	POLICY TITLE	CATEGORY
	Anaphylaxis Child Care Centres; Before & After School Programs; EarlyON Programs	Programs
	APPROVING BODY OR POSITION	APPROVAL DATE
	Director, Programs	November 2025
	PRIMARY LEGISLATION / REGULATION REFERENCE(S)	
	Child Care and Early Years Act, 2014	

POLICY

Family Day is committed to reducing the risk of exposure to known allergenic substances and to assisting all staff, students, and volunteers to prepare for an emergency when a severe allergy exists with a child and/or staff.

Anaphylaxis is a severe systemic allergic reaction, which can be fatal, resulting in circulatory collapse or shock. Epinephrine is the medication necessary in an anaphylactic emergency. The EpiPen® is one of the most commonly used auto injectors used to administer this medication, although there are other suitable auto injectors available.

Purpose

To endeavour to provide an allergy-safe environment when a severe anaphylactic condition exists and to reduce the risk of exposure to anaphylactic causative agents.

Scope

This policy applies to all Child Care and EarlyON staff members; students and volunteers. *Students and volunteers are not permitted to administer medication unless under extreme circumstances (i.e., a staff member is unconscious).*

Responsibility

Family Day

A written policy that is reviewed and signed by all centre staff, students and volunteers prior to the commencement of employment/placement and on an annual basis thereafter. A communication plan that provides information on anaphylaxis and gives a detailed strategy for reduction of risks.

- To ensure that the parent/guardian/staff completes the Individual Anaphylactic Plan for each child/staff before the child's start date/staff's first day of employment or upon discovering that the child/staff has anaphylactic allergy. (Appendix A)
- To ensure that the Parent/Guardian/staff provides training on the Individual Anaphylactic Plan to the Centre Supervisor/Designate when the child comes into care/staff commences employment. A record of this training (Appendix B) is signed, dated and kept in the child's file/staff file.
- To ensure that any new staff, students and volunteers who commence employment or placement after the training, will be given the training on the Individual Anaphylactic Plan by the Supervisor/Designate/Educator. A record of this training (Appendix B) is signed, dated and kept in the child's/staff file.
- To ensure that a letter is given to all parents and staff advising them of the identified allergies at the centre. (Appendix C)
- To ensure that each Program Manager annually reviews the policy and procedures with all reporting Supervisors.
- **All** individualized plans and emergency procedures will be always made readily accessible to:
 - all staff, students and volunteers at the child care centre and will be kept in the child's/staff's classroom.
 - All individualized plans and emergency procedures will be reviewed with a parent/guardian of the child/staff as required or annually to ensure the information is current and up to date.

Parent/Guardian/staff

- Parent/guardian/staff informs the child care Centre Supervisor/Designate of the child's/staff's
- anaphylactic allergy.
- The parent/guardian completes the Individual Anaphylactic plan on the parent portal or returns the plan to the Centre Supervisor/Designate
- The staff completes their Individual Anaphylactic Plan and reviews the completed Plan with the Centre Supervisor/Designate
- Parent/guardian/staff provides:
 - a description of the allergy
 - monitoring and avoidance strategies
 - consent allowing child care staff to administer epinephrine when they consider it necessary in an allergic emergency
 - the child care with a suitable auto injector
 - proper medical advice around dosage of epinephrine
 - menu information to the Centre Supervisor/Designate before placement of child
 - training to the Supervisor/Designate/Educator prior to the child coming into care, including information on possible symptoms, use of auto injector and all relevant information that
 - pertains to their child's allergy. The Supervisor/Designate/Educator will train any new staff, students or volunteers thereafter.
 - signed consent to have subsequent training of staff, students and volunteers completed by the Supervisor/Designate/Educator.
- Parent/guardian will review the individual anaphylactic plan on the parent portal as required or annually to ensure the information is current and up to date.
- If a child no longer requires Epinephrine, a note from the child's physician is required stating that the child no longer requires the Epinephrine for the allergy indicated in the Anaphylaxis Plan. Until the child's physician provides such a note, the Anaphylaxis plan remains in effect.

Staff

(including casual staff, students and volunteers)

- Staff review and sign the Anaphylaxis Policy Prior to employment/placement, and thereafter on an annual basis.
- Staff are aware of allergies in the classroom child care centre and post allergies in visible and easily accessible areas.
- Where a child/staff has an anaphylactic allergy, staff, students and volunteers are provided with training from the Supervisor/Designate/Educator. Training will include the procedures to be followed in the event of a child/staff having an anaphylactic reaction, including how to recognize the signs and symptoms of anaphylaxis and administer medication and the use of the auto injector. (Appendix A– Individual Anaphylaxis Plan)
- New staff, students and volunteers who commence employment or placement after the initial training will be given the training by the Supervisor/Designate/Educator.
- A record of this training (Appendix B) is signed, dated, and kept in the child's file.
- Staff conduct a check to confirm child(ren) have their required medication with them before each transition (i.e. moving from the class to the gym, leaving the school, etc.)
- Children arriving in the morning without their Epi-pen will not be admitted into the program and the parent/guardian will need to escort the child home to pick up the Epi-pen. If an afterschool child arrives to the program without their Epi-pen, the Educator will contact the parent & request the child be picked up immediately. The child will stay in the after-school program until the parent arrives, and the occurrence will be logged in the centre communication book.

