Life Threatening Allergies

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KEY WORD SEARCH

Allergy  Life-Threatening
Anaphylaxis  Medic Alert
Epinephrine auto-injector

POLICY STATEMENT

The Parks & Recreation Branch attempts to create environments that minimize the risk of exposure to life threatening allergens within the limits of the setting. This policy recognizes that the risk of accidental exposure can be reduced but not eliminated. As such, despite the efforts of City staff to create an allergen-safe environment, the City cannot guarantee that environments will be allergen free.

If a client with a life threatening allergy has been exposed to the allergen or shows symptoms of anaphylaxis, the staff must administer the Epinephrine auto-injector or assist with the administration of the Epinephrine auto-injector and call 911.

INTENT

The intent of this policy is to provide Parks & Recreation staff and Municipal child care staff with direction to manage and minimize the risk of exposure to allergens for clients who have severe or life threatening allergies. This policy also outlines the course of action in the event of a life threatening allergic reaction.

DEFINITIONS

Allergen-Safe Environment: An environment that minimizes the risk of exposure to life threatening allergens through: signage, information sharing and awareness, training and education, avoidance practices and an established emergency response protocol.

Anaphylaxis: A life threatening allergic reaction that can lead to rapid death if untreated. The reaction may begin with itching, hives, vomiting, diarrhea, or swelling of the lips or face; within moments, the throat may begin to close, choking off breathing and leading to unconsciousness and death.¹

Epinephrine Auto-Injector:  a device that administers a specific dose of epinephrine (TwinJect®, Epipen®). It is prescribed by a physician and used in emergency situations in case of severe allergic reactions.

APPLICATION

This policy applies to all Parks & Recreation programs and Municipal child care programs where Parks & Recreation staff are assuming a level of care role.

The emergency protocol outlined in Appendix A will be followed for all Branch programs and services including adult programs, drop-ins and memberships.

POLICY DIRECTIVES

Supporting A Safe Environment

Staff will work cooperatively with participants or parents/guardians of participants with life threatening allergies to minimize risk of exposure to allergens. This includes creating and maintaining an allergen safe environment, including an allergen safe eating environment, as much as possible within the limits of the facility and the program.

PROCEDURES/RESPONSIBILITIES

1. It is the responsibility of the participant or the parent/guardian of a child with a life threatening allergy:
   a. to identify themselves or child to staff before the start of the program and provide information regarding the allergens that trigger an anaphylactic reaction.
   b. to complete and sign the medication administration form (see Policy 9.2.0 Medication Administration) providing;
      • Recreation Facilities: ONE photograph that is a reasonable likeness of current appearance to the participant that will be attached to the medication administration form/log for quick and effective identification in the case of a Life Threatening reaction.
      • Municipal child care Programs: TWO photographs that are a reasonable likeness of current appearance to the participant. One photograph will be attached to the Medication Administration Request Form/ Medication Log and the other will be posted within the facility on the Anaphylaxis Emergency Plan (Appendix F).
   c. must provide two current auto-injectors prescribed by a physician and labelled with the participant’s name, the physician’s name, the name of the medication, the dose, the medication route, the schedule for administration and instructions for storage. A fanny pack must also be provided to store the auto-injectors. One auto-injector will be carried by the participant at all times and the other will be kept stored in the facility or carried in the first aid kit on outings. Where not possible for the auto-injector to be carried by the participant, it will be carried by a staff member or in an area in close proximity and easily accessed by the participant/staff.
PARKS & RECREATION  
Policy & Procedures

**Number**  9.8.0.

**It is the responsibility of staff:**

- **a.** to ensure that all forms are filled out correctly and completely (see Policy 9.2.0 Medication Administration).
- **b.** to share information about the participant with life-threatening allergies to all staff in the facility that may come into contact with the participant before the program begins and ensure all staff are trained annually.
  - Front-line staff will receive annual Core training on allergy awareness, anaphylaxis, creating allergen safe environments and administration of an Epipen® and of the modified administration of a Twinject®.
    - **Recreation Facilities/Programs:** The Supervisor of the program will keep documentation of annual training or updating.
    - **Municipal child care facilities:** The Supervisor of the Municipal child care Program will complete the “Life Allergy Policy Review” form (Appendix G).
- **c.** Staff will make themselves available for additional one-on-one instruction by the participants or parents/guardians if requested.
- **d.** to ensure two epinephrine auto-injectors are on site whenever participant attends a registered program.
  - Area Managers or designates may authorize the funding of an additional Epipen® in the event that a family is unable to supply two auto-injectors.
  - On a monthly basis, the Program Coordinator/Supervisor or designate will check the program-supplied Epipen® for expiration, discoloration or particles in the epinephrine.
- **d.** to communicate the presence of a participant with anaphylaxis to other participants/parents/guardians as necessary. The following tools will be used:
  - A letter informing parents/guardians that there is a child in the program who suffers from a life-threatening allergy (sample attached as Appendix B). This letter is to remain generic and will not contain the participant’s name.
  - Signs posted outside the door of lunch areas and other contained areas within the setting requesting that the specified allergen not be brought into the area (sample attached as Appendix C).

