

Food Allergies**Lunch**

The food-allergic child will eat only food brought from home or approved by the parent if buying lunch. Parents of food-allergic children may prefer to have them bring lunch from home. In the cafeteria, attempts will be made so that the food-allergic child will eat or touch only the foods sent in by his/her parents. The parent must make the determination as to the safety of a cafeteria lunch for their child. If a child with food allergies is going to buy a school lunch, the parent must notify the teacher and send in a written permission note indicating the date and specific lunch to be purchased.

Cafeteria

When parents and their physician inform the District/School of a child with food-allergies/high risk of anaphylaxis and request lunchroom accommodations, the School will institute lunchroom procedures to help protect the child with food allergies. Most commonly, this will include children with “nut” allergies. “Nuts” means peanuts or tree-nuts (e.g. cashews, hazel nuts of filberts, walnuts, Brazil nuts, almonds, macadamias, pecans, pine nuts and pistachios.) The school will designate certain cafeteria areas as “allergen controlled”. “Allergen controlled” areas will be supervised by cafeteria monitors. Prior to each lunch period, the designated table and seats will be cleaned with a wet soapy cleaner and wiped with disposable towels.

At the designated areas students will be directed that there will be no sharing or trading of food, utensils, or containers and no touching of the allergic-child’s food. The children at these tables should not put food directly on the table but rather on disposable trays or napkins. Children with “safe lunches” may sit at the allergen controlled areas. The child with severe food allergies should not dispose of food in the garbage pail to avoid accidental contact with wrappers, etc. that might have allergens. These children should not be seated near a garbage can or food service line.

A letter will be sent home to all families in the school seeking voluntary support for limiting food allergens brought in from home. A letter will also be sent home to classmates of children with food allergies explaining cafeteria and classroom rules. The classroom teacher will also inform the class about the rules and explain the seriousness in an age appropriate way.

Food Service

When a food-allergic child has been identified by his parents and physician, a form with his name, picture, and food allergies will be shared with the food service staff. The cafeteria program will use disposable trays and utensils.

The School Lunch Director will continue to check ingredient labels for food products used in the School Lunch Program, including vending machine products. The Director will make a list of known technical, scientific and alternate names for common food allergens to be shared with each school.

Elementary Classrooms, Snack, and Parties

At the elementary level, when the parent and family physician have informed the school of a child with a serious food allergy, a letter will be sent home to the class asking them not to bring in snacks or party foods that contain the food allergens. The child may be identified by name only with the written permission of the parents. A follow-up reminder will be provided at Meet the Teacher Night.

Food-allergic children will eat only foods brought in from their home. They will not be permitted to eat or touch food brought in by others for snacks or special events unless approved by the child's parents. A parent of a food-allergic child may choose to send in their own foods for occasions such as these.

The teacher will educate children, in an age appropriate manner, about the seriousness of food allergies and the importance of enforcing the rule never to share or trade snack or party food with a food-allergic classmate. Teasing of any kind is unacceptable and will not be tolerated.

Field Trips

When a child identified with a "serious medical condition", such as food allergies/anaphylaxis, has a field trip his/her parent will be requested and encouraged to accompany the child on the trips. Teachers will give these parents lead time on upcoming special events so that they have time to plan ahead to attend. If it is part of their doctor's treatment protocol, parents must provide an EpiPen® for field trips. If a parent will not attend, a designated person trained in their use will take the EpiPen® and keep the child in their group. Staff and chaperones will be briefed on the identity of the child, the specific allergies, and the symptoms to be aware of. On every field trip there will be access to a telephone, cell phone, or radio communication in case of emergency.

If the children bring their own lunches on a field trip, all parents will be asked to carefully avoid certain allergens. If the class will be eating at a restaurant, the child with food allergies must bring his/her own food or signed permission from the parent to eat out and what the child may eat. Children will be reminded not to share or trade any food.