- Staff review the Individual Anaphylactic Plans for children/staff in the centre prior to employment placement (Appendix A).
- Cook/Centre Supervisor provides a menu that avoids allergenic substances when necessary.
- Known allergies are posted in food preparation area, eating areas and activity rooms.
- Cook/staff are trained to reduce the risk of cross-contamination through purchasing, handling, and preparation of food.
- Staff follow universal precautions.
- Training will be repeated annually, and any time there are changes to any child's/staff individual anaphylactic plan
- Strategies

Foods/substances, which trigger allergies that may cause anaphylaxis:

- | | | | |
|--------------|-----------------|---------|----------------|
| • Peanuts | • Tree nuts | • Eggs | • Milk |
| • Sesame | • Insect Stings | • Latex | • Fish/Seafood |
| • Medication | • Other | | |

Examples of symptoms of anaphylaxis

- Skin: hives, flushing of face/body, welts, itching, warmth, redness, rash, swelling
- Respiratory (breathing): wheezing, shortness of breath, throat tightness, cough, chest pain/tightness, difficulty swallowing, congestion or hay fever-like symptoms (runny, itchy nose and watery eyes, sneezing)
- Gastrointestinal (stomach): nausea, pain/cramps, vomiting, diarrhea
- Cardiovascular (heart): pale blue colour, weak pulse, passing out, dizzy/lightheaded, shock
- Other: anxiety, feeling of impending doom, headache

Reducing Risk of Exposure

When an anaphylactic condition exists, Family Day will endeavor to reduce the risk of exposure by implementing the following:

- The Centre Supervisor and cook, in consultation with the parents, will review the menu for avoidance of causative agents, i.e. food.
- The Centre Supervisor, cook, and staff, will review other areas in the centre, i.e. storage cupboards, creative supplies and staff room to make sure certain foods and/or other causative agents are avoided throughout the centre.
- Staff will be aware of and avoid bringing items from home with causative agents in them.
- As part of our communication plan, a letter will be sent to all parents and staff to make them aware of the life-threatening allergy that exists and the need to avoid food allergens or other causative agents being brought into the centre.
- At time of registration, parent/guardian indicate any dietary needs their child may have and in collaboration with the Centre Supervisor, menus are reviewed to meet the needs of all children in the centre/program.
- Any food brought into the child care centre to support a child's special diet must be labeled with the child's name and in its original packaging; it will then be stored according to package directions.
- All food brought into the child care centre/program, must avoid all food allergens or other causative agents that currently exist within the child care centre.
- If parents/guardians choose to provide home-prepared meals or snacks, they must avoid all food allergens within the child care centre. The restricted list of food allergens will be provided to parents/guardians to accommodate this request. The food sent must be labelled with the child's name on it and storage instructions.
- Food handling training is available for staff to make them aware of identifying allergens in food purchasing. All staff are to understand cross contamination and review labels to identify allergens.

- Staff will endeavor to remove any causative agents, if possible, i.e. latex gloves, peanuts, fabrics, chemicals.
- The identified allergy will be posted in food preparation area, eating areas and activity rooms with the child's Individual Anaphylactic Plan. This plan will be revised as necessary.
- Children in child care programs are to be made aware of any allergies through group discussion.
- In child care programs, an Educator in the child's classroom must carry the auto injector in a Family Day fanny pack.
- Staff who have an Individual Anaphylactic Plan must always carry their auto injector on their person
- Children in Kindergarten/School Age programs are to be aware of the allergies that exist and the severity of them. The allergic child has to carry an auto injector with them at all times. Written parental permission for their child to carry the auto injector on them and administer when necessary is required on the Individual Anaphylactic Plan.
- If the parent/guardian does not give written consent for the Kindergarten/School Age child to carry the auto injector with them then an Educator in the child's classroom is to always carry it with them in a Family Day fanny pack
- A poster, which describes signs and symptoms of anaphylaxis and the procedure of how to administer epinephrine, is to be placed in a visible area that is relevant to the staff.
- Staff will carry a cell phone to be used in the event of an anaphylactic reaction when away from the centre.

