	POLICY TITLE		CATEGORY
	Anaphylaxis – Home Child Care		Programs
	APPROVING BODY OR POSITION		APPROVAL DATE
	Director, Programs		September 2022
	PRIMARY LEGISLATION / REGULATION REFERENCE(S)		
	Child Care and Early Years Act, 2014		

POLICY

Family Day Care Services is committed to reducing the risk of exposure to known allergenic substances and to assist Home Child Care Coordinators, caregivers, persons who are ordinarily residents of the premises or regularly at the premises, students and volunteers to prepare for an emergency situation when a severe allergy exists.

Anaphylaxis is a severe systemic allergic reaction which can be fatal, resulting in circulatory collapse or shock. Epinephrine is the medication that is 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 endeavor 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 Home Child Care Coordinators, Caregivers contracted with Family Day Care Services, and every resident of the home or every person regularly at the premises, students and volunteers. Residents / persons regularly at the premises, students and volunteers are not permitted to administer medication unless under extreme circumstances (i.e. caregiver is unconscious).

Responsibility

Family Day

- A written policy that is reviewed and signed by coordinators, caregivers and every person who is a resident of the home or regularly at the premises, students and volunteers.
- A communication plan that provides information on anaphylaxis and gives a detailed strategy for reduction of risks.
- To ensure that the Parent/Guardian completes the Individual Anaphylactic Plan for each child. (Appendix B)
- To ensure that the Parent/Guardian provides training on the Individual Anaphylactic Plan to Coordinator / Caregiver and residents of the home or regularly at the premises, students and volunteers. A record of this training (Appendix C) is signed, dated and kept in the child's file.
- To ensure that any new resident, student or volunteer will be given training on the Individual Anaphylactic Plan by the coordinator /caregiver. A record of this training (Appendix C) is signed, dated and kept in the child's file.
- To ensure that a letter is given to all parents advising them of the identified allergies at the home (Appendix D)
- To ensure that each Program Manager annually reviews the policy and procedures with all reporting Coordinators (Appendix A)

Parent/Guardian

- Parent informs the Coordinator of the child's anaphylactic allergy.
- Discussion takes place with the caregiver on her ability to meet the needs of the child.

- If, in agreement the parent completes the Individual Anaphylactic plan (Appendix B) , which includes emergency procedures for the specific child and returns the plan to the Coordinator.
- Parent / Guardian provides:
 - a description of the allergy
 - monitoring and avoidance strategies
 - consent allowing caregiver to administer epinephrine when they consider it necessary in an allergic emergency
 - caregiver with a non- expired suitable autoinjector.
 - proper medical advice around dosage of epinephrine
 - menu information to the coordinator / caregiver before placement of child.
 - training to the coordinator, caregiver, and residents of the home or persons regularly at the premises, students and volunteers. including information on possible symptoms, use of auto injector and all relevant information that pertains to their child's allergy
 - Signed consent to Coordinator so that the Coordinator can train new students and volunteers.
 - Sign off on training
 - Updated records if the allergy changes or new allergens are discovered
 - A review of the Individual Anaphylactic Plan as necessary, at least once a year
- In the event that 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 such note is provided by the child's physician, the Anaphylaxis plan remains in effect.

Caregiver, residents of the home, persons regularly at the premises, students and volunteers

- review and sign the Anaphylaxis Policy Prior to contract / placement and thereafter on an annual basis (Appendix A).
- are aware of allergies in the home and post allergies in visible and easily accessible areas.
- Where a child has an anaphylactic allergy, the above mentioned individuals are provided with training from a parent. Training will include the procedures to be followed in the event of a child 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 B – Individual Anaphylaxis Plan) Record of training will be signed, dated and kept on file.
- New students and volunteers who commence placement after the initial training will be given the training by the coordinator / caregiver. A record of this training (Appendix C) is signed, dated and kept in the child's file
- Caregiver will make sure the auto injector for the child(ren) is carried with her for any outings outside of the home.
- Known allergies are posted in food preparation / eating areas.
- Caregiver provides a menu that avoids allergenic substances when necessary.
- Caregiver follows universal precautions.
- Residents, other persons regularly in the caregivers home, students and volunteers are made aware of allergy and support strategies to avoid food or other allergen agents on premises.
- Residents and other persons in the home are made aware of the Individual Anaphylaxis Plan for the child.

