**MEDICAL NEEDS, INCLUDING ANAPHYLAXIS**

**POLICY**

It is the policy of Cook's School Day Care Inc to support the medical needs of any child and employee, student, volunteer, contract worker and to reduce the risk of exposure to any causative agents or situations that may exacerbate the medical condition or cause a reaction (e.g. anaphylactic reaction).

**For this policy any reference to:**

* **Staff will mean paid employee, students, volunteers, and enhanced staff.**
* **Supervisor will include the Centre Supervisor, Assistant Centre Supervisor, and Executive Director.**

## Procedures

### communication plan

#### Upon enrollment or commencement of duties, and as changes occur, the adult with medical needs or parent of child with medical needs will:

* Identify risks on the application form relating to:
  + Allergic reactions and anaphylaxis.
  + Medical conditions or illnesses.
* Complete:
  + An Individual Emergency Response Plan (IERP) Form (described below).
  + A Medication Authorization form, if applicable.
* The Supervisor will note in the main communication book that an adult commencing duties or child enrolling has:
  + An allergy that is or is not anaphylactic.
  + A medical condition.
  + An IERP for review.

If there is a change to an active IERP, it is noted in the main communication book. See Verification *of Notification of Medical Needs* later in this document.

Information on medical emergencies, life threatening allergies, including anaphylactic allergies is made available to parents through memos, postings, handouts, and the Parent Handbook, website and Facebook.

### Individual Emergency Response Plan (IERP)

Cook’s School Day Care Inc’s Individual Emergency Response Plan includes, but is not limited to:

* Risk of anaphylaxis YES or NO
* Steps to be followed to reduce the risk of the child being exposed to any causative agents or situations that may exacerbate a medical condition or cause and allergic reaction or other medical emergency.
* Description of any medical devices used by the child and any instructions related to use.
* Description of the procedures to be followed in the event of an allergic reaction or other medical emergency.
* A description of the supports that will be made available to the child while in care.
* Any additional procedures to be followed when a child with a medical condition is part of an evacuation or participating in an off-site field trip.
* Other pertinent information.

The Supervisor is responsible to ensure that all staff /contract workers are made fully aware the information contained in the IERP. If additional information is needed to better understand a medical need, more information will be requested from the parent or community partners (i.e., Health Unit, Five Counties Children Centre).

The Supervisor will ensure that IERP’s are reviewed by the parent every 6 months. Child Care Information Change Notices are available if the parent needs to adjust the IERP before the 6 months.

The original IERP is stored in the office master binder. For easy access, a copy of all active IERP’s, including person’s photo, is:

* Posted in each activity/eating area.
* Kept in the attendance binder of the applicable person’s group(s).
* Kept with the emergency information pages of the applicable person’s group(s) for trips or emergencies off of the premises.

### Monitoring Compliance

* The centre Quarterly Program Statement Monitoring checklist is completed to ensure implementation of procedures and compliance.

### PREVENTATIVE MEASURES

To follow are strategies used to reduce the risk of exposure to any causative agents or situations etc. that may exacerbate the medical condition or cause a reaction (e.g. anaphylactic reaction). The following strategies will be revised as necessary.

* The Supervisor will add the child to the allergy list that is posted in the kitchen, each activity/eating area and a copy will also be kept with the emergency information pages for trips or emergencies off the premises.
* Accommodate substitutions for or elimination of food items that are known to produce allergic reactions. For example:
  + Substitute peanut butter with pea butter or wow butter and eliminate items containing nuts/nut products etc.
* Parents may be asked to provide all snack and meal items.
* One staff may be assigned to that individual during snacks and meals to ensure that no other food products are handled.
* Depending on the age group,
  + The child may require assigned seating during snacks and meals to avoid causative agent(s).
  + The administration will decide whether the causative agent(s) will be avoided on the menu or just a specific age group.
* Tables and serving surfaces will be thoroughly cleaned and disinfected before the individual is seated and any food items are placed.
* Monitor materials used for crafts and sensory activities.
* All food bought for the centre has to be inspected by the kitchen staff for the causative agent before being given to the children.
* **Food and beverages of any type will not be accepted from the families to be served or distributed to the children of other families.**
* All staff /contract workers will wash their hands before and after handling food.
* Disposable vinyl/nitrile gloves are used to avoid reactions and sensitivities that may be caused by latex gloves.
* Products containing allergens (i.e., nuts, peanuts) will not be used as fundraisers.
* For the protection of people with chemical sensitivities, all staff and visitors are asked to refrain from using, wearing, and bringing scented products and materials into a program of the organization.

### Response to a medical emergency

When an individual is experiencing a medical emergency (i.e., anaphylactic reaction)

|  |
| --- |
| * 1. **Activate the Individual Emergency Response Plan (IERP).**   2. Call 911.   3. Call the parent/emergency contact and inform that 911 have been activated and to go directly to the hospital.   4. When possible, one staff will accompany the individual in the ambulance with the child’s information and IERP.   5. When possible, one staff will stay with the child until the parent arrives at the hospital.   6. Follow the procedures for reporting serious occurrences.   7. The parent, staff/Supervisor/ Executive Director will review and discuss the actions and outcomes of the situation as soon as possible following the occurrence, and document it on the IERP, Part B: Response to a Medical Condition Emergency. |

### Reducing the Risk of Exposure

#### Public Notification

If applicable, copies of the detailed plan, including photo for each person at risk of anaphylaxis or having a serious medical condition will be displayed prominently in each activity/eating area and the office. Copies will also be kept with the emergency information pages for trips or emergencies off the premises.

If there is a person at risk of anaphylaxis, prominently placed notices may be posted informing all to not bring the causative agent (food, substance, etc.) into the centre.