Communication Plan

At Family Day, the children that we serve, and staff could have potentially life-threatening allergies. Some are at risk for insect sting allergies, but most are allergic to a specific food. Anaphylaxis is the severe reaction to an allergic substance such as food, medications, latex, insect stings or other substances. Anaphylaxis can lead to death if not treated and avoided in a child care environment. Staff are to be aware and educated about potentially life-threatening allergies to keep children and staff safe. Accurate and timely information is to be communicated by Family Day, the agency and its staff and parents/guardians as outlined in the responsibilities and strategies sections of this policy.

Emergency Protocol

- Staff always stay with the child/staff.
- Send a person for help.
- Administer epinephrine at the first sign of reaction, according to the Individual Anaphylactic Plan. Note the time.
- Call 911.
- Where possible, in the absence of the parent/guardian, when ratio allows, staff stay with the child when will accompany the child to the hospital.
- Bring a back-up auto injector if available.
- Contact parent/guardian/emergency contact.
- File a Serious Occurrence in a timely manner.
- In the event of an evacuation or participating in an off-site community outing, staff will carry a cell phone to be used in the event of anaphylactic reaction.

Training

(For centre staff, casual staff, students and volunteers)

- Where a child/staff has an anaphylactic allergy, all staff, students and volunteers are provided with training from the Supervisor/Designate/Educator. Training will include the procedures to be followed if a child/staff has an anaphylactic reaction, including how to recognize the signs and symptoms of anaphylaxis and administer medication. (Appendix A– Individual Anaphylaxis Plan)
- A record of this training (Appendix B) is signed, dated and kept in the child's/staff's file.
- Each year staff review the signs and symptoms of anaphylaxis.

- Staff practice using an auto injector (used for training purposes) and are encouraged to practice this technique.
- The cook and staff are aware of how to create an allergy-safe environment.
- Known allergies are posted in food preparation area, eating areas and activity rooms.
- Staff take special care to avoid exposure to allergy causing substances.
- Cook and Supervisor review menu for avoidance of anaphylactic agents.
- A letter from the Supervisor is given to parents/guardians and staff to communicate the need to be aware of allergies and to help reduce the risk by not bringing certain foods and/or products into the centre. (Appendix C)
- Staff and parents/guardians work as a community on behalf of the child's/staff's safety to communicate and educate themselves on anaphylaxis management.
- For further information and resources regarding allergies, refer to <https://foodallergycanada.ca/>

EarlyON Procedures

EarlyON Child and Family programs are unique, drop-in settings where parents/caregivers are required to supervise their children at all times. This policy section promotes an allergy-aware environment and outlines the specific preventative measures and emergency responses.

Responsibilities

- **EarlyON Staff**
 - Post visible signage indicating that the Centre is a nut free environment
 - Encourage all parents and caregivers to ensure snacks and drinks brought into the Centre are free from nuts
 - Promote & facilitate regular handwashing for all participants, especially before and after eating.
 - In the event of an anaphylactic reaction, immediately call 911 and assist the parent/caregiver as needed.
- **Parents/Caregivers:**
 - Informing EarlyON staff of any life-threatening allergies.
 - Carrying their child's prescribed epinephrine auto-injector at all times
 - Directly supervising their child at all times, including during snack times ensuring their child consumes only food they have brought from home, unless it is a designated snack provided by the program and approved by the parent

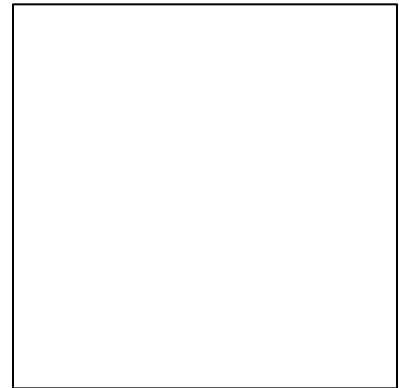
Please see: Appendix A: Individual Anaphylactic Plan
 Appendix B: Staff Training on Individual Anaphylactic Plan
 Appendix C: Parent/Guardian Letter re Children's Allergies
 Appendix D: Signs and Symptoms of Anaphylaxis Poster
 Appendix E: How to Use EpiPen® Poster

Individual Anaphylactic Plan

Individual's Name: _____

Allergy: _____

Signs and symptoms (*please list*): _____



Monitoring and avoidance strategies: _____

In the event that anaphylactic shock takes place the staff will:

