
  - to report bullying and threats to an adult in authority
  - to take as much responsibility as possible for his/her own safety
- Welcome other parents' questions (communicated through the Principal or school official) regarding safe foods.

### **Responsibilities of the School Principal**

- Work as closely as possible with the parents of an anaphylactic child
- Ensure that the parents have completed all necessary forms
- Develop a school policy or procedure (or implement the board policy or procedure) for reducing risk in classrooms and common areas
- Ensure that the parents of anaphylactic child are aware of all relevant board and school policies and procedures and have the opportunity to review them
- Ensure that an emergency response plan, based on physician's instructions, is developed and reviewed annually for each child with a life-threatening allergy
- Ensure that instructions from the child's physician are on file
- Notify the school community of the anaphylactic child, allergens, treatment
- Post allergy-alert forms in staff room and office
- Maintain up-to-date emergency contacts and telephone numbers
- Ensure that all staff and volunteers have received information on anaphylaxis, and that those in positions of responsibility for the anaphylactic child receive training in the use of an auto-injector
- Maintain an up-to-date list of school personnel who have received in-service and training in the use of an auto-injector
- Advise the bus driver of the presence of a child with life-threatening allergies on his/her bus, and ensure that he/she receives appropriate information and training in emergency response procedures
- Advise the parents of other students on the school bus, explaining anaphylaxis and the need for their cooperation
- In cooperation with the parents and classroom teacher, implement a "buddy" system to identify unusual behaviour
- Ensure that all substitute teachers are informed of the presence of an anaphylactic child and have been adequately trained to deal with an emergency.
- Inform all parents that a child with life-threatening allergies is attending the school and ask for their support
- Work with the school council to increase community awareness of anaphylaxis and the role of the school in protecting students with life-threatening allergies



- Arrange for in-service
- Store auto-injectors in easily accessible locations and ensure location is known to staff
- Establish safe procedures for field trips and extra-curricular activities
- Establish a disciplinary procedure for dealing with bullying and threats
- Understand expectations for staff who eat an unsafe food - must be in staff room only (vigilant hand and surface washing prior to exiting staff room to help maintain reducing the risk).

### **Responsibilities of the Classroom Teacher**

- Participate in the review of the individual plan for children in his/her classroom with life-threatening allergies
- Display photo poster, with parental approval and regard to the privacy needs of older children
- Discuss anaphylaxis with the class, in age-appropriate terms
- Encourage students not to share lunches or trade snacks
- Choose allergy-free foods for classroom events
- Establish procedures to ensure that the anaphylactic child eats only what he/she brings from home
- Reinforce hand washing with class before and after eating (please let us know if/when out of soap)
- Facilitate communication with other parents
- In cooperation with the parents and the principal, implement a “buddy” system to identify unusual behaviour
- Understand expectations for staff who eat an unsafe food - must be in staff room only (vigilant hand and surface washing prior to exiting staff room to help maintain reducing the risk)
- Enforce school rules about bullying and threats
- Leave information in an organized, prominent, and accessible format for substitute teachers, parent volunteers, or others who may have occasional contact
- Follow the school policies for reducing risk in classrooms and common areas
- Plan appropriately for field trips:
  - ensure that emergency response plans are considered
  - ensure that auto-injectors are taken
  - take a cell phone in case of emergency
- Participate in on-going Epinephrine training and awareness of anaphylaxis symptoms as required. Follow Student Emergency Plan if they think a student is having an anaphylactic reaction or says they feel like they have symptoms.

