GUIDE TO THE BEST PRACTICES FOR MANAGING FOOD ALLERGIES

In Montreal Elementary Schools





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NOTE TO READERS

Montréal's regional public health department would like to inform readers that this guide was completed in February 2020, before the beginning of the pandemic, and takes into account the scientific knowledge available at that time. The purpose of the guide is to present the best practices for food allergy management and not to add pressure on schools, which are already very involved in implementing measures to prevent COVID-19 transmission.

Although the roles and responsibilities described in the guide could differ, the recommendations presented in it are still valid. There are similarities with some of the health guidelines put forward in the context of the pandemic. Efforts made by schools to control the spread of the virus also contribute to preventing allergic reactions to food.

Only a few recommendations in the guide need to be adapted in accordance with the directives linked to the pandemic issued on September 15, 2020*. The proposed adjustments are described in the following table:

Recommendations included in the Guide	Adjustments made in the context of COVID-19
5.1 Cleaning surfaces at mealtime/snack-time Clean tables before and after meals and snacks.	Priority must be on cleaning tables after meals for all students. Before meals, it is important to make sure the surfaces of allergic students' tables have been cleaned, especially if different groups of students rotate through this room. In addition to cleaning, daily disinfection of meal areas is also required, using the appropriate cleaning products. For more information about surface cleaning go to: https://www.inspq.qc.ca/publications/3054-nettoyage-desinfection-surfaces-covid19
5.2 Seating arrangements for mealtime/snack-time and use of microwave oven Designate a place for each allergic student during meals. Use a clean placemat and thermos for allergic students.	If students cannot eat and snack in their classrooms and at their desks, make sure to respect the recommendations for allergic students (reserved place, identified desk and use of placemats). Use of microwave ovens should be avoided as much as possible, to reduce both exposure to allergens as well as transmission of COVID-19. All students should be encouraged to use a thermos for hot meals.
5.3 Hand washing before and after mealtime/snack-time Wash hands before and after meals and snacks.	When it comes to meals, using soap and water is the best method for effective hand washing, whether the goal is to remove traces of food allergens or to reduce the risks of COVID-19 transmission. Hand sanitizers, whether in the form of gel, liquid or foam, are designed to kill viruses; they do not clean hands or remove dirt. Therefore, they are not effective for eliminating allergens. If water is not available, disinfectant wipes can be an alternative. For the proper hand washing technique using soap and water, see: https://www.quebec.ca/sante/conseils-et-prevention/prevention-des-accidents-des-lesions-et-des-maladies/lavage-des-mains/)

^{*} https://www.cnesst.gouv.qc.ca/salle-de-presse/covid-19-info-en/Pages/toolkit-school-system.aspx https://www.quebec.ca/en/education/back-to-school-plan-fall-covid-19/https://www.inspq.qc.ca/sites/default/files/publications/3056-schools-and-teaching-environments-covid19.pdf http://lafse.org/fileadmin/Grands_dossiers/COVID/QR-3_sept-2020.pdf



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In the following text, the term "school board" refers to French school boards (now called "centres de services scolaires") and English school boards.

Foreword

In the fall of 2017, the need for a common procedure and standardized practices to manage food allergies in schools in Montreal, especially in elementary schools, was expressed to the DRSP of the CCSMTL.

In January 2018 the DRSP of the CCSMTL initiated a regional process by setting up an advisory committee made up of representatives of the five Montreal school boards and five CIUSSS, of the Clinique communautaire de Pointe-Saint-Charles, as well as an administrative technician for daycare services, an elementary school principal, the Fédération des établissements d'enseignement privés (FEEP), representatives from Allergy Quebec and three allergists.

This Guide to the Best Practices for Managing Food Allergies in Montreal Elementary Schools is based on the work of the Advisory Committee and the assessment conducted by the Université de Montréal to examine the implementation of the guide as a pilot project in ten Montreal elementary schools. The goal is to establish guidelines for all elementary schools in Montreal to prevent severe allergic reactions to food allergens and to intervene in the event of anaphylaxis.

This guide is not a legal document. However, we strongly recommend that school boards, governing boards and private school administrations gradually implement its recommendations; they represent the best practice standards for managing food allergies in Montreal elementary school settings.

This guide can be adapted to include other types of allergies and be implemented in high schools, vocational training and adult education centres, in day camps, educational daycare services, and also in other regions of Quebec.

1. Summary of Recommendations

As it is impossible to guarantee an allergen-free school environment, a guide to the best practices for the management of food allergies in schools is essential to reduce the risk of allergen exposure and avoid potential complications of anaphylactic reactions.

This *Guide to the Best Practices for Managing Food Allergies in Montreal Elementary Schools* aims to harmonize practices and define roles and responsibilities of those operating in the healthcare and school networks with respect to managing food allergies in Montreal elementary schools.

The following recommendations are designed to improve the management of food allergies in school settings:

Identification of students

- Identify students with allergies, disseminate information about these students to school employees and standardize signage to quickly find relevant information in case of an emergency;
- Raise awareness of the severity of food allergies with all students.

Preventive measures

- Clean the tables tops before and after meals and snacks;
- · Recommend that allergic students eat on a clean placemat;
- Recommend that students with allergies sit at the same place during meals/snacks and avoid using the microwave oven;
- Recommend that all students wash their hands with soap and water before and after meals/snacks;
- Forbid all students from sharing food, drinks, containers, water bottles and utensils;
- Inform parents of children with allergies about any food offered at school;
- Forbid all students from eating in the school bus;
- Inform and sensitize school employees, parents and students of preventive measures put in place.

Training

• Allow school employees to attend training sessions offered by school nurses.

Emergency measures

Have an emergency measures plan in place and ensure its review with all school staff.

Storage of medication

• Store epinephrine auto-injectors in locations that are easily accessible to school employees and to keep additional auto-injectors at school (junior and regular doses);

These recommendations are detailed in the following pages. The roles and responsibilities of all parties involved are also defined. Useful tools are provided in the appendices to facilitate implementation of this guide, such as several interactive forms.

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2. Introduction

A food allergy is an overreaction of your immune system to a food or food additive¹. An anaphylactic reaction is a severe, life-threatening allergic reaction that comes on quickly². Food is one of the most common causes of anaphylactic reactions³.

In Canada, the prevalence of food allergies is around 6.9% in children aged 1 to 17 years⁴. A significant proportion of children with allergies have their first allergic reaction to food at school⁵.

People with food allergies should avoid eating and coming into contact with the allergens to which they are sensitive. When an allergic person touches an allergen and then touches their mouth or a lesion on their skin, even minor traces of the allergen may cause a severe reaction.

The smell of food alone will not cause an allergic reaction unless food particles enter the body. Steam from cooking fish or handling wheat flour, for example, may generate airborne particles and lead to an allergic reaction. However, allergic individuals may associate the smell of certain types of food with the danger these foods present and experience symptoms characteristic of allergic reactions^{2,6}.

3. Goals

As it is impossible to guarantee an allergen-free school environment, a guide to the best practices for managing food allergies in schools is essential to reduce the risk of exposure to allergens and avoid serious consequences in case of anaphylactic reactions.

Practices are currently in place in Montreal schools, but they differ from one school board, one CIUSSS and one school to another. This diversity of practices may lead to confusion among those who must implement them, which may ultimately affect the management of food allergies.

Thus, the goals of this Guide to the Best Practices for Managing Food Allergies in Montreal Elementary Schools are:

- To harmonize the practices and to define the roles and responsibilities of the stakeholders from both the healthcare system and school network regarding the management of food allergies in Montreal elementary schools.
- To make tools available to support these stakeholders in the application of the guide.

Protecting students with allergies is everyone's responsibility. The sharing of responsibilities among the various stakeholders identified in this guide is essential to ensure a safe school environment. The implementation of this guide should not rest on the shoulders of one person alone; it should be a collective effort for the well-being of all students.

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¹ Allergy Quebec (2014). *Info Allergies – Qu'est-ce qu'une allergie alimentaire?* Consulté le 11 avril 2018 : https://allergies-alimentaires.org/what-is-a-food-allergy/?lang=en

² Société canadienne d'allergie et d'immunologie clinique (août 2016). L'anaphylaxie à l'école et dans d'autres milieux - 3e édition révisée. 82 pages.

³ MSSS (2017). Intervention auprès des personnes victimes d'une réaction allergique sévère de type anaphylactique – Guide du formateur. 58 pages.

⁴ Yue D, Ciccolini A, Avilla E, Waserman S. Food allergy and anaphylaxis. J Asthma Allergy. 2018;11:111-20.

⁵ Portnoy, JM. et Shroba, J. (2014). Managing Food Allergies in Schools. Currents Allergy Asthma Reports. 14 (467), p. 1-7.

⁶ Dufresne, C. (2009). *Vivre avec les allergies alimentaires : un guide complet pour comprendre et prévenir les réactions allergiques.* Montréal : Les Éditions La Presse

4. Identification of Students with Allergies

Identification of allergic students is essential for effective intervention in case of anaphylaxis. As a first step, health cards shall be used to identify allergic students. Cards should be filled out when students are newly registered and re-registered to school in order to collect the health information required before the start of the next school year.

As a second step, data collection will be used to gather more information from parents of allergic children (see *Appendix E: Data Collection Tool*). An individualized emergency plan prepared by the school nurse will serve as a clinical tool allowing access to the medical conditions of each student with allergies (types of allergens, signs and symptoms, measures and contacts in case of emergency, where medication is stored, etc.). Key information from this tool may be used to create an Identification Sheet for Students with Allergies. This sheet is to be distributed to school staff members and prominently posted in the classroom of the allergic student (e.g., next to the light switch) (see *Appendix F: Identification Sheet for Students with Allergies*).

It is also recommended that a list of the students with food allergies be drawn up and distributed to school employees and posted in strategic locations (staff room, daycare service area, etc.). (See *Appendix G: Sample List of Students with Allergies.*) These documents should be posted in the same locations in all schools to give permanent and occasional school employees quick access to the information in case of an emergency.

Posting students' names in the classrooms raises concerns about potential stigmatization. Some cases of bullying have been reported, but it is essential to facilitate the implementation of emergency measures⁷⁸. Measures are already in place to respond to all forms of bullying in schools⁹. **It is essential to raise awareness among students about the severity of food allergies**. In addition, parental consent should be obtained before disclosing and posting specific information about their child's food allergies.

⁷ Behrmann, Jason (juin 2010). Ethical principles as a guide in implementing policies for the management of food allergies in schools. The Journal of school nursing. 26 (3). 183-193.

⁸ Société canadienne d'allergie et d'immunologie clinique (AOUT 2016). L'anaphylaxie à l'école et dans d'autres milieux - 3e édition révisée. 82 pages.

⁹ MEES (2018). Agir contre la violence et l'intimidation à l'école. Consulté le 10 mai 2018 : http://www.education.gouv.qc.ca/dossiers-thematiques/intimidation-et-violence-a-lecole/.