1. Administer Epinephrine

Expiry date: _____ Storage: _____

Instructions/Dosage: _____

2. Call 911

3. Call Parent /Guardian/Staff's Emergency Contact

Name #1: _____ Name #2: _____

Work Phone: _____ Work Phone: _____

Home Phone: _____ Home Phone: _____

Cell Phone: _____ Cell Phone: _____

- I, _____ will inform and train the Supervisor/Designate/Educator of the specific
(name of Parent/Guardian/Staff)
signs and symptoms of _____'s allergy(ies) and anaphylactic reaction(s).
- I, _____ (parent/guardian/staff) hereby give consent to any person with training
(name of Parent/Guardian/Staff)
on this Plan at the child care centre to administer my child's epinephrine auto-injector and/or asthma medication and to follow the procedures set out in my child's individualized Anaphylaxis Plan and Emergency Procedures.
- I will train the Supervisor/Designate/Educator on the use of medication (Epinephrine) and will discuss the strategies that need to be in place to reduce the risk of exposure for my child/myself.
- I give my consent for the Supervisor, who I have trained, to train staff, students and volunteers.
- I give consent to administer _____ when symptoms of an anaphylactic reaction occur.
(name of medication)
- I give my permission to post this plan in the classroom, kitchen, and common areas and inform other families in the centre.
- This Individual action plan was developed in consultation with the above-mentioned child's physician.

Parent/Guardian/Staff Signature: _____ Date: _____

Supervisor Signature: _____ Training Date: _____

ease see over ➔

Individual Anaphylactic Plan

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My child is aware of his/her allergies and the severity of them. I give permission to my Kindergarten/School Age child to carry their Epinephrine at all times and administer when necessary. ☐ Yes ☐ No

Parent's Signature: _____

This form is updated yearly and/or when changes in medical conditions occur.

Administration of medication (Epinephrine)

Date medication administered: _____

Name of individual: _____

Medication administered: _____

Name of staff administering medication: _____

Date that used Epinephrine was returned to Parent/Guardian/Staff: _____

Parent/Guardian/Staff Signature: _____

Staff signature: _____

This is to be reviewed and signed off annually.

[illegible]

Parent Letter Re: Children's Allergies

Sample letter

- Supervisor may add bullets depending on the type of allergy
- To be printed on Family Day letterhead.

Dear Parents/guardians & staff;

Within the Child Care Centre and the Kindergarten/School Age Program, there are _____ children who have been identified with a potentially life-threatening allergy to _____ . This information is posted for all staff to be aware of on _____ .

We believe the best way to reduce the risk of accidental exposure to the children is to respectfully ask for the co-operation of the parents/guardians within _____ to:

Avoid sending peanut butter or products with peanuts or nuts <list any allergy that is anaphylactic> listed in the ingredients.

Ensure School Age Children wash their hands upon entering the child care area.

We endeavor to provide an allergy-safe environment for the children and with your help reduce the risk of anaphylaxis. Your cooperation and understanding of this matter is appreciated.

Yours truly,



Centre Supervisor

Signs and symptoms of anaphylaxis

Food
Allergy
Canada

Symptoms of **anaphylaxis** generally include 2 or more body systems:

Skin

hives, swelling,
itching, warmth,
redness

Breathing




coughing, wheezing,
shortness of
breath, chest
pain or tightness,
throat tightness,
hoarse voice, nasal

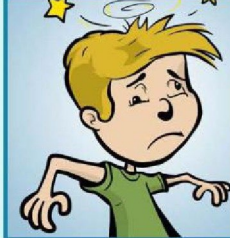

congestion or hay fever-like symptoms (runny, itchy
nose and watery eyes, sneezing), trouble swallowing,
choking feeling

Stomach




nausea,
pain or cramps,
vomiting, diarrhea

Heart


paler than normal
skin colour/blue
colour, weak
pulse, passing
out, dizziness or
lightheadedness




Symptoms may *not* always look as severe as *in the images shown*.

Images of symptoms courtesy of Kids' CAP

Treat anaphylaxis
right away, don't wait for
symptoms to progress.



Breathing or heart symptoms
alone can be **anaphylaxis**.



**KNOW IT.
TREAT IT.**
anaphylaxis

This resource is part of the Know it. Treat it. initiative
to empower Canadians and take the fear out of anaphylaxis.

foodallergycanada.ca/KnowIt



Scan to visit

How to use EpiPen® and EpiPen Jr Auto-Injectors.

Remove the EpiPen® Auto-Injector from the carrier tube and follow these 2 simple steps:

1. **Blue**
to the sky.



- Grasp with orange tip pointing downward
- Remove blue safety cap by pulling straight up - do not bend or twist

2. **Orange**
to the thigh.



- Place the orange tip against the middle of the outer thigh
- Swing and push the auto-injector firmly into the thigh until it "clicks"
- Hold in place for 3 full seconds



Trusted for over 25 years.



After using EpiPen®, you must seek immediate medical attention or go to the emergency room. For the next 48 hours, you must stay close to a healthcare facility or be able to call 911.