**Emergency Protocol for Suspected Life-Threatening Allergic Reaction**

In the event of a suspected life-threatening allergic reaction, staff will follow the protocol outlined in Appendix A.

**MANAGING AND MINIMIZING THE RISK**
Staff will refer to the checklist (Appendix D) to create an allergen-safe environment. Staff will refer to Appendix E for avoidance practices.

Whenever possible, day trips, excursions and events will be planned respecting the needs of anaphylactic clients, as the risk of accidental exposure to allergens increases at these times.

REFERENCES

Anaphylaxis In Schools and Other Child Care Settings, The Canadian Society of Allergy and Clinical Immunology

Child Care Services Policy: Life Threatening Allergies 2001.

Guidelines for Creating Safe and Healthy Schools for Anaphylactic Students, Ottawa Carleton District School Board 1998.


Parks & Recreation Branch Policy: 9.2.0 Medication Administration

Parks & Recreation Branch Procedure: 9.2.1. Medication Administration

Attachments

Appendix A – Emergency protocol
Appendix B – Sample letter
Appendix C – Signs to be posted
Appendix D – Checklist
Appendix E – Avoidance practices
Appendix F – Anaphylaxis Emergency Plan (child care Programs)
Appendix G - Life Allergy Policy Review (child care Programs)
Appendix A

Parks and Recreation Branch Emergency Procedure
In the Event of Suspected Life-Threatening Allergic Reaction

1) Remove the individual from the hazard
2) If not alone send someone to call 911
3) Lie the individual down
4) Remove auto-injector from case.
5) Administer auto-injector
6) Call (9) 9-1-1 if not done in step 2
   a) request emergency services and specify that an individual appears to be having a life-threatening allergic reaction and that epinephrine has been administered.
   b) provide the Individual’s level of consciousness and breathing
   c) provide your name, your telephone number, your location
   d) Stay on the line and answer 9-1-1 operator’s prompts
7) Initiate Building Emergency Protocol
8) Call the program Supervisor or designate once the situation is under control
9) The program Supervisor or Designate then contacts the parents/guardians and/or emergency contact
10) Monitor the vital signs and assess the need for a second or third auto injector. Do not administer more than three auto injectors

In the case of a child, in all possible cases where the safety of the other participants will not be compromised, a staff member will accompany or follow the participant to the hospital and remain with them until a parent/guardian arrives. Staff will take any unused auto injectors with them and will give parents any remaining auto injectors belonging to the child.
PLEASE POST ON HEALTH AND SAFETY BOARD

Administering An EPIPEN® Auto Injector – Single Dose Epinephrine

1) Pull off GREY safety cap.

2) Press the EpiPen® down firmly into OUTER MID-THIGH of individual’s leg with the black tip end of the needle and hold for 10 seconds.

3) Verify that the medication was administered (should see an exposed needle). If no needle exposed repeat the last step. If the medication was still not delivered use the second auto-injector.

4) Record the time. If symptoms persist or reoccur, administer the second auto-injector.

5) Place the used auto-injector in a single-use biohazard sharps container and give it to the paramedics.

Administering a TWINJECT® Auto Injector – 1st dose of the Double Dose Epinephrine

1) PULL off cap #1 to see a RED tip. Never put thumb, finger, or hand over the RED tip.

2) PULL off #2 end cap.

3) Place RED tip against mid outer-thigh (can go through clothes).

4) Press down firmly into outer mid-thigh until auto-injector activates-hold for 10 seconds.

5) Verify that the medication was administered (should see an exposed needle). If no needle exposed repeat the last step. If the medication was still not delivered use the 1st dose of a second auto-injector.

6) Record the time. If symptoms persist or reoccur, administer the second auto-injector.

