



St. Margaret Mary CES

30 Margaret Mary Rd. Woodbridge, ON L4L 2W8
905-851-3935 smm.ycdsb.ca @SMM_YCDSB

2024/2025 SMM School Allergy / Anaphylaxis Plan

The York Catholic District School Board recognizes that there are some students within the school system that are susceptible to severe anaphylactic reactions which could be life threatening. The York Catholic District School Board also recognizes that anaphylaxis management is a shared responsibility among allergic students, parents, caregivers and the entire school community. At St. Margaret Mary CS, we have students and staff members who have life threatening allergies to (but not limited to) insect bites, foods (i.e., peanuts, tree nuts) and fragrances/scents.

School staff and parents are responsible for creating safe and healthy environments for students within the limits created by legislation, school configuration, number of students with allergies, and available school staff. For some individuals, severe allergic reactions can be triggered not only by eating foods, but also by their touch and smell. This has implications for the whole school, not just individual classrooms.

Bill 3, also known as **Sabrina's Law**, came into effect January 1st, 2006. The purpose of this legislation is to protect anaphylactic students by providing a safe learning environment for all.

St. Margaret Mary CS is an "Allergen Safe" school. To this end, the following steps will be taken in order to attempt to establish and maintain, to the very best of our collective ability, an "Allergen Safe" environment, which recognizes the need for safety with regard to life threatening allergies.

An **Allergen Safe School Environment** is one where every reasonable effort and precaution has been taken to minimize the risk of exposure to potentially life threatening allergens

Please note that our allergy procedures may be updated regularly based on student needs.

1. **School Website/Classroom Allergy Alert Letter will be sent home to all families which:**

- Requests that lunches and snacks not contain nuts, nut products, eggs, or any other ingredients as indicated on students' emergency forms

- Lists products/foods to avoid
- Lists alternate products/foods to send
- Advises community of SMM's "Allergen Safe" environment and of the school's "no food sharing" rule
- Is posted on the website at the start of the school year
- Reminds community members that our school is fragrance/scent free and to avoid using these products if visiting SMM

2. **Administration will:**

- Contact parents of children for whom an individual action plan (S15a) form is required
- Communicate with all staff and others who are in direct contact with students the name, grade and classroom teacher of students who could require the immediate administration of medication due to life-threatening allergies and where their individual action plan and medication are located
- Develop an "individual action plan" for each student who has an anaphylactic allergy that includes details informing staff and others who are in direct contact with the student on a regular basis of the type of allergy, monitoring and avoidance strategies and appropriate treatment; a readily accessible emergency procedure for the student, including emergency contact information and storage for Epinephrine auto-injector, where necessary
- Provide and communicate to all staff the designated location of medication for students with anaphylaxis
- Provide regular and current training on anaphylaxis for all staff
- Communicate to the entire school community stressing "allergen safe" schools via written communications, website, assemblies, Open House/Meet the Teacher and Parent / Teacher Interviews
- Promote the avoidance of allergens where practical and possible
- Ensure that school volunteers and visitors are aware of the Protection of Anaphylactic Students Policy
- Ensure that parents/guardians have been informed when the school will be offering food items to students in advance

3. **School Staff will:**

- Participate in the regular and current training on anaphylaxis twice annually to learn how to recognize the symptoms of an anaphylactic reaction and the procedures
- To provide a copy of the S15(a) form (which includes a photo of the student) to occasional teachers
- To discuss anaphylaxis with the class, in age appropriate terms outlining the allergen in the class, describing symptoms of an anaphylactic reaction and procedures to follow should an anaphylactic reaction occur
- Become familiar with the specifics of the child's allergy/health issues

- Administer an Epinephrine auto-injector or other medication that is prescribed, even if there is no pre-authorization to do so if there is reason to believe that a student is experiencing an anaphylactic reaction
- Establish communication links for the upcoming year

4. **Students will:**

- Increase their awareness of anaphylactic reactions in recognizing symptoms of an anaphylactic reaction
- Practice allergen avoidance measures
- Promptly inform an adult as soon as accidental exposure occurs or symptoms appear
- Take responsibility for keeping their Epinephrine auto-injector with them at all times and knowing how to use the Epinephrine auto-injector where age and/or developmentally appropriate
- Wear Medic Alert identification at all times

5. **Parents are asked to:**

- Advise the school immediately upon registration and / or when in receipt of a diagnosis of an anaphylactic allergy
- Provide the Principal with a completed copy of form S15(a) for Elementary students prior to, or immediately after the start of the student's Elementary career, or immediately after a diagnosis of an anaphylactic allergy
- Ensure that all medical information pertinent to the student's life-threatening allergy is always current
- Provide the school with two (2)* up-to-date single-dose applications of the Epinephrine auto-injector, one to be stored in the school office, clearly marked with student's name and known allergen and the second to be carried on the student's person, clearly marked with the student's name and known allergen.
 - *It is strongly advised that students with an Epinephrine pen wear it on their person at all times if they are able to*
- Or, provide the school with one (1)* up-to-date twin-jet application of the Epinephrine auto-injector, to be worn on the student's person, clearly marked with student's name and known allergen or to be kept with a person in a position of authority.
- Provide their child with a MEDIC ALERT BRACELET to be worn at all times.
- Practice allergen avoidance measures.

