

**BFIS Food Allergy Management and Prevention Plan (FAMPP)**

*Support implementation of food allergy management and prevention plans and practices in school.*

**Purpose**

***Ensure the daily management of food allergies for individual children.***

- Identify children with food allergies.
- Develop a plan to manage and reduce the risk of food allergy reactions in individual children.
- Help students manage their own food allergies.

***Prepare for food allergy emergencies***

- Set up communication systems that are easy to use.
- Make sure staff can get to epinephrine auto-injectors quickly and easily.
- Make sure that epinephrine is used when needed and someone immediately contacts emergency medical services.
- Identify the role of each staff member in an emergency.
- Prepare for food allergy reactions in children without a prior history of food allergies.
- Document the response to a food allergy emergency.

***Provide professional development on food allergies for staff***

- Provide general training on food allergies for all staff.
- Provide in-depth training for staff who have frequent contact with children with food allergies.
- Provide specialized training for staff who are responsible for managing the health of children with food allergies on a daily basis.

***Educate children and family members about food allergies***

- Teach all children about food allergies
- Teach all parents and families about food allergies.

***Create and maintain a healthy and safe educational environment***

- Create an environment that is as safe as possible from exposure to food allergens

- Develop food-handling policies and procedures to prevent food allergens from unintentionally contacting another food.
- Make sure outside groups are aware of food allergy policies and rules when they use school facilities before or after hours.
- Create a positive psychosocial climate

### **Identifying children with food allergies**

Starts in Admission:

- Parents Student Health Form
- Doctor Student Health Form

If food allergies or intolerance: **Allergy Action Plan (AAP)**

- **Medical certificate**
- **A recent photo of the child**
- **Information about signs and symptoms of the child's possible reactions to known allergens.**
- **Information about the possible severity of reactions, including any history of prior anaphylaxis (even though anaphylaxis can occur even in children without a history of prior anaphylaxis).**
- **A treatment plan for responding to a food allergy reaction or emergency, including whether an epinephrine auto-injector should be used.**
- **Information about other conditions, such as asthma or exercise-induced anaphylaxis that might affect food allergy management.**
- **Contact information for parents and doctors, including alternate phone numbers for notification in case of emergency.**

### **Help student manage their own food allergy**

- Young children in early elementary grades generally cannot manage their own food allergies. However, some students, especially adolescents, can take responsibility for managing their own food allergies, including carrying and using epinephrine when needed.

- When medication is required by students who have chronic health conditions, especially when medication may be lifesaving, it is best practice to encourage and assist students to become educated and competent in their own care.
- **What age to carry their own epinephrine? 6<sup>th</sup> grade. However 3<sup>rd</sup> to 5<sup>th</sup> grade students should know where their epinephrine is kept. Nursery to 2nd grade teachers are totally in charge of their students' Epinephrine.**
- Before students are allowed to carry and use medication, school staff should assess students' knowledge, attitudes, behaviors, and skills to determine their ability to handle this responsibility. This decision should be reassessed periodically, and the school nurse or another assigned staff member should randomly check to make sure students are carrying their epinephrine auto-injector.
- Even when students are able to manage their own food allergies, school staff need to know which students have allergies so they can have plans in place to monitor each student's condition and be able to respond in an emergency. Because some symptoms of anaphylaxis may continue after a dose of epinephrine is administered and because students might not always have their medication with them, we also keep a second epinephrine auto-injector (provided by parent or student) in the Nurse's station. we also keep a **second epinephrine auto-injector (provided by parent or student) in the Nurse's station, school provides extra epinephrine auto-injector to be kept in ES, MS, HS reception and Nurse station.**

**Set up communication systems that are easy to use**

- Nurse office: 800 Cell phone: 607886154

**Prepare for food allergy reactions in children without a prior history of food allergies**

- Follow **BFIS Vital Emergency Protocol in Nurse Station protocol**

**Document the response to a food allergy emergency**

**Documentation of Response to a food allergy emergency**

- Time and location of the incident
- Food allergen that triggered the reaction (if known)
- If epinephrine was used and the time it was used
- Notification of parents and EMS
- Staff members who responded to the emergency
- Brief description