**Responsibilities of Bus Operators and Bus Drivers**

- Once a student has been identified as anaphylactic, ensure that drivers trained in emergency response procedures are assigned to the student's bus
- Attend in-service and auto-injector training
- Carry a copy of the emergency alert form on the school bus
- Ensure that the principal and/or parents are informed if a trained driver is unavailable
- Assist in developing procedures to minimize risk while travelling on the school bus
- Assist in developing an emergency action plan that relates directly to busing
- Carry out emergency action plan as necessary
- Ensure that an auto-injector is stored in a safe and accessible place on the bus or that the child carries an auto-injector in an identified location while on the school bus

**Responsibilities of Public Health/School Nurse**

- Consult with and provide information to parents, students and school personnel
- Participate in planning school policy
- Participate in in-service and auto-injector training
- Assist in developing emergency response plans
- Refer known cases of anaphylaxis to the school principal

**Responsibilities of Anaphylactic Students**

- Take as much responsibility as possible for avoiding allergens
- Eat only foods brought from home or approved for consumption
- Take responsibility for checking labels and monitoring intake (as developmentally appropriate)
- Wash hands before eating
- Learn to recognize symptoms of an anaphylactic reaction (as developmentally appropriate)
- Promptly inform an adult as soon as accidental exposure occurs or symptoms appear
- Keep an auto-injector handy at all times
- Know how to use the auto-injector (as developmentally appropriate).

**Responsibilities of all Parents**

- Respond cooperatively to requests from school to eliminate allergens from packed lunches and snacks
- Participate in parent information sessions
- Encourage children to respect anaphylactic child and school policies
- Inform the teacher prior to distribution of food products to any children in the school

**Responsibilities of All Students  
(as developmentally appropriate)**

- Learn to recognize symptoms of anaphylactic reaction
- Avoid sharing food, especially with anaphylactic children
- Follow school rules about keeping allergens out of the classroom and washing hands
- Refrain from “bullying” or “teasing” a child with a food allergy

**SEVERE ALLERGY ALERT FORM**

The personal information on this form is collected under the authority of the *School Act*, the Student Record Regulation and the *Freedom of Information and Protection of Privacy Act*. The purpose of this collection is to respond to potential emergency situations involving your student whom you have identified as subject to a potentially life-threatening allergy. If you have any questions concerning the collection, use or disclosure of this information please contact your school principal either in writing or by telephone.

<b>STUDENT INFORMATION (To be completed by Parent/s)</b>		
Name of Student: _____		Date of Birth: _____
Address: _____		
Home Telephone: _____		Medic Alert I.D.: _____
Name of Parent: _____		Business #: _____
Name of Guardian: _____		Business #: _____
Emergency Contact Person(s): _____		Telephone #: _____
<b>PHYSICIAN INFORMATION (To be completed by Physician)</b>		
Nature of Allergy/Allergens: _____		
Symptoms of Reaction: _____		
Recommended Response to Reaction: _____		
<b>Medication</b>	<b>Dosage</b>	<b><u>Expiration</u></b>
_____	_____	_____
_____	_____	_____
_____	_____	_____
Additional Instructions or Information: _____		
Name of Physician: _____		Telephone: _____
Signature of Physician: _____		Date: _____



TO BE COMPLETED BY PARENT

[TO BE POSTED, FOLLOWING PARENTAL CONSENT]

Student’s Name \_\_\_\_\_

• **ALLERGY – DESCRIPTION**

This student has a **DANGEROUS**, life-threatening allergy to the following:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

and all substances containing them in any form or amount including the following kinds of items:

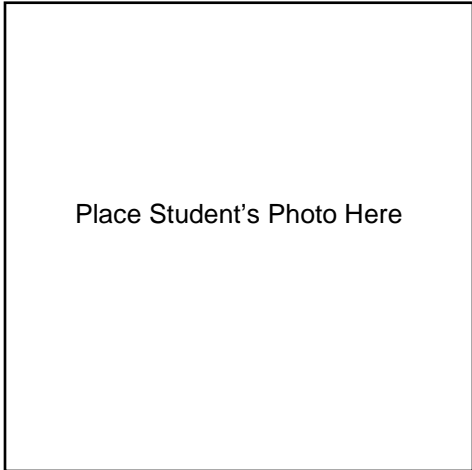
\_\_\_\_\_  
\_\_\_\_\_

• **AVOIDANCE**

The key to preventing an emergency is **ABSOLUTE AVOIDANCE** of these allergens at all times.

