

ALLERGY AND ANAPHYLAXIS POLICY

WEST NIPISSING CHILD CARE CORPORATION

POLICY

Purpose

Anaphylaxis is a severe allergic reaction that can be fatal. It requires prevention strategies and immediate intervention in the event of an emergency. This policy outlines procedures to help meet the needs of children with severe allergies and to provide parents, employees, providers, students, volunteers and visitors to child care facilities with relevant and important information about anaphylaxis.

This policy is intended to fulfill the obligations of child care agencies to have an anaphylaxis policy under Ontario Regulation 137/15. The requirements outlined in this policy are consistent with *Sabrina's Law, 2005*.

To ensure that they are understood by all employees, providers, students and volunteers of the *West Nipissing Child Care Corporation* receive an orientation and training session upon hiring or placement, before interacting with children. In addition, these statements are reviewed and signed once a year, and/or whenever they are amended.

Guiding Principles

This plan is designed to identify children at risk, implement measures to minimize accidental exposure to allergenic substances, train and guide staff (permanent, temporary, interns) or caregivers in emergency response. While this does not eliminate potential accidents, it can help to reduce them.

- In all child care facilities where snacks and/or lunch are provided, peanuts and nuts as well as any products marked "may contain traces of peanuts or nuts" are strictly prohibited.
- Parents of children who are required to bring snacks and/or lunch are responsible for ensuring that all food provided to the child is free of peanuts/nuts or traces of peanuts/nuts.
- A child identified as having an allergy that may lead to an anaphylactic reaction must bring his/her own individual snack.
- Each staff member, volunteer, student, or caregiver working with a child with anaphylaxis must know how to administer an EpiPen auto-injector.
- An emergency response plan for anaphylaxis must be written. Everyone who works with children should be aware of the procedures to follow about this plan.



• When a child has significant allergies to multiple foods and reasonable steps cannot be taken to eliminate the allergens from the child care facility, the child will not be admitted to the program.

ADMINISTRATIVE GUIDELINES

Individual Plans and Emergency Procedures for Children with Life-Threatening or Anaphylactic Allergies

- Before a child attending the child care agency, the licensee or supervisor and/or child care provider will meet with a parent of the child enrolled with a child care agency to obtain information about any health concerns, including whether the child has or is at risk for anaphylaxis.
- Before a child's attendance at the child care agency or after the discovery of anaphylactic allergy, an individual plan and emergency procedures must be established in consultation with a parent of the child and a regulated health care professional involved in the child's health care whom the parent believes should be consulted.
- All individual plans and emergency procedures will include a description of the symptoms of an anaphylactic reaction specific to the child and the procedures to be followed in the event of an allergic reaction or other medical emergency based on the severity of the child's symptoms.
- The individual plan and emergency procedures developed for each child will include information for those who are in regular direct contact with the child about the type of allergy the child has, monitoring and prevention strategies, and appropriate treatment.
- All individual plans and emergency procedures will be made readily available at all times to all child care providers and child care visitors, students and volunteers and will be kept in the child's file in the supervisor's office.
- All individual plans and emergency procedures will be reviewed jointly with a parent of the child to ensure that the information is current.
- Each child's epinephrine auto-injector must be carried wherever the child goes.

As soon as a child is identified as having an allergy that could lead to an anaphylactic reaction:

The supervisor shall:	Discuss with the parent what steps
	can be taken to reduce or eliminate
	the child's exposure to specific
	allergens and ensure the child's
	safety.



The parent of the child with food allergies must:	 provide the information needed for his/her emergency plan; ensure that the food in their child's snack box is packaged, clearly labeled and approved by them (the parents).
Staff shall:	 take the necessary steps to integrate the child into the program and ensure the child's safety; eliminate problematic substances from the environment. (e.g., peanuts and nuts in rooms, kitchen, office, classrooms)
Parents of all children are :	 notified through the supervisor and the Parent Handbook, that they are responsible for avoiding their child eating foods that may contain nuts or peanuts in the morning before coming to the child care facility. This is to prevent traces of these foods on the child's clothing or face from triggering an anaphylactic reaction in an allergic child.
Posters will be :	 posted in strategic locations in the daycare facility as a reminder of the prohibition of substances (e.g., peanuts, nuts)
Staff shall :	 notify all parents of this prohibition and provide an occasional reminder; be aware of the particular situation of these children. They shall read and sign the policy and emergency plan for each child who has allergies.



Educating children about severe allergies:

To support parents of children with severe allergies, it is the responsibility of staff to encourage all children attending child care facilities to follow the following guidelines:

- Eat only the foods offered by the daycare facility or those contained in their snack box;
- Wash hands before and after eating
- Do not share food or utensils with other children;
- Do not put food directly on a desk or table, but rather on a plate or paper napkin.

EPIPEN epinephrine auto-injectors

Every staff member, volunteer, student, and caregiver working with a child with anaphylaxis should know how to administer an EPIPEN auto-injector.