7) Place the used auto-injector in a single-use biohazard sharps container and give it to the paramedics.
Sample Letter to Parents/Guardians/Participants stating there is an Anaphylactic Individual Registered in the Program

Dear Parent/Caregiver/Guardian:

Parks and Recreation Branch staff strive to provide a safe and healthy environment for all clients in city facilities.

There is a participant in your child’s program who has a severe allergy to __________________________.

Individuals with life threatening allergies need to know precautions have been taken so that they can feel confident and safe in our facilities. Exposure to even a tiny amount of this item could be life threatening. We can all play a role in preventing a dangerous situation from occurring. Please check the list of ingredients on items you bring or send to our program and avoid any products containing __________________________. Please contact the program supervisor before bringing food to share in the program.

If the allergy is to peanuts, we ask that you take the following additional precautions, because peanut butter residue is easily transferred from hands or clothing to items in our facility. If peanut butter is eaten before coming to the program, we ask that both children and parents wash their hands and face thoroughly with soap and water, brush their teeth and check their clothing for peanut butter residue because minute amounts of Peanut Butter can cause fatalities.

Thank you for your support and helping us keep our programs safe. If you have any questions, please call __________________________.

Sincerely,

Program Staff
ALLERGY ALERT

Please do not bring peanuts into this room

Thank you for helping to keep our program safer.
ALLERGY ALERT

Please do not bring _____________________________ into this room.

Thank you for helping to keep our program safer.
LIFE THREATENING ALLERGY CHECKLIST

Information & Awareness

- Client/Participant informed that participant will not be admitted to registered program without their medication
- Client with a severe allergy has been identified to all staff as necessary
- 9.2.0 Medication Administration Consent completed
- Instructions on use of auto-injector posted on Health and Safety Bulletin Board
- Auto-injector and anaphylaxis training is provided for staff and staff are required to attend annually
- Letters asking for cooperation sent before program starts or as soon as patron is identified
- Work cooperatively with client or parent with life-threatening medication
- Information sessions and displays

Creating Allergen-Safe Environments

- Discourage sharing of food, straws, utensils, etc.
- Encourage hand-washing prior to start of program
- Clients with severe food allergies to only eat food provided from home (except with parental consent)
- Careful label reading for foods purchased for the program
- Hand washing before and after eating
- Procedure in place if allergen accidentally brought into environment (e.g.; put offending food back in lunch bag with a note to the parent/guardian, discard food, hand washing after touching food with allergen, clean up area)
- Alternatives for client with life threatening allergies (container of safe foods approved by parent)
- Clean up crew for eating area, before and after eating (client with severe food allergies is not to participate in clean up)
- Awareness of hidden sources of allergens (e.g.: craft supplies, play dough, stuffed toys, paint, etc.)
- Awareness of allergens in foods brought by clients and staff and repeat letters to parents if necessary or make phone calls to encourage cooperation
- Buddy system for young clients with life-threatening allergies
- Signage in rooms and facilities to encourage identification of clients with severe allergies and to increase awareness of allergens in all environments
- Ensure there are LATEX-FREE band-aids in the 1st aid kit

Emergency Response

- Life Threatening Allergic Reaction Protocol
- Rapid communication strategy in place
- Auto-injectors in safe, accessible and known location (preferably with client)
- Complete major incident report forms
Avoidance Practices

Food Allergies

Staff will support efforts to minimize the risk for participants with life threatening food allergies through the following strategies:

i) Staff will endeavor to provide allergen-safe areas by:
   (1) providing a safe eating area, within the limits of the facility and the program, for the client with anaphylaxis if required;
   (2) developing an approach for monitoring allergen-safe areas and identifying high risk areas;
   (3) using a cooperative approach with all parties (parents, other staff, other participants, etc.);
   (4) refraining from eating foods containing allergens, but if they do, taking proper steps to neutralize the effect (e.g.: hand washing, brushing teeth); and,
   (5) ensuring a clean environment and proper disposal of garbage.

ii) Staff will establish safer eating practices by:
   (1) suggesting that clients with life-threatening allergies only eat food from home or approved by the parent/guardian for consumption;
   (2) discouraging the sharing of food, utensils and containers;
   (3) encouraging the client with life-threatening allergies to exercise caution with their food to avoid cross-contamination;
   (4) establishing a hand-washing routine before and after eating;
   (5) ensuring that eating surfaces are clean; and,

iii) Staff will be aware of possible hidden allergens present in:
    (1) non-food materials such as: play dough, beanbags, stuffed toys, counting aids, special occasion activities and foods.
    (2) contaminated items: toys, books, computer keyboards, musical instruments, and balls.