School Administration	Nurse*	School Employees	Allergic Students and their Parents
	At Registration or Re	-registration of Students	
Ask parents to fill out health card			Fill out child's health card
	Before the Star	t of the School Year	
Ensure the nurse has the health card of students with allergies (and other health conditions)	Collect data from parents of allergic students (see <i>Appendix E: Data Collection Tool</i>). Based on the information gathered and the individualized emergency plan, prepare an identification sheet with the key information for each of these students (see <i>Appendix F: Identification Sheet for Students with Allergies</i>) and a list of all allergic students (see <i>Appendix G: Sample List of Students with Allergies</i>). Distribute the identification sheet and the list of allergic students to all school employees (teachers/homeroom, daycare staff and lunch monitors (DC staff and LM), specialists, etc.) and display in the same strategic locations (classroom next to the light switch, staff room, daycare service area, etc.). Following parents' permission, meet with allergic students to discuss food allergies.	Teachers, Daycare Staff/ Lunch Monitors (DC staff and LM): Identify students with allergies in their class/group.	Provide the school with information about the child's allergies At the school's request, send two recent photos of their child annually (or the school may use photos from the GPI software). Fill out a consent form to authorize the distribution and posting of information on their child and permitting meeting between the nurse and child.
	At all Times Du	ring the School Year	
Ensure to disseminate to substitute staff the identity of allergic students.	Recommend that parents of allergic children have them wear a medical ID bracelet or any other ID (tag, card, etc.)	Teachers, DC staff and LM: Ensure to disseminate to employees the identity of allergic students (in daycare service, use attendance sheets, for example). Stay vigilant in case of bullying.	Inform the school of any change in the child's health condition.

^{*}or another person designated by the school administration if a nurse is not available

5. Preventive Measures

5.1. Cleaning Surfaces at Mealtime and Snack-Time

To prevent and control infections in school settings, the Ministère de la santé et des services sociaux (MSSS) recommends cleaning tables used for meals and snacks before and after each use¹⁰. In addition, several precautions must be taken to adequately maintain the surfaces¹¹.

To reduce the risk of exposure to allergens, it is particularly important to clean tables after meals and snacks¹². Good cleaning practices of surfaces in the context of food allergies are presented in *Appendix J: Tips for Cleaning Surfaces in the Context of Food Allergies*. The use of a cleaning solution is the best option for removing allergens on surfaces, but moist disinfectant wipes may also be used^{13,14}.

Some schools have several lunch periods and different groups of students eat in rotation in the same space. In addition to meals, students eat a snack in the classroom and an afternoon snack in the daycare area. As a result, systematic cleaning of surfaces before and after each meal and snack is challenging for school employees to implement. Cleaning tables before and after meals and snacks for all students is the ideal formula to prevent anaphylaxis and the transmission of infections. However, as time is limited in an elementary school setting, cleaning might be prioritized as follows:

- 1. Before and after mealtime and snack-time for allergic students;
- 2. After mealtime and snack-time for all students.

Why clean surfaces in school settings?

	BEFORE	AFTER
Allergic Students	Prevent infections Remove all traces of allergens	Prevent infections Remove all traces of allergens
All Students	Prevent infections	Prevent infections Remove traces of allergens to protect allergic students.

¹⁰ MSSS (2015). Prévention et contrôle des infections dans les services de garde et écoles du Québec- Guide d'intervention. Consulté le 31 juillet 2018 : http://publications.msss.gouv.gc.ca/msss/fichiers/guide-garderie/annexe4-calendrier-entretien-ecoles.pdf

¹¹ MSSS (2015). Prévention et contrôle des infections dans les services de garde et écoles du Québec- Guide d'intervention. Consulté le 31 juillet 2018 : http://publications.msss.gouv.qc.ca/msss/fichiers/guide-garderie/chap4-entretien-hygiene.pdf

¹² Société canadienne d'allergie et d'immunologie clinique (août 2016). L'anaphylaxie à l'école et dans d'autres milieux - 3ième édition révisée. 82 pages.

¹³ Perry T., Conover-Walker MK., Pomés A. et coll. (mai 2004). Distribution of peanut allergen in the environment. Journal of Allergy and Clinical Immunology, vol. 113, p. 973-6.

¹⁴ Watson, WT., Woodrow, A., Stadny, AW. (février 2013). Persistence of peanut allergen on a table surface. Allergy, Asthma & Clinical Immunology, 18;9(1):7.

It is also very important to be vigilant about the table surface used by students with allergies. Allergic students should be encouraged to clean their table surface with a disinfectant wipe before eating^{15,16} and use a clean placemat (or disposable paper towel) for their food¹⁷. Appendix J: Tips for Cleaning Surfaces in the Context of Food Allergies provides instructions on the use of placemats for school employees, allergic students and their parents.

If an allergic student feels uncomfortable about using a placemat, it may be better to ask all students to do it. Younger students might be invited to create a placemat. Resources for creating them are available in *Appendix P: List of Additional Resources Related to Food Allergies.*

Roles and Responsibilities

School Board (Public Schools)	School Administration	School Employees	Allergic Students and their Parents	All Students and Parents
Inform schools on the use of approved cleaning products	Inform school employees about cleaning products to be used.	Teachers, DC staff and LM: Have the tables cleaned by an adult before and (especially) AFTER every meal and snack, using the authorized cleaning product. Recommend to allergic students to: Eat on a placemat (or a disposable paper towel). Clean table surface with a disinfectant wipe BEFORE meals and snacks.	For the parent of an allergic student: Provide a clean placemat (or paper towels) and disinfectant wipes daily. For the allergic student: Use a placemat for all meals and snacks (or a disposable paper towel). Clean table surface BEFORE meals and snacks with a disinfectant wipe.	Sensitize their child not to touch the table and placemat of allergic students.
		Caretakers:		
		Have available supplies of authorized cleaning product, rags, brown paper towels and hand soap.		

¹⁵ Commission scolaire English Montreal (2018). Guidelines to safe food allergy management. 2 pages.

¹⁶ Commission scolaire English Montreal (2017). Modèle de lettre aux parents sur les allergies alimentaires. 1 page.

¹⁷ Société canadienne d'allergie et d'immunologie clinique (août 2016). L'anaphylaxie à l'école et dans d'autres milieux - 3e édition révisée. 82 pages.

5.2 Seating Arrangements for Mealtime/Snack-time and Use of Microwave Oven

Students with allergies should always sit in the same place at mealtime and snack-time. This precaution reduces the risk of exposure to allergens¹⁸. It also avoids isolation of allergic students, which is not a recommended practice¹⁹ as it leads to stigmatization²⁰.

If a student feels uncomfortable because he always has to sit in the same place to eat, it is better to suggest that all students always sit in the same place to avoid stigmatization.

Due to limited space in some schools, classrooms may be used for lunch and snack-times. If this is the case for an allergic student, he should always eat at his desk. If there is another group in the class, it is important that no other student eats on that desk by identifying it clearly.

For the prevention and control of infections in schools, the MSSS recommends that microwave ovens be cleaned after each use if they are soiled, and that they be cleaned and sanitized every day²¹. Despite these precautions, there is still a risk of being exposed to allergens when using this equipment. **Thus, for hot meals, the use of an insulated container (thermos) is recommended for allergic students, and perhaps for all students to simplify meal time**. Useful resources for using a thermos can be found in Appendix P. Microwave ovens are becoming less common in schools for various reasons. In addition, the logistics required to heat food limits eating time, which is already shortened due to other constraints, thus minimizing camaraderie at mealtimes²².

Roles and responsibilities

School Administration	School Employees	All Students and Parents
Inform all parents that the use of an insulated container (thermos) is to be preferred, especially for students with allergies.	DC staff and LM: Recommend that students with allergies always sit in the same place and avoid use of microwave ovens.	Use an insulated container (thermos) to offer hot meals to one's child. Allergic Student: Avoid use of microwave ovens and always sit in the same place.

¹⁸ Société canadienne d'allergie et d'immunologie clinique (août 2016). L'anaphylaxie à l'école et dans d'autres milieux - 3e édition révisée. 82 pages.

¹⁹ Muraro, A. Clark, A., Beyer, K. et coll. (2010). *The management of the allergic child at school: EAACI/GA2LEN Task Force on the allergic child at school. Allergy.* 65: 681-689.

²⁰ Behrmann, Jason (juin 2010). Ethical principles as a guide in implementing policies for the management of food allergies in schools. The Journal of school nursing. 26 (3). 183-193.

²¹ MSSS (2015). Prévention et contrôle des infections dans les services de garde et écoles du Québec- Guide d'intervention. Consulté le 31 juillet 2018 : http://publications.msss.gouv.qc.ca/msss/fichiers/guide-garderie/annexe4-calendrier-entretien-ecoles.pdf

²² Naître et grandir (janvier 2016). L'heure du diner à l'école. Consulté le 16 mai 2018 : https://naitreetgrandir.com/fr/etape/5-8-ans/ecole/fiche. aspx?doc=diner-ecole-service-de-garde.

5.3 Hand Washing Before and After Mealtime/Snack-Time

Hand washing is not only a **preventive measure for anaphylaxis**, , but also a **universal measure to prevent the transmission of infections**. Several constraints in educational establishments can make it difficult to apply this measure, hence the importance of consulting all parties concerned to find solutions.

The use of soap and water should be prioritized for effective hand washing. If soap and water are not available, alcohol-based **hand sanitizers** (or hydro-alcoholic solutions in gel, liquid or foam form) may be used to reduce the transmission of infections²³, **but are not effective in eliminating food allergens**. However, the use of disinfectant wet wipes designed for the skin may be an alternative²⁴. *Appendix K: Tips for Hand Washing in the Context of Food Allergies* provides several methods to facilitate hand washing in school settings.

Hand washing before and after meals and snacks for all students is ideal for preventing anaphylaxis and the transmission of infections. However, given the limited time and insufficient number of sinks in primary school settings, hand washing could be prioritized as follows:

- 1. Before and after meals and snacks for students with allergies.
- 2. After meals and snacks for all students.

Why should students wash their hands at school?

	BEFORE	AFTER
Allergic Students	Prevent infections Remove all traces of allergens	Prevent infections Remove all traces of allergens
All Students	Prevent infections	Prevent infections Remove traces of allergens to protect allergic students

²³ MSSS (2015). Prévention et contrôle des infections dans les services de garde et écoles du Québec- Guide d'intervention. Consulté le 31 juillet ₂₀₁₈. http://publications.msss.gouv.qc.ca/msss/fichiers/guide-garderie/chap4-hygiene-des-mains.pdf

²⁴ Perry T., Conover-Walker MK., Pomés A. et coll. (mai 2004). Distribution of peanut allergen in the environment. Journal of Allergy and Clinical Immunology, vol. 113, p. 973-6.

Roles and Responsibilities

School Board (Public Schools)	School Administration	School Employees	All Students and Parents
Support schools in the implementation of strategies to facilitate hand washing.	Support school employees in implementing strategies to facilitate hand washing and inform all parents of the importance of this measure.	Teachers, DC staff and LM: Put in place means to ensure hand washing before and after mealtime/snack-time for all students.	Teach one's child to wash their hands before and after mealtime/snack-time.

5.4 Prohibiting Sharing of Food, Drinks, Containers, Water Bottles and Utensils

It is recommended to **forbid the sharing of food, drinks, containers, water bottles and utensils** for all students to protect those with allergies or those who may develop allergies²⁵.

Roles and Responsibilities

School Administration	School Employees	All Students and Parents
Inform all parents that sharing of food, drinks, containers, water bottles and utensils is prohibited.	Teachers, DC staff and LM: Forbid all students from sharing food, drinks, water bottles and utensils, and explain to them that it is for safety reasons.	Teach their child not to share food, drinks, containers, water bottles and utensils.



A summary of preventive measures to be applied during meals is presented in *Appendix L*.