**Provide professional development on food allergies for staff**

**Training strategy: Inform and train all staff on BFIS Food Allergy Management and Prevention Plan (FAMPP) at the beginning of every school year.**

**Create and maintain a healthy and safe educational environment**

Create an environment that is as safe as possible from exposure to food allergens

- Staff should be trained and prepared to prevent and respond to a food allergy emergency.
- Make sure a contingency plan is in place in case of a substitute teacher, nurse or food service personnel

**Develop food-handling policies and procedures to prevent food allergens from unintentionally contacting another food**

- Promote good hand-washing practices before and after eating
- Supervise children closely during mealtimes. Consider assigned seating for meals, especially in situations with family-style dining. Emphasize that children not share food.

- Put children's names on cups, plates, and utensils to avoid confusion and cross-contact
- Designate food storage areas for foods brought from home
- Cleaning with water alone will not remove food allergens. Clean and sanitize with soap and water or all-purpose cleaning agents and sanitizers that meet state and local food safety regulations, all surfaces that come into contact with food in kitchens, classrooms, and other locations where food is prepared or eaten.
- Clean and sanitize food preparation equipment, such as food slicers, and utensils before and after use to prevent cross-contact
- Clean and sanitize trays and baking sheets after each use. Oils can seep through wax paper or other liners and cause cross-contact
- Prepare food separately for children with food allergies. Strategies should include preparing items without allergens first, using a separate work space and equipment, and labeling and storing items before preparing other foods
- All staff who prepare, handle, or serve food should know how to read labels to identify food allergens. Staff members should be knowledgeable about current labeling laws. Because food labels often change, they should be read every time the food is purchased. Ingredient lists posted on Web sites are not reliable. The manufacturer of the food should be contacted if clarification is needed.
- Use appropriate hand-washing procedures that emphasize the use of soap and water. **Hand sanitizers are not effective in removing food allergens.**

**Make sure outside groups aware of food allergy policies and rules when they use school facilities before or after hours**

- Local agencies, community groups, and community members who use school before or after operating hours should be aware of and comply with policies on food, cleaning, and sanitation procedures.
- School staff should be notified when outside groups are using their facilities.

**Create a positive psychosocial climate**

- Foster a climate that promotes positive psychological and social development; that actively promotes safety, respect, and acceptance of differences; and fosters positive interpersonal relationships between staff members and children and between the children themselves.

- Clear and consistent disciplinary policies, meaningful opportunities for participation, and supportive behaviors by staff members and parents.
- Children with food allergies need an environment where they feel secure and can interact with caring people they trust. Bullying, teasing, and harassment can lead to psychological distress for children with food allergies which could lead to a more severe reaction when the allergen is present.
- A positive psychosocial climate—coupled with food allergy education and awareness for all children, families, and staff members—can help remove feelings of anxiety and alienation among children with food allergies.
- All children and staff members share responsibility for preventing bullying and social isolation of children with food allergies.
- Every student with a food allergy should have an individual written emergency or individual care plan.

**BFIS FAMPP in**

- **Classroom**
- **Cafeteria / Food services**
- **School Bus / Transportation**
- **Field trips (activities before or after school)**
- **Gym and Recess**

**CLASSROOM**

- All teachers, aides, volunteers, substitutes and students should be educated about food allergies.
- **Teachers must be familiar with the Individual Health Care Plan of students in their classes and respond to emergencies as per the emergency protocol documented in the Allergy Action Plan.**
- In the event of an allergic reaction (where there is no known allergic history), the school nurse should be called and the school's Emergency Response Plan activated **Nurse Station Protocol**. The emergency medical services should be called immediately **112**.
- **All ES teachers are informed of their student's allergies at the beginning of the school year by the school nurse.**