Insect Venom

Staff will be aware of the following precautions to reduce the risk of exposure:

i) Avoid loose, hanging clothes, floral patterns, blue and yellow clothing, fragrances
ii) Remove or cover garbage where possible
iii) Eat inside whenever possible
iv) Encourage the use of a straw
v) Encourage water instead of sweet beverages
vi) Do not throw sticks or stones at nest
vii) Inform maintenance staff of nests and ask that they be removed
viii) In case of insect stings, never slap or brush the insect off and never pinch the stinger. Instead, flick the stinger out with a fingernail or credit card.

Latex

Staff will be cautious of the following when dealing with participants having latex allergies:

i) Latex dipped products, e.g. gloves, balloons, TheraBands®,
ii) Pacifiers, feeding nipples, erasers, craft supplies, Halloween masks, adhesives, elastic fabric, diapers, underwear, cleaning gloves, Koosh balls, rubber ducks, soccer/tennis/volleyballs,
iii) Coated or lacquered racquet/tool handles, rubber mats, carpet backing, foam rubber, medical gloves, first aid tape, band aids, make up, rubber gym floors, rubber pants, rubber bands,
iv) Water toys, swim goggles, bathing caps, scuba equipment, crutch tips, auxiliary pads,
v) Handgrips, infant toothbrush-massager, wheelchair cushions, tires, zippered plastic storage bags,
vi) Medical supplies, e.g. catheters, Bandaids.

Day Trips and Excursions

Outings can increase the risk of accidental exposure for anaphylactic clients, staff will:
   i) Have all information about anaphylactic clients available on the trip
   ii) Make sure all staff are aware of the identity of any anaphylactic clients
   iii) Ensure the that the two auto-injectors are on hand
   iv) A staff should be “buddied” with an anaphylactic client at all times
   v) Anaphylactic clients should not eat any food that is not from home
   vi) Verify that ambulance response time to the site is no greater than 20 minutes (refer to Outing Policy).
Anaphylaxis Emergency Plan
(Municipal child care programs)

Child’s Name: _______________________________ Enrolment Date: __________

This person has a potentially life-threatening allergy (anaphylaxis) to:

(Check the appropriate boxes.)

☐ Peanut ☐ Other: ☐ Tree Nuts ☐ Insect Stings ☐ Egg ☐ Latex ☐ Milk ☐ Medication

Food: The key to preventing an anaphylactic emergency is absolute avoidance of the allergen. People with food allergies should not share food or eat unmarked / bulk foods or products with a “may contain” warning.

Epinephrine Auto-Injector: Expiry Date: ________________________________

☐ EpiPen® Jr ☐ Twinject™

LOCATION OF AUTO-INJECTOR(S): ________________________________

Asthmatic: Person is at greater risk. If person is having a reaction and has difficulty breathing, give epinephrine auto-injector before asthma medication.

A person having an anaphylactic reaction might have ANY of these signs and symptoms:

- Signs and Symptoms Parent has witnessed: ____________________________________________________________

- Skin: hives, swelling, itching, warmth, redness, rash
- Respiratory (breathing): wheezing, shortness of breath, throat tightness, cough, hoarse voice, chest pain/tightness, nasal congestion or hay fever-like symptoms (runny itchy nose and watery eyes, sneezing), trouble swallowing
- 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

Act quickly. The first signs of a reaction can be mild, but symptoms can get worse very quickly.

1. Call 911. Tell them someone is having a life-threatening allergic reaction. Ask them to send an ambulance immediately.
2. Give epinephrine auto-injector (e.g. EpiPen® or TwinjectTM) at the first sign of a reaction occurring in conjunction with a known or suspected contact with allergen. Give a second dose in 10 to 15 minutes or sooner IF the reaction continues or worsens.
3. Call contact person.

The undersigned patient, parent, or guardian authorizes any adult to administer epinephrine to the above-named person in the event of an anaphylactic reaction, as described above. This protocol has been recommended by the patient’s physician.

Physician Name: ________________________________

Patient/Parent/Guardian Signature __________ Date __________

Physician Signature __________ Date __________

Reg.262.36.1
All Municipal child care program staff members must review the Life Threatening Allergies Policy and the Individual Anaphylaxis Emergency plans for children enrolled in the program annually.

I have read and understand the Life Threatening Allergies Policy, and will follow the guidelines set out in this policy.

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