Strategies

Foods/substances which trigger allergies that may cause anaphylaxis:

- | | | | |
|-----------------|-------------|-----------|---------------|
| • Peanuts | • Tree Nuts | • Eggs | • Milk |
| • Insect Stings | • Latex | • Seafood | • Medications |
| • 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/light headed, shock
- Other: anxiety, feeling of impending doom, headache

Reducing Risk of Exposure

When an anaphylactic condition exists, the Caregiver and Coordinator will endeavour to reduce the risk of exposure by implementing the following:

- Caregiver will determine if she is able and willing to meet the needs of the child.
- Coordinator and Caregiver in consultation with the parents will review the menu for avoidance of causative agents, i.e. food.
- Caregiver will review other areas in the home, i.e. storage cupboards to make sure certain foods and/or other causative agents are avoided throughout the home.
- Residents, other persons regularly in the home, students and volunteers will be aware and avoid bringing items from home with causative agents in them.
- As part of our communication plan, a letter will be given to all parents to make them aware of the life-threatening allergy that exists and the need to avoid foods or other causative agents being brought into the home
- If parents choose to provide home prepared meals or snacks, they must avoid all food allergens within the child care program in order to do so. The restricted list of food allergens will be provided to parents in order to accommodate this request. The food sent must be labelled with child's name on it and storage instructions.
- Caregiver is aware of identifying allergens in food purchasing, understanding cross contamination and reviewing labels to identify allergens.
- Caregiver will endeavor to remove any causative agents if possible, i.e. latex gloves, peanuts, fabrics, chemicals.
- Allergies will be posted in the home with Individual Anaphylactic Plan. The individual Anaphylactic Plan will be revised as necessary.
- School age children are to be aware of the allergies that exist and the severity of them. Discussions will take place with the parent, Caregiver and Coordinator as to how the auto injector will be stored (i.e. on the child or readily available in the home.) The auto injector must be carried when leaving the home for outings..
- Preschool Children are to be made aware of any allergies through group discussion.
- Caregiver is to carry the auto injector for preschool children when leaving home.
- Parent, coordinator and caregiver will determine where the auto injector will be kept in the home. (i.e. in a fanny pack, on the caregiver or readily available but out of reach of the children.)
- Caregivers are to be aware of nearest phone on outings.

Communication Plan

In order to avoid other children and parents from bringing in life-threatening substances to the home, the parents of the other children will be informed of the allergy and asked not to bring those substances to the home. Anyone else who has contact with the child will also be made aware of the allergy

Emergency Protocol

1. Caregiver (staff) stays with the child at all times.
2. Send person for help if possible.
3. Administer epinephrine at the first sign of reaction, according to the Individual Anaphylactic Plan. Note the time.
4. Call 911.
5. When possible caregiver to stay with child when being accompanied to hospital to provide assistance to child if another adult over 18 years of age is available to stay with the other children.
6. Bring back-up auto injector if available.
7. Contact parents and the Coordinator
8. The Coordinator will report the incident as a Serious Occurrence to the Program Manager and will fill in Serious Occurrence form in a timely manner.

Training

(for Coordinators, Caregivers, residents, other persons regularly In the home students and volunteers)

- Where a child has an anaphylactic allergy, Coordinators, Caregivers, residents of the home, persons regularly at the premises, students and volunteers are provided with initial training from a parent. Training will include the procedures to be followed in the event of a child having an anaphylactic reaction, including how to recognize the signs and symptoms of anaphylaxis and administer medication. (Appendix B – Individual Anaphylaxis Plan)
- New students and volunteers who commence placement after the initial training, will be given the training by the Coordinator
- A record of this training (Appendix C) is signed, dated and kept in the child's file.
- Each year Coordinators and Caregivers reviews the signs and symptoms of anaphylaxis.
- Where possible Caregiver is to practice using an auto injector (used for training purposes) and are encouraged to practice this technique.
- Caregiver is aware of how to create an allergy-safe environment.
- Known allergies are posted in food preparation and eating areas
- Caregiver takes special care to avoid exposure to allergy causing substances.
- Caregiver reviews menu for avoidance of anaphylactic agents.
- Communicate with other parents the need to be aware of allergy and to help reduce the risk by not bringing in certain foods and/or products into the home. (Appendix D)
- Caregiver is trained by parent for child's Individual Anaphylactic Plan. They sign off on this training. Training sheet will be kept on file.
- Coordinator, caregiver, residents of the home, persons regularly at the premises, students and volunteers work as a community on behalf of the child's safety to communicate and educate themselves on anaphylaxis management.

Record Retention

All related records, reports or other documents will be maintained in a secure location for at least three years from the date they are made as per section 82 of the Regulation.

Please see: Appendix A: Anaphylaxis Policy Review for Home Child Care
Appendix B: Individual Anaphylactic Plan
Appendix C: Staff Training on Individual Anaphylactic Plan
Appendix D: Parent Letter re Children's Allergies
Appendix E: Epinephrine Permission Form – Home Child Care

Anaphylaxis Policy Review for Home Child Care

- I have reviewed the Anaphylaxis Policy for Home Child Care and understand the policy.
- This policy will be reviewed and signed annually.

