Administrative Procedure 607
Child Care Centre Anaphylactic Policy and Procedures

Name of Child Care Centre: _____

Date Policy and Procedures Established: September 1st, 2026

Date Policy and Procedures Updated: September 15th, 2026

1. Purpose

Anaphylaxis is a serious allergic reaction that can be life-threatening. It requires avoidance strategies and immediate response in the event of an emergency. These policies and procedures are intended to help meet the needs and save the lives of children with severe allergies and provide relevant and important information on anaphylaxis to parents, staff, students, volunteers and visitors at the Before and After School Program.

This policy is intended to fulfill the obligations set out under Ontario Regulation 137/15 for an anaphylactic policy for Before and After School Programs. The requirements set out in this policy align with Sabrina's Law, 2005.

Note: definitions for terms used throughout this policy are provided in a Glossary at the end of the document.

2. Policy

Individualized Plans and Emergency Procedures for Children with Life-Threatening /Anaphylactic Allergies

- Before attending the childcare centre, the supervisor/designate will meet with the parent of a child to obtain information about any medical conditions, including whether the child is at risk of having or has anaphylaxis.

- Before a child attends the child care centre or upon discovering that a child has an anaphylactic allergy, an individualized plan and emergency procedures will be

developed for each child with anaphylaxis in consultation and collaboration with the child's parent, and any regulated health professional who is involved in the child's care that the parent believes should be included in the consultation (the form in Appendix A may be used for this purpose).

- All individualized plans and emergency procedures will include a description of symptoms of an anaphylactic reaction that are specific to the child and the procedures to be followed in the event of an allergic reaction or other medical emergency based on the severity of the child's symptoms.

- The individualized plan and emergency procedures for each child will include information for those who are in direct contact with the child on a regular basis about the type of allergy, monitoring and avoidance strategies and appropriate treatment.

- All individualized plans and emergency procedures will be made readily accessible at all times to all staff, students and volunteers at the Before and After School Program and will be kept in the Before and After School Classroom, as well as a copy being stored in the School Office.[insert location where individualized plans will be kept]

- All individualized plans and emergency procedures will be reviewed with a parent of the child annually to ensure the information is current and up to date.

- Every child's epinephrine auto-injector must be carried everywhere the child goes.

Strategies to Reduce the Risk of Exposure to Anaphylactic Allergens

The following strategies to reduce the risk of exposure to anaphylactic causative agents must be followed at all times by employees, students and volunteers at the Before and After School Program.

- Do not serve foods where its ingredients are not known.

- Do not serve items with 'may contain' warnings on the label in a room where there is a child who has an individualized plan and emergency procedures specifying those allergens.

- Ask the caterer or cook to provide the known ingredients for all food provided. The ingredients will be reviewed before food is served to children to verify that causative agents are not served to children with anaphylactic allergies.
- In cases where a child has food allergies and the meals and snacks provided by the program cannot meet the child's needs, ask the child's parent to supply snacks/meals for their child. All written instructions for diet provided by a parent will be implemented.
- Where food is provided from home for children, ensure that appropriate supervision of children is maintained so that food is not shared or exchanged.
- Encourage parents who serve foods containing allergens at home to ensure their child has been rid of the allergens prior to attending the Before and After School Program (e.g. by thoroughly washing hands, brushing teeth, etc.).
- Do not use craft/sensory materials and toys that have known allergens on the labels.
- Share information about anaphylaxis, strategies to reduce the risk of exposure to known allergens and treatment with all families enrolled in the Before and After School Program.
- Make sure each child's individual plan and emergency procedure are kept-up-to-date and that all staff, students, and volunteers are trained on the plans.
- Create an allergy list for the Before and After School Program, refer to the list regularly and ensure that it is up to date and implemented.
- Update staff, students, and volunteers when changes to a child's allergies, signs and symptoms, and treatment occur and review all updates to individualized plans and emergency procedures.
- Update families when changes to allergies occur for a child receiving care at the Before and After School Program while maintaining the confidentiality of children.

- Update or revise and implement the strategies in this policy depending on the allergies of children enrolled in the Before and After School Program.

Rules for Parents Who Send Food with their Child

- Ensure that parents label food brought to the Before and After School Program with the child's full name and if applicable, the date the food arrived at the program.

- Parents must advise the Before and After School Program of all ingredients in food supplied by the parent or any ingredients to which children may be allergic.

Communication Plan

The following is our communication plan for sharing information on life-threatening and anaphylactic allergies with Before and After School Program staff, students, volunteers, parents and families.

- Parents will be encouraged not to bring foods that contain ingredients to which children may be allergic.

- Parents and families will be informed about anaphylactic allergies and all known allergens at the Before and After School Program through email.

- A list of all children's allergies including food and other causative agents will be posted in all cooking and serving areas, in each Before and After School room, and made available in any other area where children may be present.

- Each child with an anaphylactic allergy who is enrolled in the Before and After School Program will have an individualized plan and emergency procedures that detail signs and symptoms specific to the child describing how to identify that they are having an allergic reaction and what to do if they experience a reaction.

- Each child's individualized plan and emergency procedures will be made available and accessible wherever the child may be present while receiving Before and After School Program care.

- Any Before and After School Program Staff who collect groceries on behalf of the program and/or other food handling staff, where applicable, will be informed of all the allergies at the Before and After School Program, including those of children, staff, students and volunteers.

- The Before and After School Program will communicate with the Ministry of Education by reporting serious occurrences where an anaphylactic reaction occurs in accordance with the established serious occurrence policy and procedures.

- This communication plan will be continually reviewed to ensure it is meeting the needs of the Before and After School Program and that it is effectively achieving its intended result.

