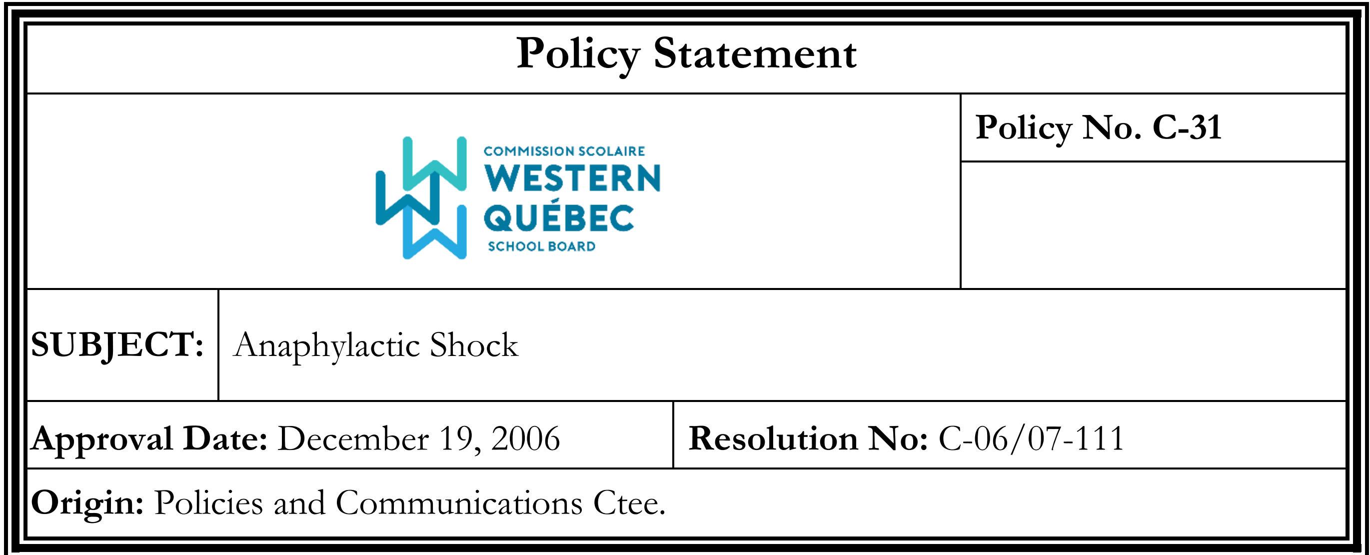

Policy Statement	
COMMISSION SCOLAIRE WESTERN QUÉBEC SCHOOL BOARD	**Policy No. C-31**

SUBJECT:	Anaphylactic Shock

Approval Date: December 19, 2006	**Resolution No:** C-06/07-111
Origin: Policies and Communications Ctee.	

1. OBJECTIVE

To provide a safe environment for anaphylactic students, to promote an understanding of their needs to the wider school community, and to provide guidelines that allow school staff to respond to individual circumstances and provide emergency treatment to the anaphylactic child

2. DEFINITIONS

Anaphylaxis-	The medical term for "allergic shock" or "generalized allergic reaction"
Education Act-	Education Act (Quebec), last amendment: February 2003
Governing Board-	See Chapter 3, Division II of the Education Act

3. POLICY

In conformity with Article 76 of the of the Education Act the school board shall ensure that the Governing Board of each school adopt procedures that address the following issues related to the objective of this policy:

A. Information and Awareness

1. Identification of anaphylactic students to school authorities
2. Identification of anaphylactic students to staff
3. In-service training for teachers and other school staff
4. Sharing information with other students
5. Sharing information with parents and parent organizations
6. Maintaining open communication between parents and the school

B. Avoidance

1. Providing allergen free areas
2. Establishing safe lunchrooms and eating area procedures
3. Allergens hidden in school activities
4. Holidays and special celebrations
5. Field trips
6. Substitute teachers, parent volunteers, and others with occasional contact
7. School bus safety
8. Anaphylaxis to insect venom

C. Emergency Response Plan

1. Clearly outlined communication plan
2. Location of epinephrine auto injections
3. Training older students to assist
4. Role-playing
5. School buses and out-of-school emergencies
6. Review process

NOTE: Any school that has not developed a policy for students at risk for anaphylactic reactions must use the enclosed procedure.

School Setting Procedures for Students at Risk for Anaphylactic Reaction

Notice of Documentation Available
and Procedures to Follow

November 2006

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Overview

The Official Document produced by the CLSC in Montreal in 2004 is available to all and the school board will furnish copies for all schools that wish to review their current practices and procedures. The last official English translation of this document is available on the Internet at the following address:

http://www.cmis.mtl.rtss.qc.ca/pdf/publications/isbn2-89510-028-4.pdf

The following practices and procedures must be observed:

1. **Parent's Responsibilities are:**

a. Parents must identify their child's allergy in writing using the documentation provided in the Appendix of the ***Intervention Guide for Students at Risk of Anaphylactic Reaction in the School Setting*** available from the address above. Alternative forms may be used but those in the guide above are comprehensive and available in both languages.

b. Parents must provide the school with an adrenalin kit for use at school if required. In the event that parents cannot provide this, the school is to advise the CLSC and the Director of Student Services.

(A prescription is not required to purchase an adrenaline kit but is required if there is an injection needed.)

c. Parents must provide the school administration with a doctor's recommended emergency treatment plan if the school is located far from a hospital.

2. School Administration's Responsibilities are:

a. To make all school staff aware of the students with severe allergies before school starts and as soon as new students arrive during the year.

b. To seek permission to post the student's picture and pertinent medical information in key locations in the school.

c. To elicit the student's cooperation.

d. Make arrangements, in conjunction with the CLSC, to provide in-service training for all staff and volunteers on how to recognize and treat anaphylactic reactions. Parents of students at risk are to be invited to these sessions.

e. To ensure that there are written directions posted for the administration of an EpiPen®.

f. To ensure all staff knows the location of the EpiPen®s. *Keep EpiPen®s in a safe but unlocked site.*

g. To ensure students in the school are aware of the serious nature of these allergic reactions. This can prevent problems and assist students who may have a reaction.

h. To establish allergy-free zones in schools and safe lunchroom practices.

i. To provide a separate eating area for students at high risk.

j. To ensure that field trip procedures take into account students at high risk, adults who accompany the child must be made aware of the students at risk. The medical form, emergency procedures and EpiPen® for a student must be taken on the trip.

k. To encourage parent organizations to arrange information sessions related to issues surrounding anaphylaxis.

Emergency Treatment

1. Communicate the emergency to someone trained to administer the auto injector (EpiPen®).
2. Administer the injection in accordance with the medical prescription as soon as possible after the first symptoms. **YOU HAVE VERY LITTLE TIME.** ***Important: Note the time.***
3. Have someone call 911 or the ambulance company previously identified while the injection is being given.
   - If no ambulance is available, transport the child to the nearest hospital. Another adult should accompany the driver.
   - If the hospital is far away, follow the directions provided in the emergency plan provided by the doctor.
   - Call the hospital to say you are transporting a child with an anaphylactic reaction.
4. Notify the parents or guardians and advise them that an EpiPen® was administered.
5. Reassure the child and keep him or her warm. Do not leave the child unattended.
6. Administer another EpiPen® within 10-15 minutes if breathing does not improve or the condition worsens.