

KING GEORGE JUNIOR SCHOOL ALLERGY SAFETY STRATEGY & POLICY

Version 2: October, 2007

Contents

Strategy overview:	2
Policy statement:	3
Understanding anaphylaxis (definition, signs & symptoms):.....	3
Emergency protocol:.....	4
Policy and procedures for allergic children:	4
Procedure for incoming food & other potentially allergen containing materials:	5
Procedure for dealing with allergens found on school premises:.....	7
Training:.....	7
Communication:.....	8
Sample list of acceptable foods:	8

Strategy overview:

In our school, we have a number of children who have life threatening allergies to peanuts and nuts. In the interest of providing a safe environment for these children, we ask for the support of teachers, parents and students in making our school a peanut and nut sensitive environment.

Anaphylaxis is a severe allergic reaction that can lead to death if untreated (see additional information under section "Understanding anaphylaxis"). Our strategy is to ensure that children at risk are identified, and that policies and procedures are in place to minimize the potential for accidental exposure. In addition, our strategy ensures that staff & key volunteers are trained to respond in an emergency situation.

Roles & Responsibilities:

- a. Anaphylaxis management is a shared responsibility that includes allergic children, their parents, caregivers, and the entire school community.*
- b. Parents of allergic children need to educate their children on avoidance and other safety strategies. (Parents wanting more information in this regard should speak to the principal or Anaphylaxis Committee).
- c. The Anaphylaxis Committee, in conjunction with the Principal will have accountability for developing policies and procedures to ensure that we, as a community, are to the best of our ability are minimizing risk for allergic children .
- d. The principal will work with parent s of allergic children to discuss individual approaches in managing allergies, as required. (see page 4)
- e. The principal and teachers will ensure that occasional teachers, parent volunteers and visitors are made aware of the allergic children, their individual plans, as well as fundamentals of the allergy policy.
- f. All school staff must be aware of allergic children, know where their individual emergency plans are, and be prepared to treat an allergic reaction.
- g. School staff will ensure that no food is served on the school's behalf, that does not have proper labeling.

* Source: Canadian Society of Allergy and Clinical Immunology, Anaphylaxis in Schools & Other settings

Policy statement:

Our school has an “Allergy Sensitive - No Nuts” policy, and we strive toward providing an allergy-safe environment – minimizing risk for children with both nut and other life threatening allergies.

Foods containing peanuts or nuts as an ingredient are not permitted on the school premises, including inside and outside the school building.

We request that those who have consumed peanut butter/other forms of nuts before arriving at school wash their hands and face before entering the school premises.

Strategies to reduce risk for other allergies will be handled on a more individual basis, as required.

Foods with “May Contain” warnings:

Individuals with severe food allergies should never eat products that have precautionary warnings, e.g., ‘may contain traces of nuts/peanuts’. As such, when bringing celebration treats into a classroom where children have nut allergies, please make every effort to bring treats that do not have a “may contain traces of peanut/nut” warning (see sample list of foods on page 8). This helps ensure that our allergic children are not excluded from enjoying the celebration process.

It should be noted that according to the Canadian Society of Allergy and Clinical Immunology, foods with precautionary warnings should not be an issue if consumed by non-allergic children in the presence of children with food allergies. For this reason, foods with precautionary warnings can be brought to school for individual consumption by children in the lunchroom.

Understanding anaphylaxis (definition, signs & symptoms):

Anaphylaxis can be defined as “a severe allergic reaction to any stimulus, having sudden onset, involving one or more body systems with multiple systems”.*

Signs and symptoms of a severe allergic reaction can occur within minutes of exposure... and usually occur within two hours (but in rarer cases can develop hours later).