Drug and Medication Requirements

- Where drugs or medications will need to be administered to a child in response to an anaphylactic reaction, the drug and medication administration policy will be followed including the completion of a parental authorization form to administer drugs or medications.

- Emergency allergy medication (e.g. oral allergy medications, puffers and epinephrine auto-injectors) will be allowed to remain unlocked or carried by children with parental authorization so that they can be administered quickly when needed.

Training

- The Before and After School Program Supervisor will ensure that all staff, students and volunteers receive training from a parent of a child with anaphylaxis on the procedures to follow in the event of a child having an anaphylactic reaction, including how to recognize the signs and symptoms of anaphylaxis and administer emergency allergy medication.

- Once the Before and After Program services provider and visitor have been trained, they will ensure training is provided to all other persons regularly present and ordinarily

resident, students and volunteers.

- Training will be repeated annually, and any time there are changes to any child's individualized plan and emergency procedures.

- A written record of training for staff, students and volunteers on procedures to be followed for each child who has an anaphylactic allergy will be kept, including the names of individuals who have not yet been trained. This will ensure that training is tracked and follow-up is completed where an individual has missed or not received training. The form in Appendix B may be used for this purpose.

Confidentiality

- Information about a child's allergies and medical needs will be treated confidentially and every effort will be made to protect the privacy of the child, except when information must be disclosed for the purpose of implementing the procedures in this policy and for legal reasons (e.g. to the Ministry of Education, College of Early Childhood Educators, law enforcement authorities or a Children's Aid Society).

Procedures to be followed in the circumstances described below:

Circumstance	Roles and Responsibilities
A) A child exhibits an anaphylactic reaction to an allergen	1. The person who becomes aware of the child's anaphylactic reaction must immediately: i. implement the child's individualized plan and emergency procedures; ii. contact emergency services and a parent/guardian of the child, or have another person do so where possible; and iii. ensure that where an epinephrine auto-injector has been used, it is properly discarded (i.e. given to emergency services, or in accordance with the drug and medication administration policy). 2. Once the child's condition has stabilized or the child has been taken to hospital, staff must: i. follow the Before and After School Program's serious occurrence policies and procedures; ii. document the incident in the daily written record; and iii. document the child's symptoms of ill health in the child's records.

Circumstance	Roles and Responsibilities
B) A child is authorized to carry his/her own emergency allergy medication.	3. Staff must: iv. ensure that written parental authorization is obtained to allow the child to carry their own emergency allergy medication; v. ensure that the medication remains on the child (e.g., fanny pack, holster) and is not kept or left unattended (e.g. in the child's cubby or backpack); vi. ensure that appropriate supervision is maintained of the child while carrying the medication and of children in their close proximity so that other children do not have access to the medication; and vii. Where there are safety concerns relating to the child carrying his/her own medication (e.g. exposure to other children), notify the Before and After School Program Supervisor and the child's parent of these concerns, and discuss and implement mitigating strategies. Document the concerns and resulting actions in the daily written record.

3. Glossary

Anaphylaxis: a severe systemic allergic reaction which can be fatal, resulting in circulatory collapse or shock. Symptoms can vary for different people, and can be different from one reaction to the next, including:

- Skin: hives, swelling, itching, warmth, redness, rash
- Breathing (respiratory): coughing, wheezing, shortness of breath, chest pain/tightness, throat tightness/swelling, hoarse voice, nasal congestion or hay fever-like symptoms (runny nose and watery eyes, sneezing), trouble swallowing
- Stomach (gastrointestinal): nausea, pain/cramps, vomiting, diarrhea
- Heart (cardiovascular): pale/blue colour, weak pulse, passing out, dizzy/lightheaded, shock

- Other: anxiety, feeling of “impending doom”, headache, uterine cramps, metallic taste in mouth

  (Source: http://foodallergycanada.ca/about-allergies/anaphylaxis/)

Causative Agent (allergen/trigger): a substance that causes an allergic reaction. Common allergens include, but are not limited to:

- eggs
- milk
- mustard
- peanuts
- seafood including fish, shellfish, and crustaceans
- sesame
- soy
- sulphites which are food additives
- tree nuts
- wheat
- latex
- insect stings

Epinephrine: A drug used to treat allergic reactions, particularly anaphylaxis. This drug is often delivered through an auto-injector (e.g. EpiPen or Allerject).

Staff (Employee): Individual employed by the licensee (e.g. program room staff).

Licensee: The individual or corporation named on the license issued by the Ministry of Education responsible for the operation and management of the Before and After School Program.

Parent: A person having lawful custody of a child or a person who has demonstrated a settled intention to treat a child as a child of his or her family (all references to parent include legal guardians, but will be referred to as “parent” in the policy).

4. Regulatory Requirements: Ontario Regulation 137/15

Anaphylactic policy

39.

(1) Every licensee shall ensure that each child care centre it operates and each premises where it oversees the provision of home child care or in-home services has an anaphylactic policy that includes the following:

1. A strategy to reduce the risk of exposure to anaphylactic causative agents, including rules for parents who send food with their child to the centre or premises.

2. A communication plan for the dissemination of information on life-threatening allergies, including anaphylactic allergies.

3. Development of an individualized plan for each child with an anaphylactic allergy who,

1. receives child care at a child care centre the licensee operates, or

2. is enrolled with a home child care agency and receives child care at a premises where it oversees the provision of home child care or in-home services.

4. Training on procedures to be followed in the event of a child having an anaphylactic reaction.

(2) The individualized plan referred to in paragraph 3 of subsection (1) shall,

(a) be developed in consultation with a parent of the child and with any regulated health professional who is involved in the child's health care and who, in the parent's opinion, should be included in the consultation; and

(b) include a description of the procedures to be followed in the event of an allergic reaction or other medical emergency.