²⁵ Centers for Disease Control and Prevention (2013). *Voluntary Guidelines for Managing Food Allergies in Schools and Early Care and Education Programs*. Washington, DC: US Department of Health and Human Services, 103 pages.

5.5 Food Offered at School

School Milk Program and Snacks

In some elementary schools, cartons of milk are distributed to students. Depending on the type of allergy, parents of allergic students can make an informed decision about participating in this program.

Some lower-income schools may also benefit from morning snacks offered in the classroom. These snacks are chosen by the school boards so that as many students as possible can benefit from them. Although food offered to students is generally prepackaged with the list of ingredients provided, the absence of allergens cannot be guaranteed. Parents of allergic students should therefore have access in advance to the list of foods offered so as to make an informed decision on their child's participation in the program.

Meals From Cafeteria Services, School Caterers or Subsidized Lunch Programs

Although the majority of students in Montreal elementary schools bring their lunch from home, various food services may be offered to parents. Within the framework of food security measures, certain students may be eligible to participate in a subsidized lunch program. In addition, catering services or school cafeterias are sometimes available to parents who wish to use these services for their children.

School boards design and/or approve these menus so that they are accessible to as many students as possible. However, despite the efforts of the school community, it is impossible to guarantee the absence of allergens. There are also greater risks with cooked meals that require handling of food (cross-contamination, errors in products sent by the distributor, etc.). Parents of allergic children should therefore be informed of these risks and have access to the menus that will be offered in order to make an informed decision about using these services.

Food Offered at School by Daycare Services and Through Educational Activities (Cooking Workshops, Tasting Sessions, Crafts, etc.)

Many daycare services offer afternoon snacks. They are responsible for the selection and purchase of suitable snacks that can be served to as many students as possible. Snacks include ready-to-eat prepackaged food, but also snacks that require some preparation (portioning, washing, trimming, cutting, etc.). In addition, some daycare facilities prepare their own snacks with their students. Thus, it is impossible to guarantee allergen-free snacks or to avoid the risk of cross-contamination. Parents of allergic children should therefore be informed of the risk, especially when there is food handling, and they should have access in advance to the list of snacks offered to decide if they are safe for their child to consume.

Cooking activities in a school setting is an excellent way to promote healthy eating. These activities allow students to discover a variety of nutritious foods through positive experiences and develop cooking skills that will be useful to them throughout their lives. It is therefore important that all students participate in order to benefit from this teaching method; whenever possible, school employees should adapt the activity. The same is true for other activities organized by the school that involve food (tastings, special occasions or cultural events, etc.) or exposure to allergens via educational materials (e.g., eggshells, pasta or modelling clay used for artistic projects). However, it is important to consider that these adaptations might represent a challenge for school employees, particularly when adapting recipes in which many allergens must be substituted for other ingredients. Parents of allergic children should therefore be informed in advance of the food offered in these activities so that they may decide to allow their child to participate. Additional resources with respect to planning and running cooking workshops, substituting allergens in recipes and allergen-free recipes are available in *Appendix P: List of Additional Resources Related to Food Allergies*.

Food Not Provided by the School (Community Meals, Celebrations, Fundraisers and Food Donations)

Some activities may involve sharing food coming from outside sources, making it difficult to control allergens. This would be the case, for example, of community meals where students share food from home. In many cases, it can be a sharing of homecooked meals. In addition to the risk of cross-contamination, it is difficult to ensure that allergens are properly identified and that food brought in is appropriate for allergic students. When these activities take place, it is recommended that allergic students eat only food brought from home and provided by their parents.

The same recommendation applies to birthdays and reward activities where parents and school employees are known to spontaneously bring food to share with students in the class. Food rewards present a risk for students with allergies. They can impede on healthy eating, as this practice encourages students to eat when they are not hungry and thus fosters an emotional relationship with food. Alternatives to food should be considered to celebrate birthdays (wearing a birthday crown, receiving drawings or messages from other students, being entitled to a privilege²⁶, etc.) and to reward students (extra recess time, outings to the park or the library, etc.). Additional resources on non-food rewards are available in *Appendix P: List of Additional Resources Related to Food Allergies*.

Food might also be sold for **fundraising campaigns** OR **donated by food banks**. Given the lack of control of allergens in this type of food offering, **students with allergies should not consume it**.

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A summary of preventive measures related to food offered at school is presented in *Appendix M*.

²⁶ CQPP. Un modèle de résolution pour les conseils d'établissements. *Améliorer et planifier l'offre alimentaire lors des activités spéciales à l'école*. Consulté le 4 juillet 2018 : https://cqpp.qc.ca/app/uploads/2018/08/Outils_CE_Evenements_cor29-04.pdf

School Board (Public Schools)	School Administration	School Employees	Allergic Students and their Parents	
School Milk	Program and Snacks / Meals Pr School Caterers, or Subsidized	The state of the s		
Develop and/or approve menus (meals and snacks), and make them accessible to the greatest number of students possible. Provide menus to schools and inform them that: • These services cannot guarantee allergen-free food. • The risk of allergens being used and of cross-contamination can be greater in meals provided through cafeterias, catering services and subsidized lunch programs.	Send menus to parents in advance for review. Inform parents of allergic children of the risks involved in the use of these services; inform them that these services cannot guarantee the absence of allergens.	DC staff and LM: Be vigilant when distributing meals and snacks to allergic children.	Parent of an allergic child: Make an informed decision regarding the use of these services for their child, and provide the child with a homemade meal/snack in the event of non-participation. Allergic student: Ask about the presence of allergens in the food being offered.	
School Board (Public Schools)	School Administration	School Employees	Allergic Students and their Parents	
Food Offered at School by Daycare Services (Snacks)				
		e Services (Snacks)		

School Board (Public Schools)	School Administration	School Employees	Allergic Students and their Parents
Food Offered at So	hool Through Educational Activi	ties (Cooking Workshop and (Others)
Depending on requests made and available resources, support schools in setting up and tailoring educational activities.	Inform parents of allergic children of the risks involved when participating in these activities.	Teachers, DC staff and LM: Whenever possible, adapt recipes, food selection, or educational material to the needs of allergic students. Inform parents of allergic students in advance about foods provided during educational activities and ask for their approval prior to their child's participation.	Parent of an allergic child: Make an informed decision regarding their child's participation in these activities. Allergic student: Ask about the presence of allergens in the food being offered.
School Board (Public Schools)	School Administration	School Employees	Allergic Students and their Parents
(Public Schools)	School Administration ood Not Provided by the School (Celebrations, Fundraisers and	Community Meals,	

5.6 Prohibiting Food Consumption in School Transportation

It is recommended to prohibit food consumption in school transportation for all students. It reduces the risk of anaphylaxis and choking^{27,28}, it also helps to maintain the cleanliness of these vehicles.

Roles and Responsibilities

School Boards	School	School Employees	All Students
(Public Schools)	Administration		and Parents
Make sure the ban on food consumption in school transportation is documented in school policies/contracts/ regulations. Ensure communication on this ban to schools, school transportation staff and parents.	Convey school transportation regulations to parents of children who use this service.	Bus Drivers: As much as the situation permits, verify that no students eat food inside the vehicle.	Advise children that it is forbidden to eat food aboard school transportation.

5.7 Prevention Rather Than Restriction of Allergens

Little is known about the benefits of dietary restrictions on nuts and peanuts; scientific research is inconclusive as to the scope of these benefits. These dietary restrictions can create a sense of unfairness toward students with other types of food allergies and can create a false sense of security²⁹. Moreover, they present difficulties for parents of children without food allergies as well as for parents whose children are living with other types of allergies and dietary restrictions. The general population may have trouble reading and understanding nutrition labels on product packages, particularly when some products are exempt from nutrition labelling. Identifying the presence of allergens in a product is a complex procedure, which makes it difficult to apply this standard across the board. Allergen identification is also restrictive and frustrating for parents: it limits their choices and prevents them from giving their children highly nutritious food³⁰.

This is why several organizations, such as Allergy Quebec, recommend that **emphasis be placed on raising awareness**, **education and prevention rather than focusing on dietary restrictions to reduce the risk of anaphylactic reactions**³¹. The implementation of this recommendation dictates a procedural shift in several educational institutions and may give way to concerns from parents of allergic children; providing support to these schools is therefore critical. Appendices C and D offer two sample letters to parents (*Appendix C: Sample Letter to Parents* and *Appendix D: Schematic Sample Letter to Parents*) informing them of the preventive measures implemented in the school.

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²⁷ Santé publique Ottawa (2018). Consulté le 11 avril 2018 : https://www.santepubliqueottawa.ca/fr/public-health-topics/choking.aspx

²⁸ Manuel de sécurité – Consortium de services aux élèves de Sudbury. Consulté le 11 avril 2018 : http://www.businfo.ca/fr/pdf/fr_safetymanual.pdf

²⁹ Behrmann, Jason (juin 2010). Ethical principles as a guide in implementing policies for the management of food allergies in schools. The Journal of school nursing. 26 (3). 183-193.

³⁰ Bartnikas et al. (2017). Impact of school peanut-free policies on epinephrine administration. Journal of Allergy and Clinical Immunology. 465-473.

³¹ Allergy Quebec (septembre 2017). *Protocole visant à protéger les élèves québécois ayant des allergies alimentaires – Manger sans crainte*. 18 pages.

Roles and Responsibilities

School Board (Public Schools)	School Administration	Nurse	School Employees	All Students and Parents
Advise schools of the preventive measures to implement and communicate information through communication platforms (website, school agenda, etc.). Advise school administrators that the ban on certain foods does not guarantee an allergen-free school environment and that the implementation of preventive measures significantly reduces the risk of allergic reactions in the school.	Notify school personnel of the implementation of preventive measures. Advise school personnel that the ban on certain foods does not guarantee an allergen-free school environment and that the implementation of preventive measures significantly reduces the risk of allergic reactions in the school. Send a message to all parents that explains the preventive measures. (Appendix C: Sample Letter to Parents and Appendix D: Schematic Sample Letter to Parents)	Promote and support the implementation of preventive measures in the school.	Teachers: Raise awareness with all students of the seriousness of anaphylaxis and stress the importance of respecting and protecting those who suffer from allergies (tools available: Appendix H: Allergy Awareness Tool for Students and Appendix I: Allergy Awareness Quizzes for Students). Inform all parents about preventive measures and take part in their implementation Teachers, DC staff and LM: Remain vigilant; guard against bullying.	Make children aware of the importance of implementing preventive measures both for their own safety (if they suffer from allergies) or the safety of other allergic students.

6. Training

In the context of the Quebec legislation, training for intervention in case of anaphylaxis is not mandatory. Yet in Ontario, where training is mandatory since Sabrina's Law was put into effect in 2005³², a study indicates that school personnel impacted by this regulation displayed better technical ability in administering epinephrine when compared to school staff in other Canadian provinces where this legislation does not exist³³. **Therefore, providing standardized training to administer epinephrine is a worthwhile practice, as it helps to provide the required proficiency to correctly intervene in case of anaphylactic reactions.**

Public sector nurses are authorized to train public sector school personnel. These nurses apply the training method developed by the MSSS whose teaching tools are available on the Website of the *Ordre des infirmières et infirmiers du Québec* (OIIQ)³⁴. Private educational institutions should make sure that the training provider in their institution uses the tools developed by the MSSS. This 90-minute training features theoretical and practical modules. Trainees must complete both segments in order for the training to be complete. Training must be repeated every three (3) years, and a review of acquired knowledge is conducted each year. Course content deals with the causes and mechanisms of anaphylaxis (definition and types of allergens), signs and symptoms of anaphylactic reactions, administering epinephrine (protocol, mechanism of action / side effects and dosage) and the use of an auto-injector. Learning about symptoms may be challenging; various tools may be used, at times, to quickly identify them^{35,36}. In addition to these topics, the introduction of preventive measures is highly recommended³⁷.