Caregiver's name (Print)

Signature

Date (dd/mm/yy)

Family Member #1 (Print)

Signature

Date (dd/mm/yy)

Family Member #2 (Print)

Signature

Date (dd/mm/yy)

Family Member #3 (Print)

Signature

Date (dd/mm/yy)

Family Member #4 (Print)

Signature

Date (dd/mm/yy)

Family Member #5 (Print)

Signature

Date (dd/mm/yy)

Family Member #6 (Print)

Signature

Date (dd/mm/yy)

Family Member #7 (Print)

Signature

Date (dd/mm/yy)

Family Member #8 (Print)

Signature

Date (dd/mm/yy)

Family Member #9 (Print)

Signature

Date (dd/mm/yy)

Family Member #10 (Print)

Signature

Date (dd/mm/yy)

Child Care Coordinator (Print)

Signature

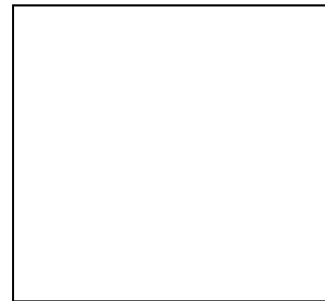
Date (dd/mm/yy)

Individual Anaphylactic Plan

Child's Name: _____

Allergy: _____

Signs and symptoms (*please list*): _____



Monitoring and avoidance strategies: Please be specific. (i.e.-Does the child have to ingest the allergen? What has the child reacted to and what were the symptoms in the past?) _____

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

1. Administer Epinephrine

Expiry date: _____ Dosage: _____

Instructions: _____

2. Call 911

3. Call Parent /Guardian

Name #1: _____ Name #2: _____

Work Phone: _____ Work Phone: _____

Home Phone: _____ Home Phone: _____

Cell Phone: _____ Cell Phone: _____

4. Call Coordinator / Family Day Care Services

5. Follow Serious Occurrence Procedure

- I, _____ will inform and train the Coordinator, Caregiver, students and
(name of Parent/Guardian)
- signs and symptoms of _____'s allergy and anaphylactic reaction.
(child's name)
- I will train the Coordinator, Caregiver, students and volunteers 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.
- I give consent to administer _____ when symptoms of an anaphylactic reaction occur.
(name of medication)
- I give my consent for the Coordinator, who I have trained, to train new students and volunteers.
- I give my permission to post this plan in the kitchen and eating area and to inform other families in the home
- This Individual action plan was developed in consultation with the above mentioned child's physician.
-

Individual Anaphylactic Plan

Parent/Guardian Signature: _____ Date: _____

Caregiver Signature : _____ Date : _____

Coordinator Signature: _____ Date: _____

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

I give permission for my school age child to self-administer medication when necessary. Yes No

Parent's Signature: _____ Date : _____

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

Administration of medication (Epinephrine)

Date medication administered: _____

Name of Child _____

Medication administered: _____

Name of Caregiver administering Epinephrine: _____

Date that used (Auto injector) Epinephrine was returned to parent: _____

Parent signature: _____

Coordinator signature: _____

This form is to be included in child's file

The following Coordinator, caregiver, residents of home and other persons regularly at the home have been trained on the Individual Anaphylactic Plan for _____ (child's name).

This is to be reviewed and signed off annually.

[illegible]

Sample Parent Letter Regarding Child(ren)'s Allergies

Sample letter

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

Dear Parents,

A child is enrolled in (Caregiver's name)_____home who has been identified with a potentially life-threatening allergy to (allergen)_____. This information is being communicated to you to help reduce the risk of accidental exposure to the child.

We are trying to provide an allergy- safe environment for the child. Your cooperation and understanding of this matter is appreciated.

Yours truly,

Home Child Care Coordinator

Epinephrine Permission Form - Home Child Care

Child's Name: _____ Allergy: _____

Name of Medication Provided: _____

Date of Purchase: _____ Expiry Date: _____

I, _____, give permission for _____
(Parent's name) (Caregiver's name)

to administer the Epinephrine to my child _____, should any of
the following symptoms be present (list usual signs/symptoms of allergic reaction): _____

Parent Signature () Emergency Contact Telephone #

Common Anaphylactic Symptoms

Note: All symptoms **do not** have to be present.
Symptoms **do not** appear in a particular order.
No two reactions are the same.

- | | | |
|-------------------------------|------------------------|-----------------------|
| ▪ Tingling, itching, swelling | ▪ Sense of fear | Throat tightness |
| ▪ Difficulty swallowing | ▪ Difficulty breathing | Hives |
| ▪ Chest tightness | ▪ Wheezing, coughing | Flushing of face/body |
| ▪ Stomach cramping/ vomiting | ▪ Feeling faint | Weakness or dizziness |

In the event of an allergic reaction:

1. Administer the Epinephrine/Adrenaline.
2. Call 911 and go to the nearest hospital.
3. Call the parents and Family Day.

DO NOT hesitate to administer the Epinephrine if anaphylactic symptoms appear.

Epinephrine is designed to slow the allergic reaction down, not stop it, so always proceed to a hospital even if the symptoms appear to have gone away.

The effects of the Epinephrine will wear off 10–20 minutes after the injection. Therefore medical attention needs to be secured for the child **as soon as possible**, in case the symptoms return after injection.