• **GENERAL PRECAUTIONS**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**SYMPTOMS FOLLOWING EXPOSURE TO A PARTICULAR MATERIAL CAN INCLUDE:**

- hives and itchiness on any part of the body;
- nausea, vomiting, diarrhea;
- difficulty breathing or swallowing;
- panic or sense of doom;
- throat tightness or closing;
- swelling of any body parts, especially eyelids, lips, face or tongue;
- coughing, wheezing or change of voice;
- fainting or loss of consciousness;
- other, please specify \_\_\_\_\_

**EMERGENCY MEASURES**

- Get **EpiPen® (epinephrine)** or other Medication and administer immediately.
- **HAVE SOMEONE CALL AN AMBULANCE** and advise of need for an **EpiPen® (epinephrine)**.
- Unless student is resisting, lay student down, tilt head back and elevate legs.
- Cover and reassure student.
- Record the time at which **EpiPen® (epinephrine)** was administered.
- Have someone call the parent.
- If the ambulance has not arrived in 10-15 minutes, and breathing difficulties are present, administer a second **EpiPen® (epinephrine)**.
- Even if symptoms subside, students require medical attention because there may be a delayed reaction, take the student to hospital immediately in the ambulance.
- If possible, have a school staff member accompany the student to the hospital.
- Provide ambulance and/or hospital personnel with a copy of the **Severe Allergy Alert Form** for the student and the time at which the **EpiPen® (epinephrine)** or **Medication** was administered.

I agree that the school may post my student’s picture, take the Emergency measures and that this information will be shared, as necessary, with the staff of the school and health care providers.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent’s Signature



**Sample Letter to Parents**

Dear Parents:

**Re: Medical Danger**

One of our *[state grade level]* students has a life-threatening allergy to all nuts. The only way to ensure a safe environment for this child is to try to make our classroom *nut-free*. To do this we need everyone’s co-operation.

Please check the ingredients of all foods your children bring to school. Coconut is not a risk for nut allergies only for students with specific coconut allergies.

In a classroom setting, cross-contamination is the greatest risk from this type of allergy. Cross-contamination is when a few crumbs from one child’s snack are dropped and then picked up by and allergic child. ***Even a small amount can kill.***

It is difficult at the best of times to get children to eat healthy snacks; however, I hope you will appreciate the seriousness of this condition and that you will assist us at the school in our efforts to create as safe an environment as possible. With your co-operation we can minimize the risk of an allergic reaction.

Anyone wishing further information about this type of allergy may contact the child’s parents. There is also an information pack available at the school.

Yours sincerely,

Teacher

✂-----

**Please return this lower portion to the Homeroom teacher**

We, the parents/guardians of: \_\_\_\_\_

Name of Student

have received and read the letter regarding the student with the life-threatening allergy.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

## How to use the EpiPen® Auto- Injector... Three simple steps:



## Comment utiliser l'auto-injecteur d'adrénaline EpiPen® en trois étapes simples.



1. Pull off grey safety cap.
1. Enlever le couvercle gris de sécurité.



2. Jab black tip into outer thigh until unit activates.
2. D'un coup sec, placer le bout noir sur la cuisse jusqu'au déclenchement du mécanisme d'auto-injection.



3. Hold EpiPen® in place several seconds. Then discard unit.
3. Laisser en place pour plusieurs secondes. L'unité EpiPen® doit ensuite être enlevée et jetée.

To Be Posted by Telephone

**9-1-1 Protocol: Anaphylaxis**

1. **Emergency Phone Number** \_\_\_\_\_
2. **Hello, my name is** \_\_\_\_\_
3. **We are located at :**  
**Address:** \_\_\_\_\_  
**Nearest major intersection:** \_\_\_\_\_
4. **Tell them:**  
“We need an ambulance immediately. We have a child going into anaphylactic shock. An EpiPen<sup>®</sup> is being given now.”
5. **Give the following information about the child:**
  - level of consciousness
  - breathing
  - bleeding
  - age
6. **My phone number is** \_\_\_\_\_
7. **The closest entrance for the ambulance is on:**  
\_\_\_\_\_
8. **Do you need any more information?**
9. **How long will it take you to get here?**
10. **Tell them:** “A staff member will meet you at the entrance to provide further information.”
11. **Call the parents/guardians/emergency contact.**