Roles and Responsibilities

School Administration	Nurse	School Employees
In collaboration with the nurse, coordinate and plan training for employees (teachers/homeroom teachers, specialists, daycare staff, lunch monitors, etc.) if possible at the beginning of the school year. Keep a record of trained personnel. Disseminate an updated list of trained personnel to all educational stakeholders.	Coordinate the training sessions with school administrators according to their needs and provide training to school personnel (prioritize the choice of personnel according to the number of allergic students in their classes). Throughout the school year, conduct a reminder session on the content of the training session (include preventive measures). Provide a list of training attendees to school administrators.	Take part in the 90-minute training session. Attend the annual reminder session as well as the full-training course every three years. Teachers: Raise awareness with all students of the severity of anaphylaxis and of the preventive measures to be followed (See the following appendices: Appendix H: Allergy Awareness Tool for Students as well as Appendix I: Allergy Awareness Quizzes for Students).

³² Loi Sabrina (2005) – L.O. 2005, Chapitre 7. Consulté le 11 avril 2018 : https://www.ontario.ca/fr/lois/loi/05s07

³³ Cicutto, L., Julien, B., Li, N.Y et coll. (2012). Comparing school environments with or without legislation for the prevention and management of anaphylaxis. Allergy . 67 (1). 13 pages.

³⁴ Ordre des infirmières et infirmiers du Québec (2018). Santé scolaire – Formation pour administrer l'épinéphrine. Consulté le 11 avril 2018 : https://www.oiiq.org/pratique-professionnelle/encadrement-de-la-pratique/outils-cliniques/sante-scolaire-epinephrine

³⁵ Allergies Alimentaires Canada (2017). Ressources – L'affiche Pensez VITE sur les réactions allergiques. Consulté le 16 mai 2018 : http://foodallergycanada.ca/wp-content/uploads/Pensez-VITE-affiche-2017.pdf

³⁶ Service d'allergie et d'immunologie du CHU Québec. Suite à l'exposition à un allergène connu ou suspecté : Quand utiliser mon auto-injecteur d'épinéphrine ?

³⁷ Allergy Quebec (septembre 2017). Protocole visant à protéger les élèves québécois ayant des allergies alimentaires – Manger sans crainte. 18 pages.

7. Emergency Measures

The MSSS has designed a response protocol for victims of severe allergic reactions that describes the emergencies (including symptoms) in which it becomes necessary to administer an epinephrine auto-injector³⁸. Epinephrine is the only medication that should be administered in the event of anaphylaxis³⁹. In accordance with Article 3 of the Regulation respecting the professional activities that may be engaged in within the framework of pre-hospital emergency services and care⁴⁰: "In the absence of a first respondent⁴¹ or ambulance technician, any person may administer adrenalin with an auto-injector device in the case of a severe allergic anaphylactic type reaction (...)". In a school setting, however, antihistamines (for example: Benadryl, Claritin, etc.) must not be administered in the case of anaphylaxis, given that these antihistamines cannot put an end to an anaphylactic reaction; they might delay the administration of epinephrine, thus diminishing its effectiveness⁴². Moreover, school personnel are unable to assess the required state of health required before administering the prescribed antihistamines, nor can they ensure appropriate supervision of the student following the administration of antihistamines⁴³.

Roles and Responsibilities

School Board (Public Schools)	School Administration	Nurse	School Employees	Allergic Students and their Parents
Advise schools of the Emergency Measures (and of updates as they arise). Keep a record of reported events from all schools.	Inform school personnel about the emergency measures. Ensure that Emergency measures are followed at all times (including during extracurricular outings). Ensure that parents can be reached quickly in the event of an anaphylactic reaction. Advise the nurse when a case of anaphylaxis has taken place.	Promote and support the implementation of Emergency Measures. When a case of anaphylaxis has taken place, follow up with parents and all stakeholders present (Refer to Appendix O: Situational Assessment Tool)	Be familiar with the Emergency Measures and assist in their application. In case of anaphylaxis, fill out an event report and submit it to school administration.	Teach children to recognize the symptoms of an anaphylactic reaction. Be reachable at all times, and inform school of any change in contact information. In the event of anaphylaxis, assist in the implementation of the Emergency Measures both in school as well as during extracurricular activities.

 $^{^{38}}$ < BBB $_{\circ}$ bT_cT\ QaT ! Ž 2 %, En présence de réaction anaphylactique. Consulté le 4 juillet 2018 : https://www.oiiq.org/documents/20147/2281901/anaphylactic-poster-fr_Oct19.pdf/73af1d39-8ada-6d55-57e9-9c83623e9b7f

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³⁹Bociété canadienne d'allergie et d'immunologie clinique (août 2016). L'anaphylaxie à l'école et dans d'autres milieux - 3e édition révisée. 82 pages. ^{#2}Règlement sur les activités professionnelles pouvant être exercées dans le cadre des services et soins préhospitaliers d'urgence (2013). 5 pages. Consulté le 11 avril 2018 : http://www.cmq.org/pdf/autoris-act-med/reglem-services-soins-prehospitaliers-urgence.pdf?t=1515974400030

⁴¹ According to Urgences Santé, "first responders" are individuals who receive specific and well-supervised training to assess their skills. They are mandated by a recognized organization to intervene in certain determined emergency situations and within the framework of a well-defined structure. This definition should not be confused with the concept of «first responder» who represents an individual or individuals who happen to be at the site of an event and who provide assistance to victims.

⁴²Société canadienne d'allergie et d'immunologie clinique (août 2016). L'anaphylaxie à l'école et dans d'autres milieux - 3e édition révisée. 82 pages. ⁴³ Centre de santé et de services sociaux de la Pointe-de-l'Île (2011). Guide des activités d'exception confiées aux non-professionnels. Consulté le 26 novembre 2019 : https://www.oiiq.org/sites/default/files/uploads/pdf/publications/publicationsoiiq/Annexe-Regle%20soins-Pointe%20de%20l% 20ile. pdf

8. Storage of Medication

It is recommended that any allergic student who is capable of using the auto-injector themselves carry it at all times in a waist pack. If the student does not carry the auto-injector at the waist, it should be stored in the same location for each allergic student in the school. The allergic student's auto-injector should always be kept in the same spot (in a waist pack, in a locker, in a desk, etc.).

It is strongly recommended that the school have additional epinephrine auto-injectors (junior and regular doses) on hand, and discard them when they become expired.

Additional auto-injectors must be stored in a specific place, preferably the same in each school, out of reach of students, yet easily and rapidly accessible at all times by school personnel. It is critical that auto-injectors are readily available in schools, because a significant proportion of anaphylactic reactions occur in students not known to have food allergies.

Auto-injectors must also be readily available during extracurricular activities. It should be noted that epinephrine can withstand temperatures varying between 15 °C and 30 °C; it cannot be exposed to extreme cold or extreme heat (such as in a school bus).

Roles and Responsibilities

School Administration	Nurse	School Employees	Allergic Students and their Parents
Designate a secure and convenient place (unlocked and accessible at all times) to store auto-injectors, and inform all school personnel of this location. Have additional auto-injectors on hand (junior and regular doses). Replace auto-injectors as soon as they are expired.	Recommend that allergic students self-carry their auto-injector. Maintain a record of the expiration dates of all auto-injectors. Contact parents when their auto-injector becomes expired.	Know the location of each allergic person's auto-injector as well as the location of additional auto-injectors. Make sure that allergic students carry their auto-injectors during outings.	Provide an auto-injector for the child on the first day of school, and replace it when it becomes expired. Retrieve the auto-injector from the child at the end of the school year. Provide an additional auto-injector for the school and replace it when it becomes expired.

9. Conclusion

This guide does not have the force of law; however, we strongly recommend that school boards, governing boards and administrators of private educational institutions progressively implement the recommendations of this guide; these recommendations constitute standard practices for the management of food allergies in school settings for elementary schools in Montreal.

Prohibiting some foods does not ensure an allergen-free school environment. Implementation of preventive measures is the most efficient method to help reduce the risk of exposure to allergens and avoid the serious repercussions of anaphylactic reactions. Protecting allergic students is everyone's responsibility. Enforcement of this guide requires a concerted effort on the part of all stakeholders to ensure the well-being of all students.

The following appendices were developed to supply stakeholders with the required tools for the implementation of this guide. Appendix A defines the timeline required to facilitate the implementation of the guide; Appendix B introduces the roles and responsibilities of all parties involved.

APPENDICES

Appendix A: Timeline to Facilitate Implementation of Guidelines

Appendix A enables school administrators and school nurses to be well prepared for the implementation of the guide by listing actions to take before and during the school year.

School Administration	Nurse	
January	to June	
AT THE TIME OI	F REGISTRATION	
Ask parents to fill out the health card, to provide two photos of the child and to sign a consent form for disclosure of information.		
BEFORE THE END O	F THE SCHOOL YEAR	
Transmit the health cards to the school nurse.		
	HE SCHOOL YEAR OF THE SCHOOL YEAR)	
Present the <i>Guide to the Best Practices</i> ¹ to the school team (turnkey presentation) as well as the Emergency Measures (validate with the school nurse if necessary).		
Make the Guide to Best Practices available to the school team for review.		
	August	
	DF THE SCHOOL YEAR	
Identify a safe and accessible location to store auto-injectors and communicate the location to all personnel.	Collect data on allergic students.	
Make sure to have additional auto-injectors (child dose, adult dose). Replace auto-	Prepare an <i>fidentification sheet</i> for each allergic student as well as a <i>list of allergic</i> students.	
injectors when expired.	Distribute these tools.	
	September DE THE SCHOOL YEAR	
Inform school employees of the cleaning products to be used (in collaboration with	FINE SCHOOL TEAR	
the caretaker).		
Support school employees in implementing means to facilitate hand washing and inform all parents of the importance of applying this measure. (See <i>Hand-washing tips</i>).		
Send an information letter to parents regarding prevention measures (See <i>Appendix C</i>).	With the parent's permission, meet with the allergic student. Recommend that the student wear a medical ID bracelet and carry their auto-injector in a waist pack.	
·	er to June SCHOOL YEAR	
TRAINING	TRAINING	
In collaboration with the nurse, provide conditions that allow personnel to receive	Provide MSSS training (1.5 h) with the 3-year certification.	
training.	Hold an annual reminder session on the training content (including preventive	
Keep a record of trained personnel and distribute this list to all staff members.	measures).	
	Supply school administration with the list of those who have attended the training session.	
AT ALL TIMES		
Provide parents with a list of the food services offered at school (caterer, AM and PM snacks) ahead of time and include the following statement: "The absence of allergens cannot be guaranteed."	Promote and support the application of preventive and emergency measures in the school.	
Favour food-free celebrations and fundraisers as well as non-food privileges.	Communicate with parents if their auto-injector has expired and keep the record up	
Advise parents of allergic children in advance of activities at which food is offered and of the risks this may pose for their child.	to date.	
Inform the nurse of any case of anaphylaxis that has occurred.	In the event of anaphylaxis, follow up with parents and all personnel present	
Write an incident report when there is a case of anaphylaxis	(Situational Assessment Tool).	