- **MS/HS Principal and Principal assistant are informed of all MS/HS student's allergies at the beginning of the school year.**
- Information should be kept about students' food allergies in the classroom. These foods should not be used for class projects, parties, holidays and celebrations, arts, crafts, science experiments, cooking, snacks, or other purposes.
- Have all parents/guardians of students in the class be notified that there is a student with a life-threatening food allergy and what foods must not be brought to school
- Avoid the use of identified allergens in class projects, parties, holidays and celebrations, arts, crafts, science experiments, cooking, snacks, or rewards. Modify class materials as needed.
- Use non-food incentives for prizes, gifts, and awards.
- Avoid ordering food from restaurants because food allergens may be present, but unrecognized.
- Encourage children to wash hands before and after handling or consuming food.
- Have rapid access to epinephrine auto-injectors in cases of food allergy emergency and train staff to use them.
- Help students with food allergies read labels of foods provided by others so they can avoid ingesting hidden food allergens.
- Consider methods (such as assigned cubicles) to prevent cross-contact of food allergens from lunches and snacks stored in the classroom.
- Consider designated allergy-friendly seating arrangements.
- Support parents of children with food allergies who wish to provide safe snack items for their child in the event of unexpected circumstances.
- Include information about children with special needs, including those with known food allergies, in instructions to substitute teachers.

#### Responsibilities of teachers

- **Receive the AAP (allergy Action Plan) of any student(s) in your classroom with life-threatening allergies.**
- Request that the classroom has a functioning intercom, walkie-talkie or other communication device for communication with the school nurse. (Telephone).
- Participate in a team meeting for the student with life-threatening allergies and in-service training regarding:

- (1) Allergens that cause life-threatening allergies (such as foods, insect stings, medications, latex).
- (2) Steps to take to prevent life-threatening reactions and accidental exposures to allergens.
- (3) How to recognize symptoms of the student's life-threatening allergic reaction.
- (4) Steps to manage an emergency.
- (5) How to administer an epinephrine auto-injector.

- Keep accessible the student's AAP with photo in classroom or keep with lesson plan.
- Be sure volunteers, student teachers, aides, specialists and substitute teachers are informed of the student's food allergies and necessary safeguards.
- Leave information in an organized, prominent and accessible format for substitute teachers.
- Coordinate with parent on providing a lesson plan about food allergies for the class and discuss anaphylaxis in age appropriate terms, with student's permission.
- Educate classmates to avoid endangering, isolating, stigmatizing or harassing students with food allergies. Be aware of how the student with food allergies is being treated; enforce school rules about bullying and threats.
- Work with the school nurse to educate other parents about the presence and needs of the child with life-threatening allergies in the classroom. Enlist their help in keeping certain foods out of the classroom.
- Inform parents of any school events where food will be served.
- Participation with the planning for student's re-entry to school after a anaphylactic reaction.
- Never question or hesitate to act if a student reports signs of an allergic reaction



## **SNACKS/ LUNCHTIME**

- **Students from 1<sup>st</sup> grade can fetch morning and afternoon snacks from the kitchen.**
- **The kitchen will pack special diet snacks differently, tagged with the name of the particular student that needs it.**
- Teachers are responsible for identifying allergen free snacks for their students
- Prohibit students from sharing or trading snacks
- For the student's safety, encourage the student to take advantage of an eating area in the classroom that is free of the food to which s/he is allergic.
- Avoid cross-contamination of foods by wiping down eating surfaces with soap and water before and after eating. Tables should also be washed with soap and water in the morning if an after-school event has been held in the classroom the day before.
- Reinforce hand-washing before and after eating

## **CLASSROOM ACTIVITIES**

- Avoid use of foods for classroom activities (e.g., arts and crafts, counting, science projects, parties, holidays and celebrations, cooking, or other projects).
- Use stickers, pencils or other non-food items as rewards instead of food

## **FIELD TRIPS AND OVERNIGHT TRIPS**

Collaborating with the school nurse, prior to planning a field trip to:

- **Ensure epinephrine auto-injectors and instructions are taken on field trips.**
- **Ensure that functioning two-way radio, walkie talkie, cell phone or other communication device is taken on field trip.**
- Review plans for field trips; avoid high risk places. Consider eating situations on field trips and plan for prevention of exposure to the student's life-threatening foods.
- Know where the closest medical facilities are located, 112 procedures.