Postings will be at the main entrance, website and Facebook pages. The notices will remain in place for the duration of the person’s involvement in the program.

#### During Evacuations

* If it is safe to do so, all devices, including medications, are retrieved for the person with medical needs. A child’s parent must be informed immediately if it is not possible to ensure the child will receive what is needed at the earliest convenience.
* The shelter must be scanned by the staff to ensure that no causative agent is present or accessible to avoid contact by the person, if applicable.

#### Off-Site Events

* During event planning, the staff will determine the level of risk for any person with medical needs, including but not limited to environmental and food allergies, situations that may occur that could aggravate a medical condition, etc.
* To allow the parent to make an informed decision, the parent of a child with medical needs is informed of all conditions prior to signing the permission form for the child to participate in the event.
* A staff with medical needs may need to be substituted if the conditions present at an off-site event may introduce a risk to the person.
* If food is being purchased, all allergies and restrictions are made known to the establishment to allow for an appropriate selection for the person with allergies.

### Supports

#### Medical Devices for Ongoing Medical Needs

##### (Including but not limited to medication, epinephrine auto-injector, asthma inhaler)

* A medication form must be completed prior to administering any medication. The form must be checked by the staff receiving the medication to ensure the instructions coincide with the label of the medication. If they do not, the medication will not be administered.
* The Supervisor will ensure that medication authorization forms are reviewed by the parent every 6 months. A new medication form is provided if the parent needs to make a change to instructions or medication.
* Medications are administered according to the instructions indicated on the medication authorization form.
* Medications are stored safely out of reach of children.
* **Epinephrine auto-injectors**
  + Will be kept in a pouch with the attendance and supervised by the staff. During winter the epinephrine auto-injector will be kept in a pouch on the staff’s body while outside to ensure its effectiveness.
  + Epinephrine auto-injector s may be carried by the child for self-administration \*see Administering Medication Policy.
* The Supervisor will check all medication expiry dates quarterly.

|  |
| --- |
| **RETURN EXPIRED MEDICATION TO THE FAMILY.**  **EXCEPTION**  EpiPen and EpiPen Jr are used to deliver an emergency treatment of adrenaline (epinephrine) to patients who are at risk or have a history of life-threatening allergic reactions (anaphylaxis). There are currently no alternative auto-injectors available on the market in Canada.  Health Canada is reminding patients and caregivers that EpiPen products expire on the last day of the month indicated on the product packaging. For example, if the product is marked as expiring in January, it remains valid (not expired) until January 31.  **Health Canada is also advising that in this shortage situation, if a person is experiencing an anaphylactic reaction and only an expired auto-injector is available, use the expired product and immediately contact 911.**  For more information, please visit: <http://healthycanadians.gc.ca/recall-alert-rappel-avis/hc-sc/2018/67330a-eng.php>  **.** |

#### Individual Support Plans

* Five Counties Children’s Centre provides detailed support plans for any child with identified medical needs.
* If applicable, staff are trained in the use of adaptive devices to support the child’s participation and success in the program.
* Staff are expected to use/provide adaptive supports and implement the suggestions outlined in the support plans.

### Verification of Notification of Medical Needs

* Staff are required to verify reading all active individual support plans. The Cook’s Individual Support Plan Review form is completed when a new plan is received.
* Staff will review all applicable Individual Emergency Response Plans (IERPs) prior to commencement of duties, annually and when any changes have been made.
* The Medical Needs Review Form which includes epinephrine auto-injector training is signed to verify completion.
* The review forms are kept in the centre office.

## Medical needs & ALLERGIC REACTIONS

### Medical Needs

Medical needs include any physical, developmental, mental, sensory, behavioral, cognitive, or emotional impairment or limiting condition that requires medical management, health care intervention, and/or use of specialized services or programs. The condition may be congenital, developmental, or acquired through disease, trauma, or environmental cause and may impose limitations in performing daily self-maintenance activities or substantial limitations in a major life activity.

Care for individuals with special needs requires specialized knowledge acquired by additional training, as well as increased awareness and attention, adaptation, and accommodative measures beyond what are considered routine.

Examples: anaphylaxis, asthma, diabetes, heart condition, seizures, etc.

### Allergic Reactions

Some allergic reactions cause tissues in the mouth and throat to swell and this will impair breathing. This is a severe allergic reaction and is life-threatening emergency because body tissues are deprived of oxygen, causing body systems to fail. Anaphylaxis can happen within seconds, minutes or hours of a substance entering the body. As a rule, the sooner the child’s body reacts, the worse the reaction will be. Possible reactions include, but are not limited to:

|  |  |
| --- | --- |
| * Swelling of the airway * Coughing * Weakness, dizziness or confusion * Breathing difficulties * Unconsciousness * Cardiac arrest * Irritation of the throat (tickle) that will not go away * Nausea and vomiting | * Pulse is rapid and irregular * Itchy, flushed skin, raised skin rash (hives) * Sneezing, running nose and watery eyes * Pale skin and or cyanosis (blue colour) * Swelling of the face, lips, tongue, neck and feet * Wheezing when exhaling or high-pitched when in haling |

## Training

Training is provided on procedures to be followed in the event of a person is having a reaction or experiencing medical distress (e.g. identifying an anaphylactic reaction, seizure, etc.; administering medication, including an epinephrine auto-injector).

All staff are required to maintain valid standard first aid and infant/child CPR certification.

The certification includes, but is not limited to, training relating to response to allergic reactions, anaphylaxis and the use of an epinephrine auto-injector.

## Modifications to This or Other Policies

Any policy that does not respect and promote the dignity, independence, integration and equal opportunity of people with disabilities will be modified or removed. Our policies are maintained and updated regularly to reflect our practices, employees and best serve our customers.