Notes:

- The tools available in the Guide are in italics in the text. Support is available at all times from your school board.

Appendix B: Summary of the Roles and Responsibilities of Parties Involved

Appendix B summarizes the roles and responsibilities of all parties involved in the implementation of this Guide.

	Roles and Responsibilities
Preventive Measures	
Cleaning surfaces at mealtime and snack-time	Inform schools on the use of approved cleaning products.
Hand washing before and after mealtime and snack-time	Support schools in the implementation of strategies to facilitate hand washing.
Food offered at school	School Milk Program and Snacks/Meals provided by Cafeteria Services, School Caterers, or Subsidized Lunch Programs
	Develop and/or approve menus (meals and snacks) to make them accessible to as many students as possible.
	Provide schools with these menus while informing them of the following:
	These services cannot guarantee the absence of allergens.
	There are greater risks of allergens being present or of cross-contamination with food from cafeteria services, school caterers, and subsidized lunch programs.
	Food Offered at School by Daycare Services (snacks)
	Inform schools that this service cannot guarantee allergen-free food.
	Encourage schools to offer alternative choices to allergic students, and to share menus with parents.
	Food Offered at School Through Educational Activities (cooking workshops, etc.)
	Depending on requests made and available resources, support schools in setting up and tailoring educational activities.
	Food Not Provided by the School (community meals, celebrations, and fundraisers)
	Inform schools about the risk for students of participating in these activities.
Prohibiting food consumption in school transportation	Ensure that the ban on eating in school transportation is included in policies/contracts/regulations, and inform the schools, school transportation services and parents of students using this service.
Prevention rather than restriction of allergens	Send a communication to schools to explain preventive measures, and promote them through communication platforms (website, school diary, etc.). Advise school administrators that the ban on certain foods does not guarantee an allergen-free school environment and that the implementation of preventive measures significantly reduces the risk of allergic reactions in the school.
Emergency Measures	Inform schools of anaphylaxis emergency procedures already in place (and notify them of updates as they occur).
	Keep a record of events for all schools.

	Roles and Responsibilities
Identification of students	
Upon registration	Ask parents to fill out the health card
Before the start of the school year	Ensure that the nurse has health cards for students with allergies (and other health conditions).
At all times during the school year	Ensure to disseminate to substitute staff the identity of allergic students.
Preventive measures	
Cleaning surfaces at mealtime/ snack-time	Inform school employees about cleaning products to be used.
Seating arrangements for mealtime/snack-time and use of microwave oven	Inform all parents that the use of an insulated container (thermos) is to be preferred, especially for students with allergies.
Hand washing before and after mealtime and snack-time	Support school employees in implementing strategies to facilitate hand washing and inform all parents of the importance of this measure.
Prohibiting sharing of food, drinks, containers, water bottles and utensils	Inform all parents that sharing of food, drinks, containers, water bottles and utensils is prohibited.
Food offered at school	School Milk Program and Snacks/Meals Provided by Cafeteria Services, School Caterers or Subsidized Lunch Programs
	Send menus to parents in advance for review.
	Inform parents of allergic children of the risks involved in the use of this service (depending on type of snacks); inform them that this service cannot promise to be allergen-free.
	Food Offered at School by Daycare Services (snacks)
	Inform parents of allergic children of the risks involved in the use of this service (depending on type of snacks); inform them that this service cannot promise to be allergen-free.
	Food Offered at School Through Educational Activities (cooking workshops, etc.)
	Inform parents of allergic students of the risks involved when participating in these activities.
	Food Not Provided by the School (community meals, celebrations, fundraisers)
	Favour food-free celebrations and fundraisers as well as non-food privileges.
	Inform parents of allergic students in advance about these activities (whenever possible) and about the risks involved when participating in these activities.

Prohibiting food consumption in school transportation	Ensure that the rules on school transportation are communicated to parents of children who use the service.
Prevention rather than restriction of allergens	Notify school personnel of the implementation of preventive measures. Advise school personnel that the ban on certain foods does not guarantee an allergen- free school environment and that the implementation of preventive measures significantly reduces the risk of allergic reactions in the school. Send a message to all parents that explains the preventive measures.
Training	In collaboration with the nurse, coordinate and plan training for employees (teachers/homeroom teachers, specialists, daycare staff, lunch monitors, etc.) if possible at the beginning of the school year. Keep a record of trained personnel.
	Distribute to all staff the up-to-date list of trained employees.
Emergency measures	Inform school staff of anaphylaxis emergency measures Ensure that anaphylaxis emergency measures are applied at all times (i.e., also during extracurricular outings).
	Ensure that it will be possible to contact parents rapidly in the event of anaphylaxis.
	Inform the nurse when there has been case of anaphylaxis.
Storage of medication	Identify a safe and accessible location (unlocked and accessible) to store the auto- injectors and communicate this location to all school personnel.
	Ensure that additional auto-injectors are on hand (child dosage, adult dosage).
	Replace auto-injectors when expired.

	Roles and Responsibilities
Identification of students	
Before the start of the school year	Collect data from parents of allergic students (see <i>Appendix E: Data Collection Tool</i>). Based on the information gathered and the individualized emergency plan, prepare an identification sheet with the key information about each of these students (see <i>Appendix F: Identification Sheet for Students with Allergies</i>) and a list of all allergic students (see <i>Appendix G: Sample List of Students with Allergies</i>). Distribute the identification sheet and the list of allergic students to all school
	employees (teachers/homeroom teachers, DC staff and LM, specialists, etc.) and display them in the same strategic locations (classroom next to the light switch, staff room, daycare room, etc.).
	Following the parent's permission, meet with the allergic student to discuss food allergies.
At all times during the school year	Recommend that parents of allergic children have them wear a medical ID bracelet or any other ID (tag, card, etc.)
Preventive measures	
Prevention rather than restriction of allergens	Promote and support the implementation of preventive measures at school.
Training	Coordinate the training sessions with the administration according to needs and offer training to school staff (prioritize the choice of participants according to the presence of allergic students in their class).
	Hold an annual reminder session on the training content (including preventive measures).
	Supply the school administration with the list of participants.
Emergency Measures	Promote and support the implementation of emergency procedures for anaphylaxis.
Emergency measures	In the event of anaphylaxis, follow up with parents and all workers present (See <i>Appendix O: Situational Assessment Tool</i>).
Storage of medication	Recommend that allergic students carry an auto-injector.
	Keep a record of auto-injector expiry dates.
	Communicate with parents if their auto-injector is expired (keep the record up to date).

School Employees

	Roles and Responsibilities
Identification of students	
Before the start of the school year	Teachers, daycare and lunch monitors (DC staff and LM): Identify students with allergies in their class/group.
At all times during the school year	Teachers, DC staff and LM: Ensure to disseminate to employees the identity of allergic students (in daycare service, use attendance sheets, for example). Stay vigilant in case of bullying.
Preventive measures	
Cleaning surfaces at mealtime/snack-time	Teachers, DC staff and LM: Have the tables cleaned by an adult before and (especially) AFTER every meal and snack, using the authorized cleaning product. Recommend that allergic students: - Eat on a placemat (or disposable paper towel) - Clean the table surface with a disinfectant wipe BEFORE meals and snacks Caretaker: Have available supplies of authorized cleaning product, rags, brown paper towels and hand soap.
Seating arrangements at mealtime/snack-time and use of microwave oven	DC staff and LM: Recommend that allergic students always sit in the same place and avoid using the microwave oven.
Hand washing before and after mealtime and snack-time	Teachers, DC staff and LM: Put in place means to ensure hand washing before and after mealtime/snack-time for all students.
Prohibiting sharing of food, drinks, containers, water bottles and utensils	DC staff and LM: Forbid all students from sharing food, drinks, water bottles and utensils, and explain to them that it is for safety reasons.

Food offer at school	School Milk Program and Snacks/Meals Provided by Cafeteria Services, School Caterers, Subsidized Lunch Program
	DC staff and LM: Be vigilant when distributing meals and snacks to allergic children.
	Food Offered at School by Daycare Services (snacks)
	DC staff: Choose snacks that are safe for as many students as possible.
	At the request of the parent of an allergic child, provide the list of snacks that may be offered and inform the parent of the risks involved and that the absence of allergens cannot be guaranteed.
	Be vigilant when distributing snacks to allergic students.
	Food Offered at School Through Educational Activities (cooking workshops, etc.)
	Teachers and DC staff: Whenever possible, adapt recipes, food, and pedagogical material used for educational activities according to the needs of allergic students.
	Inform parents of allergic students in advance about foods provided during educational activities and ask for their approval prior to their child's participation.
	Food Not Provided by the School (community meals, celebrations and fundraising activities)
	Teachers and DC staff: Favour food-free celebrations and non-food privileges.
	Inform parents of allergic students in advance about these activities (whenever possible) and about the risk relative to their child's participation.
Prohibiting food consumption in school transportation	Bus drivers: Whenever possible, ensure that all students refrain from eating during school transport.
Prevention rather than restriction of allergens	Teachers: Raise awareness with all students of the seriousness of anaphylaxis and stress the importance of respecting and protecting those who suffer from allergies (See <i>Appendix C</i>).
	Inform all parents of preventive measures adopted and take part in their implementation.
	Teachers, DC staff and LM: Be aware of possible bullying.
Training	Take part in the 90-minute training session.
Training	Attend the annual reminder session and the retraining session every three years.
	Teachers: Raise awareness with all students of the severity of anaphylaxis and of the preventive measures to be followed (See <i>Appendix H: Awareness Tool for Students</i> and <i>Appendix I: Awareness Quizzes for Students</i>).
Emergency measures	Know the emergency procedures in case of anaphylaxis and take part in their implementation.
	Complete an incident report in the event of anaphylaxis and forward it to the administration.
Storage of medication	Know the location of auto-injectors of allergic students and where additional auto-injectors are stored.
	Ensure that allergic students bring their auto-injector during extracurricular outings.

Allergic Students and Their Parents

	Roles and Responsibilities
Identification of students	
Upon registration	Fill out child's health card
Before the start of the school year	Provide the school with information about their child's allergies.
	At the school's request, send two recent photos of their child (or the school may use the photos from GPI software). Fill out a consent form to authorize the distribution and posting of information on their child's allergy and permitting a meeting between the nurse and child.
At all times during the school year	Inform the school of any change in their child's health condition.
Preventive measures	
Cleaning surfaces at mealtime and snack-time	Parent of allergic student: Provide a clean placemat (or paper towels) and disinfectant wipes daily.
	Allergic student: Use a placemat or disposable paper towel to set their food for meals and snacks.
	Clean their table surface with a disinfectant wipe BEFORE meals and snacks.
Seating arrangements for mealtime/snack-time and use of	Use an insulated container (thermos) to offer hot meals to one's child.
microwave oven	Allergic student: Avoid use of microwave ovens and always sit in the same place.
Hand washing before and after mealtime and snack-time	Teach their child to wash their hands before and after meals/snacks.
Prohibiting sharing of food, drinks, containers, water bottles and utensils	Teach their child not to share food, drinks, containers, water bottles and utensils.

