### Purpose

An allergic reaction in its most severe form is called anaphylaxis. Reactions can occur generally within minutes or within two hours. The most dangerous symptoms of an allergic reaction involve breathing difficulties caused by swelling of the airways or a drop in blood pressure indicated by dizziness/lightheadedness or feeling faint/weak. Both can lead to death if untreated.

People at risk of a life-threatening allergic reaction should be evaluated by an allergist.

Epinephrine – also known as adrenaline – is the drug form of a hormone that the body produces naturally. Epinephrine is the treatment or drug of choice to treat anaphylaxis and is widely prescribed for those at risk of anaphylaxis. All efforts should be directed toward its immediate use. Individuals at risk of anaphylaxis are instructed to carry it with them at all times when age-appropriate.

### Policy

Whenever staff are dispensing medication staff will be cognizant of the “five rights of medication”; right person, right medication, right amount, right time and right method.

Each person with a known life-threatening allergy will have an Anaphylaxis Emergency Plan complete with a picture of the individual. This plan should be posted in a conspicuous area in the program. The plan should include the signs and symptoms of anaphylaxis and instructions on when and how to use epinephrine. Copies of such plan will also be placed in the Emergency Contact Binder and in the Master Binder, located in our staff room.

Parents will review the plan annually. Any significant changes to the child’s plan must be redeveloped and signed by a physician.

All staff, students and volunteers will receive training on the Anaphylaxis Protocol policy by the Program Director or designate and each will sign off on the training prior to their first shift. Policies will be reviewed annually thereafter by staff, students and volunteers.

Children who have been prescribed epinephrine must have at least one epinephrine auto-injector with them at all

When a child is admitted with a known life-threatening allergy, staff, students and volunteers will be familiarized with the use of epinephrine auto-injectors as well as where they are kept in the program. Staff, students and volunteers will complete EpiPen® training annually. (Any Auto-Injector that is a generic brand will require alternative training, which will be provided.) This training will occur as part of orientation and annually thereafter.

Any person receiving emergency epinephrine must be transported to hospital immediately for evaluation and observation.

If a child is taken to the hospital the Serious Occurrence procedures will be followed.

### Procedure

1. When a known life-threatening allergy is indicated on the Medical History form, parents will be requested to complete an Anaphylaxis Emergency Plan. This plan will be signed by a physician and reviewed annually by the parent.
2. Because absolute avoidance of the allergy-causing substance is necessary to avoid future reactions, the child care program will take every necessary precaution in the centre. Some of these will include the elimination of peanuts and peanut products in the centre, reading labels prior to serving or cooking food to children, labelling all children’s food and drink intended for that child, handwashing before and after serving food, ensuring food surfaces are clean, and there are adequate serving utensils to avoid cross contamination, and prohibiting families from bringing in their own snacks and outside food items into the children’s rooms.
3. Parents will be encouraged to have medical identification for their child such as a MedicAlert® bracelet (or necklace, when age appropriate).
4. Parents will be responsible for supplying the program with an auto-injector for their child. Parents will consent to the use of the epinephrine using our medication form.
5. Auto-injectors must be kept in locations that are easily accessible and ***not*** in locked cupboards or drawers. These locations should be known to all staff members, students and volunteers.
6. Auto-injector expiry dates should be checked regularly to ensure that devices are current.
7. If the need arises to use the EpiPen® the following steps should be taken:

* Call 911 and seek immediate medical attention
* Remove epipen from its storage tube, remembering, “Blue to the sky, orange to the thigh”.
* Grasp unit with the orange tip pointing downward Form fist around the unit (orange tip down)
* With your other hand, pull off the blue safety release.
* Hold orange tip near outer thigh
* Swing and **jab firmly** into outer thigh until it clicks so that the unit is perpendicular (at a 90o angle) to the thigh. (Auto-injector is designed to work through clothing)
* Hold **firmly against thigh** for approximately 10 seconds. (The injection is now complete. Window on auto-injector will show red)
* Remove unit from thigh and massage injection are for 10 seconds
* Carefully place the used auto-injector (without bending the needle), needle-end first, into the storage tube of the carrying case that provides built-in needle protection after use. Then screw the cap of the storage tube back on completely, and take it with you to the hospital emergency room.
* Complete required documentation.

1. The cook in the child care program must be aware of all food exclusions and plan the menu accordingly. Substitutions will be made for all children with food exclusions.
2. The cook must carefully read all labels when preparing, ordering and serving foods to avoid a reaction.
3. Staff will make the Property Manager aware of bees or stinging insects in the yards.
4. If parents wish to bring in treats for special occasions, they may only be commercially prepared, unopened packages with an accompanying ingredient list.
5. The Salvation Army Village Day Nursery will remain committed to providing education to our staff, volunteers, students and other families in regards to life-threatening allergies.