Availability and use of auto-injectors:

For infants who are unable to have an auto-injector with them at all times, the following procedures will be followed:

- The auto-injector will be stored in a safe place out of the reach of children, but in order to allow quick access, it will not be locked up.
- Each auto-injector shall be clearly marked with the name of the child for whom it is intended. The EPIPEN shall be in a pouch identified with the child's name and identifying it as containing an EPIPEN. Staff members, students and providers shall know where to find the auto-injectors at all times.
- The staff member or caregiver responsible for the child shall carry the auto-injector at all times when outside the room where the auto-injector is normally stored.
- The auto-injector shall be on the premises at all times when the child is present. If the child presents and the auto-injector has been left at home or is not on the premises, the child will not be admitted to the daycare facility.
- If an outing is planned, the staff shall ensure that the auto-injector is brought along.
- It is the parent's responsibility to ensure the validity and effectiveness of the autoinjectors.

A school-aged child may carry his/her own auto-injector when deemed responsible enough by the parents and the child care staff.

Preferred responses to anaphylaxis emergencies

- One staff member should remain with the allergic child at all times.
- One person should go for help or call for help.
- Lay the person with anaphylaxis on his or her back if he or she feels faint or dizzy from impending shock, unless he or she is vomiting or having severe difficulty breathing. In this case, turn the person on his or her side.

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- Administer epinephrine at the first sign of reaction. Note the time of day it was given.
- Call 911. Have the child transported to the emergency room even if symptoms have improved/stopped.
- Contact the child's parents.
- A staff member will accompany the child in the ambulance and remain with the child until a parent/guardian arrives.
- A serious accident report will be completed in the Child Care Licencing System (CCLS).

Medication Requirements

- When medication shall be administered to a child following an anaphylactic reaction, the NWESC *Medication Administration Policy* will be followed, including the completion of a parental authorization form regarding the administration of medication.
- Emergency allergy medications (e.g., oral allergy medications, metered dose inhaler and epinephrine auto-injector) will be available for children to carry, with parental permission, so that they can be administered promptly when needed.

Strategies to reduce the risk of exposure to anaphylactic allergens

The following strategies to reduce the risk of exposure to agents that may cause anaphylactic shock should be followed at all times by visitors and child care providers, other persons regularly present or ordinarily residing on the premises, students and volunteers at each child care location.

- Do not serve food with unknown ingredients.
- Do not serve foods with "may contain" warnings on the label in a room with a child whose individual plan and emergency procedures mention these allergens.
- Ensure that parents label foods brought into the facility with the child's full name, the date the food arrived at the facility, and all known ingredients.
- When food from home is provided for children, ensure that adequate supervision is in place so that no food is shared or traded.
- Encourage parents who serve food containing allergens at home to ensure that their child is allergen-free (e.g., thorough hand washing, tooth brushing, etc.) before attending the child care facility.
- Do not use crafts, sensory materials or toys labeled with known allergens.
- To reduce the risk of exposure to known allergens, share information with all families of children in the facility about anaphylaxis, strategies and treatment.
- Ensure that each child's individual plan and emergency procedures are kept up to date and that all visitors and child care providers, other persons regularly present or usually residing on the premises, students and volunteers at the child care facility are trained in regards to the plans.



- Create allergy lists for each child care facility and ensure that they are up to date and implemented in each facility.
- Keep child care providers, other persons regularly present or usually residing on the premises, child care visitors, students and volunteers informed of changes regarding a child's allergies, signs and symptoms and treatment, and review all updates to individual plans and emergency procedures
- Inform families when there are changes regarding allergies, while maintaining the confidentiality of children.
- Update or revise and implement strategies in this policy based on the allergies of children enrolled in a child care facility.

Communication Plan

The following is our communication plan for sharing information with child care providers and visitors, students, volunteers, parents and families about life-threatening and anaphylactic allergies.

- Parents will be encouraged not to bring into a child care facility any food that contains ingredients to which some children may be allergic.
- Parents and families will be informed of anaphylactic allergies and all known allergens in the child care facility that their child attends, by means of a sign at the entrance to the site, and in each of the rooms. A binder with all the details (a picture of the child, type of allergy) is accessible by staff.
- A list of all children's allergies, including the foods and other agents that may be responsible, will be posted in all preparation areas of each child care location and accessible wherever children may be.
- For each child with an anaphylactic allergy who is enrolled in a child care facility, there shall be an individual plan and emergency procedures outlining the signs and symptoms specific to the child, describing how to identify that the child is having an allergic reaction and the steps to be taken in the event of such a reaction.
- The individual plan and emergency procedures for all children will be available wherever the child may be at the time of receiving child care.
- In cases where a child has food allergies and the meals and snacks provided by the child care provider cannot meet the child's needs, the child's parents will be asked to provide the meals and snacks for the child. All written feeding instructions provided by a parent will be implemented.
- The agency will communicate with the Ministry of Education by reporting serious incidents during which a life-threatening situation has occurred, in accordance with their serious incident policy and procedures.
- This communication plan will be reviewed on an ongoing basis to ensure that it meets the needs of the children enrolled in the agency and is effective in meeting its purpose.



Confidentiality

Information about a child's allergies and medical needs will be treated as confidential; every effort will be made to protect the child's privacy, except where information shall be disclosed in order to implement the procedures in this policy and for legal reasons (e.g., disclosure to the Ministry of Education, the College of Early Childhood Educators, law enforcement authorities or the Children's Aid Society).

I ______, (employee, provider, student, volunteer) understand and support the West Nipissing Child Care Corporation's Allergy and Anaphylaxis Policy.

Signature: ______Date: ______Date: ______Date: ______