Food offered at school	School Milk Program and Snacks / Meals Provided by Cafeteria Services, School
	Caterers, Subsidized Lunch Program
	Parent of allergic student: Make an informed decision about their child's participation in these services. Provide their child with a meal or a snack from home in case of non-participation.
	Allergic student: Ask about the presence of allergens in the food offered.
	Food Offered at School by Daycare Services (snacks)
	Parent of allergic student: Make an informed decision on their child's participation in this service. Provide their child with a snack from home in case of non-participation.
	Allergic student: Ask about the presence of allergens in the food offered.
	Food Offered at School Through Educational Activities (cooking workshops, etc.)
	Parent of allergic student: Make an informed decision on their child's participation in these activities.
	Allergic student: Ask about the presence of allergens in the food offered.
	Food Not Provided by the School (community meals, celebrations and fundraising activities)
	Parent of allergic student: Make an informed decision on their child's participation in these activities. Provide food from home if necessary.
	Allergic student: Only eat food from home during these activities (if applicable).
Prohibiting food consumption in school transportation	Teach their child not to eat on school transportation.
Prevention rather than restriction of allergens	Teach their child about the importance of implementing preventive measures for their safety.
F	Teach their child to recognize the symptoms of an anaphylactic reaction.
Emergency measures	Ensure to be reachable at any time and notify the school of any changes to contact information.
	In case of anaphylaxis, take part in the application of emergency measures, at school and during extracurricular activities.
Storage of medication	Provide the school with an auto-injector for their child from the first day of school and replace it when expired.
	Recover their child's auto-injector at the end of the school year.
	Provide the school with an additional auto-injector and replace it when expired.

All Students and Parents

Roles and responsibilities				
Preventive measures				
Cleaning surfaces at mealtime/snack-time	Sensitize their child not to touch the table and placemat of allergic students.			
Seating arrangements for mealtime/ snack-times and use of microwave oven	Use an insulated container (thermos) when packing hot meals for their child.			
Hand washing before and after mealtime and snack-time	Teach one's child to wash their hands before and after mealtime/snack-time.			
Prohibiting sharing of food, drinks, containers, water bottles and utensils	Teach their child not to share food, drinks, containers, water bottles and utensils.			
Prohibiting consumption of food in school transportation	Advise children that it is forbidden to eat food aboard school transportation.			
Prevention rather than restriction of allergens	Teach their child about the importance of applying preventive measures for the security of other allergic students.			

Appendix C: Sample Letter to Parents

Appendix C is a sample letter to inform parents of preventive measures implemented at school to protect allergic children.

Inspired by a tool designed by the EMSB.

Date: XXX

Subject: Prevention for Better Management of Food Allergies

Dear Parents and Guardians,

In your child's classroom, there is at least one student who is allergic to the following foods: XXX. Coming in contact with these food allergens can cause a severe allergic reaction.

We cannot guarantee an allergen-free environment. To prevent allergic reactions, targeted preventive measures are more efficient than simply banning certain foods. Moreover, it is impossible to control the content of lunch bags.

There are some steps you and your child can take to help reduce the risks. Thank you for taking the following precautions.

IMPORTANT PRECAUTIONS

For everyone:

- No sharing or trading. The sharing of food, drinks, containers, water bottles and utensils is prohibited.
- Use of thermos. The use of an isotherm container (thermos) is recommended for all students.
- Hand washing. All students must wash their hands before and after meals and snacks.
- No food aboard school buses. It is forbidden to eat on school transportation.
- Lunch space. For added security, students should not touch other students' table surface or placemat.

For allergic students and their parents:

- Clean placemat. Students must eat on a clean placemat or a disposable napkin (ex: brown paper towel), for snacks and meals.
- Food services and educational activities. You will be notified in advance of the meals and snacks offered in order to make an informed decision about your child's participation. Carefully read the menus offered.
- Beware of food not provided by the school. It is recommended to eat only food from home.

Our goal is to provide a safe environment for all our students. We thank you for your collaboration.

Appendix D: Schematic Sample Letter to Parents

Appendix D offers a simplified sample letter informing parents of the preventive measures implemented in the school to protect allergic children.

Inspired by a tool designed by the CSSDM.



Did you know that there are children with allergies in your child's class?

The following steps are taken to ensure the safety of all our students.

FOR ALL STUDENTS



HAND WASHING Before and after meals and snacks



USING A THERMOS for hot meals



NO TRADING, NO SHARING of food, drinks, containers, water bottles or utensils



NO TOUCHING of other people's table surface or placemat at mealtime and snack-time



CLEAN TABLES before and after meals



NO EATING on the school transportation

Information on thermos use:

http://www.gardescolaire.org/outils/fiche-sur-les-contenants-isothermes-thermos/



Does your child have a food allergy?

The following steps are taken to ensure the safety of all our students.

FOR STUDENTS LIVING WITH FOOD ALLERGIES



USE A THERMOS to pack hot meals



CLEAN THE TABLE BEFORE mealtime with a wipe brought from home



EAT ON A CLEAN PLACEMAT (or a paper towel)



TELL AN ADULT
If they have allergy
symptoms

If they touch or eat food they are allergic to

FOR PARENTS OF CHILDREN LIVING WITH FOOD ALLERGIES



TO PROTECT YOUR CHILD:

Keep informed about school activities and services (catering, cafeteria, cooking workshops, community meals, etc.).

Tell your child to eat only food from home and the food provided by the school which you have authorized (snacks).

FOR THE SCHOOL

Clean surfaces AFTER meals.

Encourage students to use the same place each day.

Adapt educational activities such as cooking workshops.

Inform parents when food will be offered (cooking workshops, community meals, etc.).

Appendix E: Data Collection Tool

Appendix E is a data collection tool for the school nurse who needs to collect more information from parents of allergic children.

Inspired by tools from the CCSMTL as well as the CIUSSS de la Capitale Nationale and the CISSS de Chaudière-Appalaches.

IDENTIFICATION

Allergic student:			
Last name:			School:
First name:			School level:
Date of birth:			Class/Group:
Daycare registration:	Yes No		
Contact person for d	ata collection:		
Mother:			Student themselves
Father:			Guardian:
			Other (specify):
Method of data colle			
Telephone call	In-person meeting	Document sent	Other (specify):
	• • • • • • • • • • • • • • • • • • • •		
•		ALLERGY/	HEALTH
•	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • •	
Peanuts	Sesame		Inknown
Nuts	Soy		Other (specify):
Eggs	Seafood		
Milk	Fish		
Mustard	Insect bite		
Allergy History:			
Year of diagnosis:			Year of last reaction:
Allergy test: Yes	No		Year of allergy test:
Has your child ever h	ad an anaphylactic read	ction? Yes	No
Have you ever had to	administer an auto-inj	ector to your child?	Yes No
Does your child have	asthma? Yes N	lo	
Does your child have	eczema? Yes	No	

Is your child under the care of
A family doctor: Yes No Name:
An allergist: Yes No Name:
TREATMENT
Does your child have a prescribed auto-injector? Yes No
Brand of auto-injector: Dosage:
Expiry date of auto-injector:
Location of auto-injector in the school:
In a child's waist pack (worn at all times)
In a location determined by the nurse or the designated person (specify):

KNOWLEDGE AND AUTONOMY

Does your child...

Wear a MedicAlert-type bracelet or necklace? Yes No

Wear another allergy identification system? Yes No

Recognize their symptoms? Yes No

Have the ability to self-administer an auto-injector? Yes No

Is your child aware of the following preventive measures and do they apply them?

Avoid sharing food, beverages, containers, water bottles and utensils? Yes No

Only eat food from home (except with parents' permission)? Yes No

Avoid using microwave ovens? Yes No

Wash hands (before and after meals/snacks)? Yes No

Always sit at the same place during meals/snacks? Yes No

Clean table surface before meals/snacks and use a placemat? Yes No

Avoid eating on school transportation? Yes No

Avoid touching their mouth? Yes No

Ask questions to find out if food products contain allergenic substances? Yes No

Read food labels? Yes No

-		N I	-		N I	-
C	U	N	2	E	N	П

I agree to allow my child's picture, name and	allergy information	(types of allergens,	medication	, auto-injector	storage lo	cation
and emergency contacts) to be posted in ce	ertain areas of the sc	hool to help identify	my child's :	severe allergy	and ensu	re their
safety.						

Yes No

I accept that the school nurse meet with my child to discuss allergies and address...

- the allergens involved
- the signs and symptoms of an anaphylactic reaction.
- demonstration on how to self-administer an epinephrine auto-injector
- ways to avoid contact with allergens in the school
- where to find auto-injectors in the school

Yes No

Questions/comments:

Signature of nurse*:	Date:
*or another person designated by the school	
Signature of parent (or guardian):	Date:

Please return completed form to the school.

Appendix F: Identification Sheet for Students with Allergies

Appendix F is a student identification sheet. This sheet should be distributed to school personnel and clearly displayed in the class of the allergic student.

This interactive tool allows you to personalize the data relating to each student. It is necessary to have an up-to-date version of be Reader DC (free), a PDF reader, to access functions allowing the choice of a student's photo and their allergens from a file on the workstation.

Download Adobe Reader DC for free: https://get.adobe.com/fr/reader/

Download images of priority allergens: https://santemontreal.qc.ca/professionnels/drsp/sujets-de-aa-z/saine-alimentation/outils/

Inspired from a tool designed by the CCSMTL



ATTENTION

FOOD ALLERGY WARNING

In this classroom,				
	•	JDENT'S HOTO		
is allergic to:		• • • • • • • • • •	• • • • • • • • •	· • • • • • • • • • • • • • • • • • • •
The auto-injector is located:				

Appendix G: Sample List of Students with Allergies

Appendix G is a list of all students with allergies. It should be distributed to school staff and posted in strategic areas (eg: staff room, SDG room, etc.).

This interactive tool allows you to personalize the data relating to each student. It is necessary to have an updated version of Adobe Reader DC (free), a PDF reader, to access functions allowing the choice of a student's photo from a file on the workstation.

Download Adobe Reader DC for free: https://get.adobe.com/fr/reader/

Inspired by tools designed by the CIUSSS du Centre-Sud, du Nord et de l'Ouest de l'île de Montréal as well as the CIUSSS de la Capitale-Nationale and the CISSS de Chaudière-Appalaches.

List of Students with Allergies

	Student's name:
	Group/Class/Grade:
РНОТО	ALLERGY(IES):
	Auto-injector (dosage):
	Location:
	Expiry date:
	Student's name:
	Group/Class/Grade:
	ALLERGY(IES):
РНОТО	, ,, , , , , , , , , , , , , , , , ,
	Auto-injector (dosage):
	Location:
• • • • • • • • • • • • • • • • • • • •	Expiry date:
	Student's name:
	Group/Class/Grade:
	ALLERGY(IES):
РНОТО	
	Auto-injector (dosage):
	Location:
• • • • • • • • • • • • • • • •	Expiry date:
	Student's name:
	Group/Class/Grade:
	ALLERGY(IES):
РНОТО	
	Auto-injector (dosage):
	Location:
• • • • • • • • • • • • • • • • • • • •	Expiry date:

Appendix H: Allergy Awareness Tool for Students

Appendix H may be used by teachers to educate and raise awareness on food allergies and ways to prevent them.

This tool may be used to educate and raise awareness on allergies and then displayed in classrooms and day care areas.