School Buses

Unless required by a medical condition, there will be no eating of food on school buses going to and from school. All food is to remain in backpacks. Eating on the bus presents both a choking hazard and an allergy danger. The bus driver will be informed about any child with severe food allergies. A list of students with allergies will be on each school bus. Bus drivers will be provided with a description of the signs and symptoms of an allergic response and anaphylaxis. There will be designated seats up front, particularly for young children. Parents may arrange for a friend to sit with their child. These designated seats will be cleaned with wet soapy cleaner and wiped with disposable towels. All buses will be equipped with a reliable communication device, a radio and/or cell phone.

If possible, when there is a substitute bus driver, prior to the first run he will speak to the dispatcher and be briefed on the list of the child with allergies.

Substitute Teachers

The regular teacher will keep information about children with food allergies with the teacher's substitute plans.

Parent Responsibilities

When a child's food allergies have been identified by his parents and physician, the school district will require that the parents:

1. inform the school of the child's allergies and condition and provide written medical documentation that is updated regularly
2. provide the school with written medical instructions from their physician
3. provide the school with EpiPens® (or EpiPen® Jrs. if less than 60 pounds) and other medication, if appropriate, as prescribed by the family physician
4. be encouraged to provide the child with a medical information bracelet or necklace to be worn at school that lists allergies
5. assist in the schools' communications plan
6. participate in the development of an Emergency Care Plan
7. provide safe foods for lunches, snacks, and special occasions
8. will be invited to attend field trips if possible
9. confer with teachers regarding lessons or projects that use food
10. teach their allergic child to recognize first symptoms, to communicate these to staff, to not share snacks, lunches, drinks and utensils, and to report any teasing
11. consent to share photographs and medical information with necessary employees
12. maintain up-to-date emergency contacts and phone numbers

In-Service

Staff who interact with a child with food allergies—teachers, psychologists, cafeteria workers, monitors, and other appropriate staff—will be advised how to protect the child from exposure, about cross-contamination and labeling issues, how to recognize an allergic symptom, and how to respond to emergencies. Any Emergency Care Plan will be shared with these individuals. The training may include foods which contain specific allergens, symptoms of anaphylaxis, and administration of EpiPen® in the case of an emergency.

Letters

When an elementary child with a severe food allergy anaphylaxis has been identified to the school by his parent and family physician, a general letter will be sent to the entire elementary school explaining the presence and the seriousness of the condition and requesting cooperation in reducing risk to the child. When a student is identified with a severe food allergy and is at high risk for anaphylaxis, a letter will also be sent to the parents of the child's class asking for assistance in making the classroom safer. Letters will be sent home prior to the start of the school year or when the school is notified. The allergic child will be identified in the letter only with written permission of the parents.

Privacy Issues and Sharing Information

It is the responsibility of parents to report a child's food-allergic/anaphylactic condition to the child's school. Parents must consent in writing to the release of personal medical information to

the school staff. The following guidelines should be implemented in order to protect the privacy of the child while educating students, staff and parents.

1. Identify the child and medical condition to the staff either individually or at a staff meeting before the start of the school year (teaching and non-teaching staff)
2. Allergy Policy and Regulations will be put in faculty handbook and on web site
3. At the beginning of the school year each of the child's teachers will be given an allergy alert form with a photo, description, treatment, etc.
4. With permission of the parents, other students/families may be told and cooperation enlisted, in age appropriate ways
5. At the secondary level, identification to peers should be done only after consultation with the student, in addition to permission of the parents
6. Books and videos will be available to inform adults and staff and students about allergies and anaphylaxis
7. Food allergies/anaphylaxis may be explained in health classes
8. PTA's are encouraged to have an annual presentation for parents and members about food allergies/anaphylaxis. Parents of children with food allergies should be offered the opportunity to share information.
9. Informational articles about food allergies/anaphylaxis may be written in school publications

Emergency Care Plan

When parents and their physician identify a food-allergic/anaphylactic child to the school, the parents will consult with the school nurse. The parent will participate in the completion of an Emergency Care Plan form each year that provides up-to-date medical information and the treatment protocol from the family's physician. Parents will immediately inform the District of any change in the status of this information. Parents will supply medicines and EpiPens® to schools as prescribed by their physician

The Emergency Care Plan form should include information from the physician as to symptoms of the child's allergy, recognizing warning signs of reactions, administering medical and emergency treatment for the child, and any other pertinent information. The Emergency Care Plan will be shared with teachers, nurses, administrators, food service workers, cafeteria monitors, bus drivers, coaches and others responsible for the student. It will be provided to emergency responders if necessary. The Plan will go with the child on all field trips.