*An anaphylactic reaction can involve **any of the following symptoms**, which may appear alone or in any combination, regardless of the triggering allergen:

Skin: hives, swelling, itching, warmth, redness, rash (note: anaphylaxis can occur without hives)

Respiratory (breathing): wheezing, shortness of breath, throat tightness, cough, congestion, hay-fever like symptoms, trouble swallowing

Gastrointestinal (stomach): nausea, pain/cramps, vomiting, diarrhea

Cardiovascular (heart): pale/blue colour, weak pulse, passing out, dizzy/light headed, shock

Other: anxiety, feeling of impending doom, headache, uterine cramps in females

* Source: Canadian Society of Allergy and Clinical Immunology, Anaphylaxis in Schools & Other settings

Emergency protocol:

Any concern of a reaction should always be taken seriously – **RESPOND IMMEDIATELY!**

It is recommended that epinephrine be given at the start of **any** suspected anaphylactic reaction occurring in conjunction with a known or suspected allergy contact.*

There are no contraindications to using epinephrine for a life-threatening allergic reaction*

1. **Administer epinephrine** at first sign of reaction (outer thigh only) – Note the time!
2. **Call 911** - Child must go to emergency room even if symptoms have subsided.
3. **If child is faint** - Lie child down and raise legs above level of heart.
4. **Call parents** - Familiar person must remain with child until parent/guardian arrives.
5. **If 911 has not arrived within 10 minutes** - administer second does of epinephrine if symptoms have not improved.

Note: In studies of individuals who have died as a result of anaphylaxis, epinephrine was underused, not used at all, or administration was delayed.*

* Source: Canadian Society of Allergy and Clinical Immunology, Anaphylaxis in Schools & Other settings

Policy and procedures for allergic children:

1. New (and existing) students with allergies are required to complete school board medical forms.
2. Parents of those with confirmed severe allergies will need to:
 - a. Meet with the Principal to discuss the school allergy strategy and policies as well as the individual plan of the child.
 - b. Obtain required sign-offs from child's physician/allergist, including sign-off on individual anaphylaxis emergency plan.
 - c. Work with principal to confirm/finalize individual emergency plan (incorporating photo, details of allergy, emergency contact information, etc.) and provide consent as to where plan may be posted.
 - d. Supply required auto-injectors.

3. Auto-injectors (Epi-pen or Twinject)
 - a. Children who are mature enough (typically age 6 or 7), should always carry an auto-injector with them and tell others where they are kept. Teacher must be made aware of where Epi-Pen is located.
 - b. Teachers/caregivers of younger children should always have the auto-injector readily available. The auto-injector should be kept in an unlocked area in the child's classroom, and should be taken on any excursions out of the school.
 - c. Back-up auto-injectors will be kept in an unlocked area in the school office. This area must be made known to all school staff.
 - d. Posters describing signs & symptoms of anaphylaxis and how to administer an auto-injector, will be placed in relevant areas, i.e., classrooms, office, staff room, lunch room.

4. Identification
 - a. Allergic children diagnosed with risk of anaphylaxis should wear medical identification such as a MedicAlert bracelet, or other identifier.

5. Individual anaphylaxis emergency plans will be posted in the office, as well as possibly in the classroom and/or lunchroom - dependent on consent provided by parents. (Note: older children may be reluctant to have their plan posted in the classroom and the privacy of the child should be respected).

Procedure for incoming food & other potentially allergen containing materials:

1. Daily meals for children, i.e., snack and lunch:
 - a. Children with allergies must only eat food which they have brought in from home unless it is packaged, clearly labeled and approved by parents. Children should place food on napkin or paper rather than in direct contact with desk.
 - b. Children **must not trade or share food** (or containers and utensils).
 - c. School provided food (e.g., after school care snacks or back-up food in event child has no lunch) must be completely nut/peanut free and be checked for other potential allergens, if applicable.
 - d. All children are encouraged to wash hands before and after eating. Teachers/care-givers should ensure there is time allocated before and after break periods to accomplish this.