- Invite parents of a student at risk for anaphylaxis to accompany their child on school trips, in addition to the chaperone. However, the student's safety or attendance must not be conditioned on the parent's presence.
- One to two people on the field trip should be trained in recognizing symptoms of life-threatening allergic reactions, trained to use an epinephrine auto-injector, and trained in emergency procedures.
- Consider ways to wash hands before and after eating (e.g. provision of handwipes, etc.).

## **CAFETERIA**

### **Cafeteria protocols**

Process for identifying students with LTA (Life Threatening Allergies) Allergen free tables Personnel responsibilities (e.g., seating, cleaning) Cleaning protocols (e.g., frequency, type of cleaning solution, etc.)

- **Lunch provider informed of all students allergies at the beginning of the school year by the school nurse.**
- Encourage children, school staff, and volunteers to wash hands before and after handling or consuming food.
- Wash all tables and chairs with soap and water or all-purpose cleaning agents before each meal period.
- Consider designated allergy-friendly seating during meals (open to any child eating foods free of identified allergens).
- Make reasonable meal accommodations after receiving approval from a doctor or allergist through dietary orders or as stated in the child's Emergency Care Plan
- Provide advanced copies of menus for parents to use in planning.
- Be prepared to share food labels, recipes, or ingredient lists used to prepare meals and snacks with others.
- Keep current contact information for vendors and suppliers so you can get food ingredient information.
- Read all food labels and re-check with each purchase for potential food allergens.
- Keep food labels from all foods served to children with allergies for at least 24 hours after serving the food in case the child has a reaction.

- Report mistakes such as cross-contact with an allergen or errors in the ingredient list or menu immediately to administrators and school nurse.

#### Responsibility lunch provider

- Post the student's Allergy Action Plan with consent of parent(s).
- Review the legal protections for a student with life threatening allergies.
- Read all food labels and recheck routinely for potential food allergens.
- Train all food service staff and their substitutes to read product food labels and recognize food allergens.
- Maintain contact information for manufacturers of food products (Consumer Hotline).
- Review and follow sound food handling practices to avoid cross contamination with potential food allergens.
- Strictly follow cleaning and sanitation protocol to avoid cross-contamination.
- Set up policies for the cafeteria regarding food allergic students.
- Create specific areas that will be allergen safe.
- Train monitors.
- Enforce hand washing for all students.
- Thoroughly clean all tables, chairs and floors after each meal.
- Plan ahead to have safe meals for field trips.
- Avoid the use of latex gloves by food service personnel. Use non-latex gloves instead.
- Provide advance copies of the menu to parents/guardian and notification if menu is changed.
- Have a functioning intercom, walkie-talkie or other communication device to support emergencies.
- Take all complaints seriously from any student with a life-threatening allergy.
- Be prepared to take emergency action.

## **Transportation / Bus**

### **School bus management**

Communication systems (e.g., cell phones) Driver training Student placement

Availability/location of EpiPen<sup>®</sup> Food policy on bus

- Train transportation staff in how to respond to food allergy emergencies.
- Encourage children to wash hands before and after handling or consuming food.
- **Do not allow food to be eaten on buses except by children with special needs such as those with diabetes.**

### **Responsibility of School Bus Company**

- Provide a representative from the bus company for Team meetings to discuss implementation of a student's IHCP (Individual Health Care Plan).
- Provide training for all school bus drivers on managing life-threatening allergies (provide own training or contract with school).
- Provide functioning emergency communication device (e.g., cell phone, two-way radio, walkie-talkie or similar).
- Know local Emergency Medical Services procedures.
- **Maintain policy of no food eating allowed on school buses.**

## **Fieldtrips, Activities before or after school**

### **Field trip management**

Planning process. Location of field trip safe for student. Location of nearest medical facility determined.