At least one classmate in this class has a food allergy and cannot eat the following foods:

A food allergy is the body's VERY STRONG REACTION when it comes into contact with this (these) food(s). This reaction is VERY SERIOUS. Your classmate might be in danger even if they come into contact with a very small amount of this food. If this happens, he must receive medication very quickly and be taken to the hospital immediately. MAKING FUN OF THIS CLASSMATE WILL NOT BE TOLERATED.

TIPS FOR ALL STUDENTS



DO NOT SHARE food, drinks, containers, water bottles and utensils.



Wash your hands **BEFORE** and **AFTER** meals and snacks.



DO NOT EAT on school transportation.



DO NOT TOUCH others people's table surface and placemat during meals and snacks.

TIPS FOR ALLERGIC STUDENTS



ONLY EAT
Food from home (except
when given permission by
parents).



Use my **PLACEMAT** from home (or a paper towel) to eat my lunch and snacks..



DO NOT USE microwave ovens.



CLEAN MY TABLE SURFACE BEFORE meals and snacks with a disinfectant wipe given by my parents.



Always sit in the **SAME PLACE** during mealtime
and snack-times and at **MY DESK** when I eat in
my class.



TELL AN ADULT
If I have allergy
symptoms
if I have touched or eaten
food I am allergic to.

Appendix I: Allergy Awareness Quizzes for Students

Appendix I may be used by teachers to educate their students, raise awareness on food allergies and ways to prevent allergic reactions.

Tools designed by Allergy Quebec.



(Read to the group before distributing Quiz.)

What is a food allergy?

A food allergy is the body's reaction to a certain food that someone has just eaten. Little soldiers are sent to attack the food, because the body thinks it's in danger but it is wrong!

What are the symptoms of an allergic reaction?

What if someone has an allergic reaction?

Tell an adult immediately.

There is only one treatment for a severe allergic reaction: a medication called adrenaline. An adult will be able to give this medicine to the child, using their autoinjector.

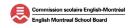
Ideally, allergic classmates should carry their own auto-injector in a waist pack. Every minute counts in the event of an allergic reaction, and a quick response is essential.

Can you be allergic to anything?

Almost all foods can trigger an allergic reaction, but 9 of them are responsible for most of the reactions: peanuts, nuts, milk, eggs, wheat, soy, mustard, sesame and the category which includes fish, seafood and mollusks.

Don't forget the basic rules to avoid putting your friends at risk:

- Never share your lunch or snacks
- Never share your drink, water bottle, dishes or utensils.
- Wash your hands before and after snacks and lunch with warm water and soap or use disinfectant hand wipes.













The ABCs of Food Allergies Intended for elementary cycle 1 students

TRUE OR FALSE?

- 1. Almost all foods can cause allergic reactions.
- 2. To prevent allergic reactions, I must never share my snack with my classmates.
- 3. To protect my friends who have food allergies, I must wash my hands before and after snacks and meals.
- 4. To wash my hands carefully, I must only use a few drops of water.
- 5. If an allergic classmate is really thirsty, I can share my water bottle with them.
- 6. Having a food allergy is very serious. If I see a classmate having an allergic reaction, I must quickly tell an adult.













Intended for elementary cycle 1 students

Answers

TRUE OR FALSE?

1. Almost all foods can cause allergic reactions.

TRUF

2. To prevent allergic reactions, I must never share my snack with my classmates.

TRUE

3. To protect my classmates who have food allergies, I must wash my hands before and after snacks and meals.

TRUE

4. To wash my hands carefully, I must only use a few drops of water. FALSE

To remove all the small particles that might contain allergens, I have to use soap and water or disinfectant hand wipes.

5. If an allergic classmate is really thirsty, I can share my water bottle with them.

FALSE

Since I have already drunk from my water bottle, my mouth may have left traces of allergens in it and my allergic classmate may react. I do not share my meal, my utensils, or my water bottle. If my friend is thirsty, he should use his water bottle or a fountain.

6. Having a food allergy is very serious. If I see a classmate having an allergic reaction, I must quickly tell an adult.

TRUE









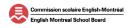




Intended for elementary cycle 2 students

Circle the correct answer:

- 1. To protect our friends with allergies to certain foods, we wash our hands:
- a) With warm water and soap or using disinfectant hand wipes
- b) With warm water and soap or using antibacterial gel
- 2. To prevent allergic reactions, we wash our hands _____ lunch and snacks.
- a) Before and after
- b) After
- c) Before
- 3. Circle all the correct answers! I could be allergic:
- a) To kiwis
- b) To nuts
- c) To eggs
- d) To rain
- 4. To avoid putting an allergic classmate at risk, we do not share:
- a) Our utensils
- b) Our pencil
- c) Our eraser
- 5. If a classmate suddenly has red patches on the skin or has trouble breathing:
- a) I don't say anything so as not to make them feel embarrassed.
- b) I immediately tell an adult.











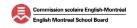


Intended for elementary cycle 2 students

Answers

Circle the correct answer:

- 1. To protect our classmates who are allergic to certain foods, we wash our hands:
- a) With warm water and soap or with disinfectant hand wipes
- 2. To prevent allergic reactions, we wash our hands _____ lunch and snacks.
- a) Before and after
- 3. Circle all the correct answers. I could be allergic:
- a) To kiwis
- b) To nuts
- c) To eggs
- 4. To avoid putting an allergic classmate at risk, we do not share:
- a) Our utensils
- 5. If a classmate suddenly has red patches on their skin or trouble breathing:
- b) I immediately tell an adult.











Appendix J: Tips for Cleaning Surfaces in the Context of Food Allergies

Appendix J provides tips to facilitate cleaning of surfaces. This tool may be posted in the classroom and daycare service area.

Tips for Cleaning Tables Before and After Meals and Snacks

Table cleaning is not only a preventive measure for anaphylaxis. It also prevents the transmission of infections. It should be done by an adult with a cleaning product authorized by the school board. When it is not available (e.g., during outings), disinfectant wipes should be used as an alternative to clean surfaces.

	BEFORE	AFTER
Allergic students	Prevent infections Eliminate traces of allergens	Prevent infections Eliminate traces of allergens
All students	Prevent infections	Prevent infections Eliminate exposure to allergens

ADDITIONAL PRECAUTIONS FOR ALLERGIC STUDENTS



Always sit in the **SAME PLACE** during mealtime and snack-times and at **MY DESK** when I eat in my class.



Use a clean **PLACEMAT** from home (or a paper towel) to eat my lunch and snacks.



CLEAN MY TABLE SURFACE BEFORE meals and snacks with a disinfectant wipe supplied by my parents.

INSTRUCTIONS FOR USING PLACEMAT (OR DISPOSABLE PAPER TOWEL)

School Employees	Parents of Allergic Students	Allergic Students
Recommend that allergic students use their placemat. Instruct students not to touch placemats that don't belong to them.	Daily: Include a placemat* in the lunch bag or several paper towels. Choose a placemat that is easy to wash and dry, that is water- and oil-resistant and can be rolled up to fit inside the lunch bag. *Wash placemat with soap and water.	Daily: Place their placemat (or paper towel*) onto the table. Empty the contents of their lunch bag onto the placemat or paper towel. Put the placemat back into the lunch bag to have it cleaned. Use a new paper towel at every meal/snack. *Wash placemat with soap and water.

Appendix K: Tips for Hand Washing in the Context of Food Allergies

Appendix K suggests activities to make students aware of the importance of hand washing. It also offers tips to facilitate hand washing. This leaflet may also be posted in the classroom and daycare service area.



Hand Washing before and after meals and snacks

Hand washing is not only a preventive measure against anaphylaxis, it also prevents the transmission of infections.

BEFORE		AFTER		
Allergic students	Prevent infections Eliminate traces of allergens	Prevent infections Eliminate traces of allergens		
All students	Prevent infections	Prevent infections Eliminate exposure to allergens		

THE STRATEGIES

ESTABLISH A ROUTINE BY INCORPORATING THE STEPS REQUIRED FOR EFFECTIVE HAND WASHING.

Hand washing is more likely to be adopted if it is part of a routine. It is important to be persistent and consistent, as students are in a rush to eat and would prefer to skip this step. Here are the different steps to integrate into students' routine for effective hand washing:

- 1. Wet your hands and wrists.
- 2. Add soap and scrub (15 to 30 seconds).
- 3. Rinse thoroughly with water.
- 4. Dry your hands using paper towels or a personalized towel.
- 5. Use paper towels or a personalized towel to turn off tap.

If needed, print images from the following web site and display them near sink areas:

https://www.mfa.gouv.qc.ca/fr/publication/Documents/MFA-Affiche_Mains.pdf

RAISING AWARENESS AMONG STUDENTS THROUGH FUN FILLED ACTIVITIES

It is sometimes difficult to convince students of the importance of hand washing.

Here is an experiment to raise awareness:

- 1. Place 2 tablespoons (30 ml) of canola oil in a small bowl.
- 2. Dip a spoon into the oil and spread the oil in the hands of three students.
- 3. Sprinkle 1 teaspoon (5 ml) of cinnamon into the hands of each student. Explain that cinnamon represents dirt that you don't always see with the naked eye.
- 4. Divide the student group in half.
- 5. Have half the students wash their hands with water only and the other half with soap and water.
- 6. Compare the two methods and conclude that it is more effective to wash your hands with soap and water.

PLANNING HAND WASHING COLLABORATIVELY

It is possible to plan specific times for hand washing BEFORE and AFTER meals and snacks, and to reserve time to implement this pratice into the daily schedule. This planning must be adapted to the school's environment (time available for lunch, rotation of groups of students, proximity and availability of sinks in relation to meal areas, etc.), and must be developed in consultation with teachers, daycare staff as well as lunch monitors.



For example, the responsibility for hand washing might be taken by the teacher before the meal and by the daycare staff or the lunch monitors after the meal.

HAND WASHING WITHOUT WATER, AN ACCEPTABLE ALTERNATIVE

A disinfectant hand wipe is an acceptable alternative.



Alcohol-based hand sanitizers (gel, liquid or foam) can be used to reduce the transmission of infections, but they have not been shown to be effective in eliminating food allergens.



HAND WASHING

Examples of Good Practices in a School Environment

SITUATION	GOOD PRACTICES	
Lunch time slot (a single period with a large	After the meal, accompany students to the washroom and motivate them to wash their hands prior to getting dressed to go out into the schoolyard.	
number of students vs. two shorter periods for	When there are many students at lunchtime, set up a schedule for rotating visits to the washroom.	
rotating groups)	Set up two separate lunch periods to reduce the number of students who visit the washroom to wash their hands. Since there is a minimum of 75 minutes lunch period allotted to teachers, it is possible to introduce this routine into the timetable even when there is only one lunch period.	
Supervision of students during movement vs the	Give preschool students with an earlier lunch hour access to washrooms before other elementary students.	
distance to walk/access the washroom	In cases where washrooms are situated farther away from classrooms, establish a detailed plan with the help of daycare staff, teachers and school administration to facilitate movement. Older students might use washrooms that are more distant; as for centrally located washrooms, various routes might be used to avoid congestion.	
	Appoint a person to provide supervision in washrooms and sinks areas, help manage student groups, accelerate hand washing by distributing paper towels and letting water run for the next student.	
Limited time of school personnel	Set up two separate lunch periods to reduce the number of students who visit the washroom to wash their hands. Since there is a minimum of 75 minutes lunch period allotted to teachers, it is possible to introduce this routine into the timetable even when there is only one lunch period.	
	Use a portion of this time to assist in student movement and facilitate hand washing. This allocated hour is often used to supervise children who ready themselves to go home for lunch, but since a majority of the students eat at school, this time may be allocated for other duties.	
Limited number of sinks	Appoint a person to provide supervision in washrooms and sink areas, help manage student groups, accelerate hand washing by distributing paper towels and letting water run for the next student.	
	Make sure that teachers who have a sink in their classroom (e.g., plastic arts room, preschool room) allow their students to wash their hands before lunch.	