The Emergency Care Plan will also include phone numbers: child's home, parents' work and cell phone numbers, emergency contact numbers (relatives, friends, neighbors) and the child's doctor. Every Emergency Care Plan will also include the name of the local Emergency Services and the direct phone number to dial for an anaphylactic emergency.

If exposure to an allergen occurs despite avoidance efforts, the school will follow the prescribing doctor's protocol to which the parents have given consent. Parents will be notified if any medicine has been administered. The school will tend to the child and administer the EpiPen® if that is the treatment protocol. The Fire Department/Rescue Squad will be called specifying the need for a response to an allergic reaction/anaphylaxis.

Any child given an EpiPen® injection will be transported immediately to a hospital even if symptoms resolve. An adult will be sent to accompany the child in the ambulance to the hospital, and to stay with the child until a parent arrives. After the call to the local Emergency Services, the parents and/or emergency contacts, and then the doctor will be called.

EpiPens®

The use of EpiPens® is governed by Board of Education policy JHCDA.

Athletic and Extracurricular Activities

The Emergency Care Plan for all children with severe food allergies/high anaphylactic risk who are involved in athletic and extracurricular activities will be provided to the coach or supervisor. The coach or supervisor will be trained to administer an EpiPen®. Parents may be asked to provide an additional EpiPen® for these activities.

Before and After School Child Care

These programs (including SAFE) are not under the auspices of the West Babylon School District. Parents are encouraged to speak with program officials directly.

Outside Organizations that utilize District facilities

The District is not responsible for the practices regarding allergies of outside organizations that utilize District facilities.

Sample letters for classes that have students with severe nut allergies and high risk of anaphylaxis

September

Dear Parents or Guardian:

There is a student in your child's classroom that has a severe, life-threatening allergy to nuts, in particular peanuts. In addition, this child cannot tolerate tree nuts (such as walnuts, pecan, hazelnuts, etc.). To ensure a safe classroom environment, we will implement a few very important considerations for this child.

If this child were to accidentally eat, touch or inhale the "peanut/nut dust" from peanuts/nuts, he/she could have a life-threatening reaction: anaphylaxis. Because of this risk, we strongly suggest peanut-free and nut-free snacks for the entire class, including those provided for parties and celebrations. Please choose other healthy snacks that are peanut/nut-free and do not contain peanut/nut byproducts. Please check the food ingredients of the snacks you may pack for school.

Home baked goods and other foods prepared at home should not be sent into the classroom of a food-allergic child. Food brought in for special events in the classroom should be purchased in

stores, commercially prepared, and contain complete ingredient lists with no nuts or nut products.

It is difficult at the best of times to get children to eat healthy snacks; however, I hope you will appreciate the seriousness of this condition and that you will assist us in our efforts to create as safe an environment as possible. With your cooperation, we can minimize the risk of a serious allergic reaction.

Anyone wishing further information about peanut/nut allergies may contact the school nurse.

Sincerely,

Principal

Letters for schools that have students with severe nut allergies

September

Dear Parents or Guardians:

There are currently students in our school with severe, medically documented allergy to peanuts and/or tree nuts. In a severely allergic child, exposure to these products can cause anaphylaxis, a life threatening reaction. The safety of our students is of the utmost importance. Therefore, we are asking for your cooperation regarding this matter.

To assist us in providing the safest, healthiest school environment for all students, we are encouraging all parents to send peanut-free and nut-free lunches, snacks and party food to school.

Thank you for your cooperation in our combined efforts at keeping our students healthy and safe at school.

Anyone wishing further information about peanut/tree nut allergies may contact the school nurse.

Sincerely,

Principal

Promulgated: January 27, 2009