Guidelines for storage/administration of EpiPen<sup>®</sup> Plan for activating EMS and notifying parent. Availability of AAP.

- **School nurse be notified about field trips in a timely manner**
- Allergy Action Plan be communicated to responsible personnel on field trips, the school bus and after school programs
- Trained personnel to administer the epinephrine should an emergency occur
- **No-food policy for the bus**
- We do not exclude children with food allergies from field trips, events, or extra-curricular activities.

- When planning a field trip, find out if the location is safe for children with food allergies.
- Identify special needs before field trips or events.
- Invite, but do not require, parents of children with food allergies to accompany their child in addition to the regular chaperons.
- Make sure that events and field trips are consistent with food allergy policies.
- Package meals and snacks appropriately to prevent cross-contact.
- Encourage children to wash hands before and after handling or consuming food.
- Have rapid access to epinephrine auto-injectors in cases of food allergy emergency and train staff to use them.
- Whenever students travel on field trips for school, the name and phone number of the nearest hospital will be part of the chaperone's emergency plan.
- Medications including epinephrine auto-injector and a copy of the student's AAP must accompany the student.
- **A cell phone or other communication device must be available on the trip for emergency calls.**
- After school activities sponsored by the school must be consistent with school policies and procedures regarding life-threatening allergies.
- Identify who is responsible for keeping epinephrine by auto injector during sporting events.
- If for safety reasons medical alert identification, (ID bracelet) needs to be removed during specific activities, the student should be reminded to replace this identification immediately after the activity is completed.
- With written parental permission, the coach or adult staff member in charge will be provided with the Allergy Action Plan (AAP), of students who have life threatening allergies.
- If bake sales are held on school grounds, consideration should be given to students with LTA (Life Threatening Allergies). Food should be tightly wrapped or sealed. The display table should be washed after use.

### **Responsibility afterschool**

- Participate in Team meetings to determine how to implement students Individual Health Care Plan.
- Conduct that activity in accordance with all school policies and procedures regarding life threatening allergies.
- With parent's consent, keep a copy of the Allergy Action Plan and photo of students with life threatening allergies.
- Make certain that emergency communication device (e.g. walkie-talkie, intercom, cell phone, etc.) is always present.
- One to two people should be present who have been trained to administer epinephrine auto-injector.
- Maintain a current epinephrine auto-injector in the first aid kit.
- Clearly identify who is responsible for keeping the first aid kit.
- If for safety reasons medical alert identification needs to be removed during specific activities, the student should be reminded to replace this identification immediately after the activity is completed.

### **Physical Education and Recess**

- Do not exclude children with food allergies from physical education or recess activities.
- Encourage hand washing before and after handling or consuming food.
- **Have rapid access to epinephrine auto-injectors in cases of food allergy emergency and train staff to use them.**

### **Parents' responsibility**

- Inform the school nurse of your child's allergies prior to the opening of school (or as soon as possible after a diagnosis). Submit all the documents as requested by the school in order to ensure a correct management of your child's allergy.
- Provide the school with a way to reach you (cell phone, beeper, etc.).
- Provide a list of foods and ingredients to avoid.
- Consider providing a medical alert bracelet for your child.