- e. Allergic children should sit in close proximity to the lunch room supervisor. The supervisor/s should monitor younger children to ensure that their immediate environment is free of allergens, and that food is not being traded.
2. Celebration treats: (e.g., birthday or other occasions)
- a. Any treats/snacks brought into the classroom must be **individually packaged** with ingredients clearly listed.
 - b. 24hr notice must be provided to the teacher/caregiver in advance of bringing in such treats. This ensures that those children who may not be allowed to consume the treats are provided with adequate notice (and alternative arrangements can be made for these children if required).
 - c. The staff receiving the food shall be responsible for reading the label before accepting the food. If there is any doubt regarding the ingredients (including lack of ingredient label), the food should not be accepted.
 - d. Baked goods (unless individually wrapped) will not be permitted given risk of 'cross-contamination'. i.e., while the baked good may itself not contain nuts, it or the equipment used to bake with, may have touched nut products. This would then classify the product as "may contain traces of nuts".
3. Catered food for events:
- a. Ingredients of food brought in for special events must be clearly identified.
 - b. If no ingredient list is available, e.g., pizza, the vendor must be contacted to ensure that the product does not contain nuts.
4. Playground:
- a. The 'No Nuts' policy is in effect everywhere on the school premises. It is the duty of staff and parents to ensure that this policy is enforced. This might include reminding visitors to the school or playground that they may not consume peanut/nut products in the playground or other areas of the school. An 'outdoor' sign to support this policy will be placed in the school yard area.
5. Non-food materials:
- a. Some examples of non food sources which may contain peanuts include: Ant baits, bird feed, mouse traps, pet food; Cosmetics, sunscreens; Craft materials; Medications, vitamins; Mushroom growing medium; Stuffing in toys.

Procedure for dealing with allergens found on school premises:

If a child arrives at school with evidence of a peanut/nut substance on skin, clothing, or has brought in an item containing peanuts/nuts:

- a) Parents/guardians of allergic children who may have come into contact with the allergen should be notified immediately, and child should be monitored closely for any signs or symptoms.
- b) Parents/guardian of the child with the peanut/nut product must be notified and reminded of the policy. The child will also need to be reminded of the seriousness of the situation.
- c) Affected areas will need to be appropriately cleaned.

Training:

1. All individuals who come into regular contact with children at risk of anaphylaxis should participate in formal training sessions.
 - a. All staff, and substitute teachers will receive training at least once a year. (Note: Ideally twice a year – once at onset of school year, and one mid-year refresher)
 - b. Training should include*:
 - i. Ways to reduce risk of exposure
 - ii. Recognition of signs & symptoms of anaphylaxis
 - iii. How to administer the auto-injector (Epi-pen and Twinject)
2. Other individuals e.g., parent volunteers and visitors must be made aware of the allergic children, their individual plans, as well as fundamentals of the allergy safety policy.

* Source: Canadian Society of Allergy and Clinical Immunology, Anaphylaxis in Schools & Other settings

Communication:

Communication about our allergy policies and procedures will continue throughout the year, as required, to promote awareness and continued support.

1. Onset of school year:
 - a. Distribution of highlights of allergy policy.
 - b. Reminder to children via general assembly or special class presentation.
 - c. Letter from teacher to parents (of a particular class) with allergic students.

2. Throughout the year:
 - a. Reminders via school bulletins and newsletters, as required.
 - b. Special reminder letters around Halloween and holiday period.

Sample list of acceptable foods:

Please check the list each and every time as ingredients may change:

❖ Dare products e.g., Bear paws, Wagon Wheels, Real Fruit Gummies	❖ Christie Cookies: Premium Plus Soda Crackers; Teddy Grahams, Oreos	❖ Kellogg's Rice Krispies Squares (regular, rainbow & chocolate)
❖ Nestle bite sized Aero, Kit-Kat, Smarties and Coffee Crisp	❖ Skittles (Effem foods)	❖ Vadeboncoeur chocolates and candies
❖ Peanut free Mars Bars (look for sign on the package)	❖ Quaker Chewy Bars –peanut free line(Apple, Choc chip, S'mores)	❖ Twizzlers & Nibbs (Hershey)
❖ Rold Gold pretzels	❖ Hollandia' baked goods (can be obtained at Alfredo's Grocery Store)	❖ Tootsie candy (Tootsie roll, pops, dots & candy)
❖ Sunmaid raisins	❖ No Name Rice Crispy Marshmallow Squares (Loblaws)	❖ Starburst candies (Effem foods)
❖ Chapman's ice cream and frozen treats	❖ Enjoy Life TM cookies & snack bars	❖ Potato chips (Hostess, Cheetos, Lays, Ruffles)
❖ Lifesavers Lollipops or any other Lifesaver products (Wrigley)	❖ Terra Cotta Cookie Company products (www.terracottacookies.com)	❖ Sunrype Fruit Bars