Appendix L:

Summary of Preventive Measures to Reduce the Risk of Exposure to Allergens (Before, During and After Meals and Snacks)

Appendix L summarizes preventive measures to reduce the risk of exposure to allergens before, during and after meals and snacks. This tool might be posted in the classroom and daycare service areas.

Based on a tool designed by the CSSDM.



FOR ALL



PREVENTIVE MEASURES TO REDUCE THE RISK OF EXPOSURE TO ALLERGENS

Routine at mealtime and snack-time



Accompany students to the washroom where they can WASH THEIR HANDS BEFORE eating



NOT TO TOUCH table surfaces and another



CLEAN TABLE SURFACES AFTER meals using an approved product and a clean cloth



student's placemat

Ask students:

food, drinks, containers,

water bottles and utensils

TO AVOID SHARING



Accompany students to the washroom where they can WASH THEIR HANDS AFTER eating

Before the meal

During the meal

After the meal



CLEAN THE TABLE SURFACE BEFORE eating with a damp cloth supplied by my parents



Alert an adult: If I detect allergy symptoms If I've touched or eaten food I am allergic to



At mealtime use a PLACEMAT from home (or a paper towel)

Appendix M:

Summary of Preventive Measures to Reduce the Risk of Exposure to Allergens (based on food offered at school)

Appendix M summarizes preventive measures taken to reduce the risk of exposure to allergens when food is offered by the school or when food not provided by the school is offered.

Based on a tool designed by the (CSSDM)



SUMMARY OF PREVENTIVE MEASURES TO REDUCE THE RISK OF EXPOSURE TO ALL FRGENS

Food brought from home and food offered at school



FOOD BROUGHT FROM HOME

Inform parents of the presence of student with food allergies in their child's class rather than enforce food restrictions.

Inform parents about the preventive measures implemented.



FOOD OFFERED AT SCHOOL

DAYCARE SERVICE SNACKS. MEALS AND SCHOOL MILK PROGRAM.

Develop snack and meal menus that are safe for as many students as possible.

Substitute snacks containing allergens whenever possible.

Make meal menus accessible to parents in advance so that they can make an informed decision about their child's participation (posting, Internet, etc.).



FOOD OFFERED AT SCHOOL

THROUGH EDUCATIONAL ACTIVITIES CULINARY WORKSHOPS AND OTHERS

Prioritize non-food celebrations and rewards (See *Appendix P*).

Adapt recipes prepared during culinary workshops (See *Appendix P*).

Inform parents of allergic students about prepared recipes and the risk involved if their child's participates in these activities



FOOD NOT PROVIDED BY THE SCHOOL

COMMUNITY MEALS AND OTHERS

Recommend that allergic students only eat foods from home during these activities.s

Appendix N: Posters Raising Awareness About Preventive Measures

Appendix N showcases several posters that can be displayed in classrooms and in daycare service areas as a reminder to students and school personnel about preventive measures.

Tools designed by Allergy Quebec

BEFORE AND

AFTER meals and snacks...













BEFORE AND

AFTER meals and snacks...













BEFORE AND

AFTER meals and snacks...



Because an allergic reaction is no fun at all!





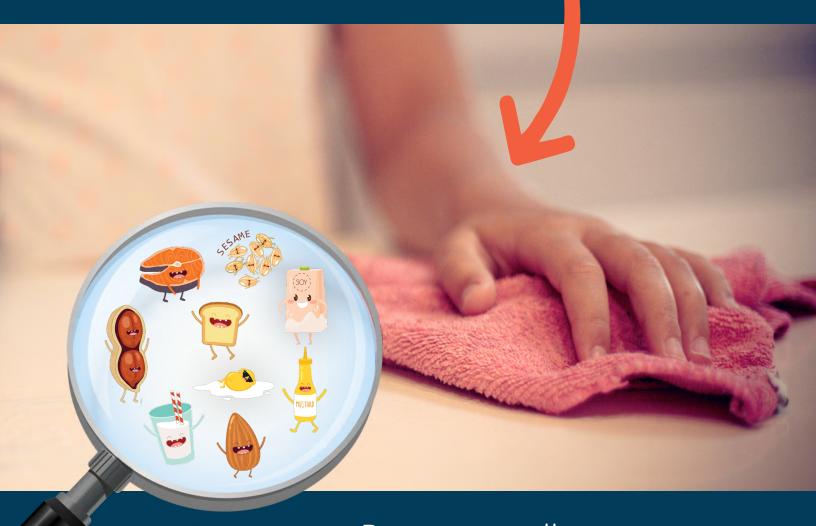






BEFORE AND

AFTER meals and snacks...



Because an allergic reaction is no fun at all!











OUPS!...

Let's avoid sharing food, dishes, utensils, bottles and drinks.













Appendix O: Situational Assessment Tool

In case of anaphylaxis, the tool in Appendix O is used to record the details of the event, in order to facilitate the follow-up with parents and school staff.

Inspired from tools used by the Commission scolaire Pierre-Neveu and the National Association of School Nurses (NASN).

Situational Assessment Tool

IDENTIFICATION 1. Name of School: 2. Age of Student: 3. Gender: Female Male Other **ALLERGIC REACTION** 4. Date of the reaction: 5. Time reaction started: 6. Location where symptoms occurred: Classroom Playground Bathroom Cafeteria Library School transportation Daycare service area Gymnasium School outing Nurse's office Corridor Other (specify): 7. Allergen(s) involved (check all that apply): Sesame Unknown Peanuts Nuts Soy Eggs Seafood Eggs Fish Milk Insecte bite Mustard Other, (specify): 8. Type of contact that triggered the allergic reaction: Eating the substance Touching the substance Being bitten by an insect Inhaling the substance Unknown Other (specify:

Wheezing	Dizziness	Skin redness			
Hoarse voice	Drowsiness	Itching			
Difficulty swallowing	Loss of consciousness	Hives			
Sensation of choking	Swollen throat/tongue	Nasal congestion			
Persistent cough	Swelling of face	Sneezing			
Bluish discolouration of skin	Diarrhea	Watery eyes			
Paleness	Abdominal cramps	Red eyes			
Feeling of weakness	Nausea/vomiting	Unknown			
Other:					
INTERVENTION					
10. Was epinephrine administered?					
Yes, 1 dose Yes, 2 d	Yes, 1 dose Yes, 2 doses or more No				
11. Was there at least one person on	site who was trained in the admin	istration of epinephrine? Yes No			
12. Date of training (if applicable):					
13. Date of training update (if applicable):					
Questions 14-22: Please answer only if epinephrine was administered.					
14. Time of 1st injection:					
15. Location where 1st injection was administered:					
Classroom					
Bathroom Playground					
Cafeteria Library School transportation					
Daycare service area Gymnasium School outing					
Nurse's office Corridor Other (specify):					
16. Time and location of subsequent	t doses (if applicable):				
Time of 2nd injection: Location of 2nd injection:					
Time of 3rd injection: Location of 3rd injection:					
Time of 4th injection: Location of 4th injection:					

9. Allergy symptoms (check all that apply):

17. Who administered the e	pinephrine?			
Student himself	Another student	Paramedics (first responders)		
Teacher	Daycare staff	Nurse		
Another person/school	worker, specify person's r	role:		
18. Had this person been tr	ained to administer epine	ephrine? Yes No		
19. Year of training (if applied	cable):	O. Year of training update (if applicable):		
21. Whose auto-injector wa	s used?			
Student's	School's	Another student's		
Paramedics	Other (specify):			
22. Where was the auto-inj	ector found?			
On the student himself	(waist pack) On the	e same floor as the student		
In the same room as the	e student Other:			
23. Was any other medication given to the student?				
Yes (specify):		No		
24. Call to 911: Yes	No 25. Time of	of call:		
Call to parents: Yes	No 26. Time of	of call:		
27. Transport to hospital: Yes No 28. Time of transport:				
29. If yes, how was the student transported to hospital?				
By ambulance, alone	By ambulance, accomp	anied By parents		
Other:				
30. Student's situation after	r the reaction:			
Visit to Emergency Roo	m Hospitalisation	Death		
Other:				

HISTORY OF STUDENT & PREPARATION OF SCHOOL ENVIRONMENT 31. Was the student already known to have an allergy? By their family/themselves Yes No By the school Yes No 32. If the student was known to have an allergy, check all that apply: **Peanuts** Sesame Nuts Soy Eggs Seafodd Milk Fish Other (specify): Mustarde Unknown 33. Had the student ever had an anaphylactic reaction before? Yes No 34. Had the student ever been given epinephrine before? No 35. Does the student suffer from asthma? Yes No 36. Was the allergic student's identification sheet used? Yes & visible in their class Yes, but not displayed No 37. Did the student have a PERSONAL auto-injector in the school? Yes No Expiry Date: Location: 38. Did the school possess at least one of its own auto-injectors? Yes No 1. Expiry Date: Location: 2. Expiry Date: Location: 3. Expiry Date: Location: Location: 4. Expiry Date: 39. Is there a person responsible for monitoring students' allergies at school? Yes, a nurse Yes, another designated person No FOLLOW-UP & RECOMMENDATIONS 40. Has a debriefing meeting been held or will one be held? Yes No 41. Comments / recommendations:

Report completed by:		
Name:		
Professional role:		
Signature:		Date :
	Please send to the following a	ddress.

Appendix P:

List of Additional Resources Related to Food Allergies

Appendix P is a list of additional resources for teachers and daycare staff regarding food allergies.

Plan and facilitate cooking workshops (This includes an information sheet on food allergies):

http://cybersavoir.csdm.qc.ca/nutrition/2018/06/26/ateliers-culinaires/

Tips to replace allergenic ingredients in recipes:

https://allergies-alimentaires.org/remplacer-les-aliments-allergenes-dans-vos-recettes/

Allergen-free recipes:

- https://allergies-alimentaires.org/recipes/?lang=en
- https://foodallergycanada.ca/tools-and-downloads/downloads/allergy-friendly-recipes/

Non-food rewards and food-free celebrations:

- https://cqpp.qc.ca/app/uploads/2019/02/Outils_CE_Re%C2%A6%C3%BCcompense_v7.pdf
- https://cqpp.qc.ca/app/uploads/2018/08/Outils_CE_Evenements_cor29-04.pdf
- http://cybersavoir.csdm.qc.ca/nutrition/2016/06/07/la-nourriture-une-recompense/
- http://www.nospetitsmangeurs.org/recompenser-les-enfants-sans-les-aliments/
- https://www.ottawapublichealth.ca/en/public-health-topics/resources/Documents/non_food_rewards_en.pdf

Gluten-free modelling clay recipe:

https://www.educatout.com/activites/crea-recettes/pate-a-modeler-au-mais.htm

Creating a placemat:

http://www.yoopa.ca/activites-et-loisirs/jeux-et-sorties/napperons-croquer

Tips when using a thermos:

http://www.gardescolaire.org/outils/fiche-sur-les-contenants-isothermes-thermos/