- Provide the school nurse with medication orders from the licensed provider, please attach medical prescription.
- Participate in developing an Individual Health Care Plan with the school nurse.
- **Provide the school nurse with at least annual updates on your child's allergy status.**
- Provide the school with up-to-date epinephrine auto-injectors.
- Discuss with the school nurse the possibility of keeping the epinephrine auto-injector in the classroom with instructions (this can also be taken on field trips)
- Decide if additional epinephrine auto-injectors will be kept in the school, aside from the one in the nurse's office, and if so, where.
- Provide the school nurse with the licensed provider's statement if student no longer has allergies.
- Discuss implementation of IHCP (Individual Health Care Plan)
- Establish prevention plan.
- Periodically (halfway through the year) review prevention and emergency action plans with the team.
- Help decide upon an "allergy-free" eating area in the classroom and/or cafeteria.
- Leave a bag of "safe snacks" in your child's classroom so there is always something your child can choose from during an unplanned special event.
- Provide a non-perishable lunch to keep in school, in case your child forgets lunch one day.
- Be willing to provide safe foods for special occasions, e.g. bring in a treat for the entire class so that your child can participate.
- Be willing to go on your child's field trips if possible and if requested

**Periodically teach your child to:**

- Recognize the first symptoms of an allergic/anaphylactic reaction.
- Know where the epinephrine auto-injector is kept and who has access to the epinephrine.
- Communicate clearly as soon as s/he feels a reaction is starting.
- Carry his/her own epinephrine auto-injector when appropriate.
- Not share snacks, lunches, or drinks.

- Understand the importance of hand-washing before and after eating.
- Report teasing, bullying and threats to an adult authority.
- Take as much responsibility as possible for his/her own safety.

**It is important that children take on more responsibility for their food allergies as they grow older and are developmentally ready. Consider teaching them to:**

- Communicate the seriousness of the allergy.
- Communicate symptoms as they appear.
- Read labels.
- Carry own epinephrine auto-injector (from 6<sup>th</sup> grade).
- Administer own epinephrine auto-injector and be able to train others in its use.

**Remember – the ultimate goal is that our children eventually learn to keep themselves safe.**

### **Responsibilities of School Nurse**

- Prior to entry into school (or, for a student who is already in school, immediately after the diagnosis of a life-threatening allergic condition), meet with the student's parent/guardian and develop an Individual Health Care Plan (IHCP) for the student.
- Assure that the AAP includes the student's name, photo, allergens, and symptoms of allergic reactions, risk reduction procedures, emergency procedures, and required signatures.
- Arrange and convene a team meeting (preferably before the opening of school) to develop the plan with all staff who come in contact with the student with allergies, including principal, school physician, teachers, specialists, food service personnel, aides, physical education teacher, custodian, bus driver, local EMS, etc.
- Familiarize teachers with the IHCPs and AAPs of their students by the opening of school, or as soon as the plans are written. Other staff members who have contact with students with LTAs should be familiar with their IHCPs and Allergy Action Plans on a need-to-know basis.



- After the team meeting remind the parent to review prevention plans, symptoms and emergency procedures with their child.
- Provide information about students with life-threatening allergies and their photos (if consent given by parent) to all staff on a need-to-know basis (including bus drivers).
- Conduct in-service training and education for appropriate staff regarding a student's life-threatening allergens, symptoms, risk reduction procedures, emergency procedures, and how to administer an epinephrine auto-injector
- Educate new personnel as necessary.
- Track in service attendance of all involved parties to ensure that they have been trained.
- Introduce yourself to the student and show him/her how to get to the nurse's office.
- Periodically check medications for expiration dates and arrange for them to be current.
- Discuss with parents the possibility of keeping an epinephrine auto-injector in the classroom containing necessary instructions, and help to arrange if appropriate. This auto-injector can be taken on field trips.
- Arrange periodic follow-up on semi-annual basis, or as often as necessary, to review effectiveness of the IHCP.
- Make sure there is a contingency plan in place in the case of a substitute school nurse.
- Meet with parents on a regular basis to discuss issues relating to plan implementation.
- Document and keep record of all students' food allergies and emergencies.

Substitute teachers are an important link in the school staff. They must be included in the information chain regarding safety measures designed to protect the students with food allergies they supervise.

Substitute teachers must receive written information that the students with food allergies are in the class, information about peanut-free tables or other special modifications, and the resources available if a student has an allergic reaction.