Her Majesty, by and with the advice and consent of the Legislative Assembly of the Province of Ontario, enacts as follows:

**Definitions**

1. (1) In this Act,
   
   “anaphylaxis” means a severe systemic allergic reaction which can be fatal, resulting in circulatory collapse or shock, and “anaphylactic” has a corresponding meaning; (“anaphylaxie”, “anaphylactique”)
   
   “board” means a district school board or a school authority; (“conseil”)
   
   “consent” means consent given by an individual with the capacity to provide consent to treatment for the purposes of the *Health Care Consent Act*, 1996; (“consentement”)
   
   “employee” means an employee of a board who regularly works at the school, in the case of a school operated by the board. (“employé”)

**Expressions related to education**

(2) Expressions in this Act related to education have the same meaning as in the *Education Act*, unless the context requires otherwise.

**Establishment of policy**

2. (1) Every board shall establish and maintain an anaphylactic policy in accordance with this section.

**Contents of anaphylactic policy**

(2) The anaphylactic policy shall include the following:

1. Strategies that reduce the risk of exposure to anaphylactic causative agents in classrooms and common school areas.
2. A communication plan for the dissemination of information on life-threatening allergies to parents, pupils and employees.

3. Regular training on dealing with life-threatening allergies for all employees and others who are in direct contact with pupils on a regular basis.

4. A requirement that every school principal develop an individual plan for each pupil who has an anaphylactic allergy.

5. A requirement that every school principal ensure that, upon registration, parents, guardians and pupils shall be asked to supply information on life-threatening allergies.

6. A requirement that every school principal maintain a file for each anaphylactic pupil of current treatment and other information, including a copy of any prescriptions and instructions from the pupil’s physician or nurse and a current emergency contact list.

Contents of individual plan

(3) An individual plan for a pupil with an anaphylactic allergy shall be consistent with the board’s policy and shall include:

1. Details informing employees and others who are in direct contact with the pupil on a regular basis of the type of allergy, monitoring and avoidance strategies and appropriate treatment.

2. A readily accessible emergency procedure for the pupil, including emergency contact information.

3. Storage for epinephrine auto-injectors, where necessary.

Administration of medication

3. (1) Employees may be preauthorized to administer medication or supervise a pupil while he or she takes medication in response to an anaphylactic reaction, if the school has up-to-date treatment information and the consent of the parent, guardian or pupil, as applicable.

Obligation to keep school informed

(2) It is the obligation of the pupil’s parent or guardian and the pupil to ensure that the information in the pupil’s file is kept up-to-date with the medication that the pupil is taking.

Emergency administration of medication

(3) If an employee has reason to believe that a pupil is experiencing an anaphylactic reaction, the employee may administer an epinephrine auto-injector or other medication prescribed to the pupil for the treatment of an anaphylactic reaction, even if there is no preauthorization to do so under subsection (1).

Immunity

(4) No action for damages shall be instituted respecting any act done in good faith or for any neglect or default in good faith in response to an anaphylactic reaction in accordance with this Act, unless the damages are the result of an employee’s gross negligence.

Common law preserved

(5) This section does not affect or in any way interfere with the duties any person may have under common law.
Commencement

4. This Act comes into force on January 1, 2006.

Short title

5. The short title of this Act is Sabrina's Law, 2005.