**If the parent/guardian is not in agreement with providing the school with two up-to-date applications of the Epinephrine auto-injector or the possession and carrying of one application Epinephrine auto-injector or the twin-jet Epinephrine auto-injector on the student, the parent will be required to indicate this on the S15(a) or S15(a1) form upon submission to the Principal acknowledging that they take full responsibility for their decision.*

6. **Food in the school:**

- Lunches will be eaten indoors
- Snacks for all grades will be eaten indoors before/after recess.
- Sharing of food is strictly prohibited
- Nuts or nut bi-products are to be strictly avoided throughout the school.
- No food is allowed outdoors. Sharing of food is strictly prohibited.
- Look for warning statements on the label such as "May Contain...". Remember, even trace amounts can cause a severe allergic reaction.
-
- If nut products are brought as a snack, then:
 - It/they will be removed from the student.
 - An "Allergen Safe" reminder will be given to the student/parent.
 - An alternative snack will be given to the student.

7. **Student Transportation Services will:**

- Ensure that the current form S15(a) form received from the Principal is available on file:
 - i) in the Student Transportation Services office,
 - ii) in the appropriate service provider's dispatch office, and,
 - iii) in the appropriate school vehicle(s)
- Work with the school Principal and service provider to assign a specific seat to a student with life threatening allergies, if required

8. **Food Sharing Events**

(a) Large Scale Celebrations involving more than one class or many parents. (i.e., VIP Graduation, Sacramental Celebrations, Carnival, Shrove (Pancake) Tuesday, Kindergarten Growing Celebration, Parental Gatherings/Meetings, Volunteer Appreciation, CSC Meetings or functions, etc.)

- Food to be shared at these gatherings would be purchased by the teachers or committee involved following discussion with the school administrator
- A letter will go to parents informing them of the Celebration and the Allergy Safe Foods with an ingredients list, allowing parents the choice to opt out of the food portion of the celebration

(b) Classroom Celebrations: (Halloween, Christmas, St. Valentine's Day, Easter, St. Patrick's, Theme Days, Year-end)

- Food to be shared at these gatherings would be made up of allergy safe foods purchased by the teacher following discussion with the school administrator.

(c) Birthdays

- The school will recognize and celebrate birthdays through announcements so it is not necessary to send in food to share with classmates.
- If a parent/guardian wishes to recognize a child's birthday with his/her class, he/she may only do so in consultation with the classroom teacher using:
 - Non-food loot bags, or
 - By child donating an educational game or book to the class and/or school library

9. **School Functions or Fundraisers:**

- Products used or sold will be Allergy Safe.

10. **Field Trips / Out of School Activities:**

- Epi-pens and S15 forms will be taken on trips.
- Parents of severely allergic children may attend or transport their child by car.
- No food/snacks will be eaten on the bus.
- Students will not be allowed to purchase food items while on a trip

11. **Buddy System:**

Children with severe allergies may use a buddy when leaving the class to go to the library, office, washroom, etc. Classroom teacher will dialogue with the parent of the allergic child with regards to the use of the above.

The success of this plan is entirely dependent upon the collaborative efforts of the staff, parents and students of St. Margaret Mary CS. Let's work together to make our school an "Allergen Safe" environment and keep all of our children safe and healthy!

Emergency Protocol

An individual **Anaphylaxis Emergency Plan** can be signed by the child's physician. With parental permission, a copy of this plan will be placed in designated areas such as the classroom and office.

Adults must be encouraged to listen to the concerns of the child who usually knows when a reaction is occurring, even before signs appear. **It cannot be assumed that children will be able to properly self-administer their auto-injector.** (Children may be fearful of getting a needle, they may be in denial that they are having a reaction, or they may not be able to self-administer due to the severity of the reaction). When giving epinephrine, it is recommended to have the person sit or lie down. When administering to a child, it may be helpful to support or brace their leg to reduce movement

To respond effectively during an emergency, a routine has been established and practiced, similar to a fire drill.

During an Emergency

1. **Give epinephrine auto-injector (e.g. EpiPen®)** at the first sign of a known or suspected anaphylactic reaction.

2. **Call 9-1-1** or local emergency medical services. Tell them someone is having a life-threatening allergic reaction.
3. **Give a second dose of epinephrine** as early as 5 minutes after the first dose if there is no improvement in symptoms.
4. **Go to the nearest hospital** immediately (ideally by ambulance), even if symptoms are mild or have stopped. The reaction could worsen or come back, even after proper treatment. Stay in the hospital for an appropriate period of observation as decided by the emergency department physician (generally about 4-6 hours).
5. **Call emergency contact person** (e.g. parent, guardian).

Body Position

After giving epinephrine, place the person on their back with their legs raised. If they feel sick or are vomiting, they should be placed on their side so that the airway is clear and they do not choke on vomit. It is important to avoid having an individual immediately sit up or stand after receiving epinephrine as these sudden changes of position may lower their blood pressure, worsen their condition, and potentially result in death. Additionally, emergency responders should be directed to the person's location and transport the person on a stretcher. The person should not be made to walk to emergency responders.

Important Notes

- A person should stay with the child at all times.
- It is important to note the time of administration of the first epinephrine auto-injector so that you know how long it has been since the child received the first dose of epinephrine.
- The use of epinephrine for a potentially life-threatening allergic reaction will not harm a normally healthy child, even if epinephrine was not required.
- If an anaphylactic emergency occurs, both the school anaphylaxis plan and the child's Anaphylaxis Emergency Plan should be reviewed and amended as necessary.