
Serious food allergies appear to be increasing in frequency and the number of affected students is rising. In some cases, minute amounts of the food allergen, when eaten, touched or inhaled can make an allergic child very ill and put an allergic child at risk for life-threatening anaphylaxis. Anaphylaxis is a severe life-threatening allergic reaction which requires immediate medical attention. The District will endeavor to reduce an allergic child's exposure to allergens within the school setting, while acknowledging that it is impossible to achieve an allergen-free environment. The District will undertake training to help the school community to limit exposure to food allergens, and identify and recognize symptoms of anaphylaxis, and ensure prompt emergency treatment. Students, parents, school personnel and health care providers must all work together to provide the necessary information and training to allow children with allergies to participate as fully and safely as possible in the school setting.

Currently, there is no cure for food allergies and avoidance is the only prevention. It is impossible to completely avoid all allergic foods since they can be hidden or accidentally introduced via other sources. Therefore, educating the entire school community about life-threatening allergies is vital to keeping students with allergies safe. The District will provide staff with information on students with identified allergies and potential reactions. The District will implement procedures to reduce the risk of exposure for identified students with severe allergies including attention to food service, food sharing, use of food in class, transportation, parties and celebrations, and school sponsored events including field trips. Toward this end, the District has implemented a non-food based birthday celebration policy. The District may place further limitations on foods which may be brought into school from home or places where foods may be eaten. The District will seek cooperation from the school community. Parents/guardians, students, District administration, school nurse, teachers, food service, custodial staff, coaches, athletic directors, after school volunteers, transportation personnel, other school administrators and members of the school district community are important partners to ensure ongoing and effective communication, complete health information is received and on file, appropriate accommodations are prepared and any necessary medication and emergency protocols are in place for the student with allergies.

Students with documented life-threatening food allergies should have a comprehensive plan of care in place. This includes an Emergency Care Plan (ECP) and Individual Health Plan (IHP) in order to enable each student to fully and safely participate in school programs. The District will work cooperatively with parents and healthcare providers to support students with severe food allergies. Parents and treating physicians must prepare the school district for serious reactions that may occur despite precautions. To that end, parents/guardians are responsible for notifying the school of students with documented food allergies and/or episodes of anaphylaxis and for providing the school with medical information and the family physician's treatment protocol. Upon notification by the parent/guardian, a conference will be held to develop an Individual Health Plan (IHP), and an Emergency Health Care Plan, or a Section 504 accommodation plan if the student is eligible for an accommodation based upon the section 504 of the Rehabilitation Act of 1973 to address precautions, medical protocols and emergency responses.

EAST ISLIP UNION FREE SCHOOL DISTRICT

FOOD ALLERGIES

Policy 5422

School personnel will be made aware of an allergic student's condition as per their IEP or Section 504 on a need-to know basis. Adults in a supervisory role will be in-serviced and trained.

Regulations will be promulgated by the District, consistent with applicable law to provide for the allergic/anaphylactic child as to classrooms, cafeteria and lunches, snacks, birthday parties, holiday and special celebrations, "specials", field trips, school sponsored and extracurricular activities, school buses, substitute teachers, Health Plans, emergency medical protocols for nursing staff, anaphylaxis response plans for nurses and other school personnel, maintenance of epi-pen or other medication to be used and training in their administration, staff in-service, communication plans including forms and letters, consents, waivers and privacy issues and sharing information. Implementation shall be consistent across the District.

When children have been identified by their parents and physicians as food-allergic/anaphylactic and have reported their medical information to the school nurse, the parents will be advised of District Policy.

Public Health Law § 2500-h

Cross-Reference: 5405, Student Wellness
5428, Anaphylaxis

Adopted: July 9, 2013

Revised: August 14, 2014, August 11, 2016, July 6, 2017

FOOD ALLERGIES REGULATION

5422-R

Food allergies can be life-threatening. A variety of measures and accommodations may be undertaken to minimize the health risks to students who suffer from food allergies. The District has identified the following as important members of the School Health Team to ensure that health information is complete, appropriate accommodations are prepared, and any necessary medication and environmental protocols are in place for students with food allergies and anaphylaxis, and are important partners in the implementation of this Regulation: parents/guardians, students, District administration, school nurse, teachers, food service, custodial staff, coaches, athletic directors, after school volunteers, transportation personnel, main entrance staff, and members of the District community.

Parent Responsibilities

When a food-allergic/anaphylactic child has been identified by his/her parents/guardians and physician, the District will require that the parents:

1. inform the school nurse of the child's allergies and condition and provide written medical documentation and update regularly.
2. provide the school nurse with medical instructions from the child's physician.
3. provide the school nurse with epi-pens (or epi-pen 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. must participate in the development of a Health Plan.
6. provide safe foods for lunches, and snacks, either kept in the classroom or brought in from home, for their child, as specified in their Health Plan. Parents must also make the determination as to the safety of a cafeteria school lunch for their food-allergic child.
7. are encouraged to assist at classroom parties.
8. are encouraged to assist at field trips and attend if possible.
9. teach their allergic child to recognize first symptoms, to communicate these to staff.
10. teach their allergic child not to share snacks, lunches, drinks and utensils.
11. consent to share photographs and medical information with necessary employees.
12. maintain up-to-date emergency contacts and phone numbers.
13. update medical information annually.
14. Inform their child that he/she will be required to sit at the designated nut-

free table in the school cafeteria.

15. provide medical documentation stating their child no longer has a medical need to sit at an allergy-free table.
16. stay in contact with classroom teacher and school nurse to help provide a safer classroom.

Privacy Issues and Sharing Information:

It is the responsibility of parents/guardians to report a child's food-allergic/anaphylactic condition to the child's school nurse and/or District administration. The following guidelines should be implemented in order to protect the privacy of the child while educating students, staff and parents/guardians.

1. With written parental permission, identify the child and medical condition to the staff either individually or at a staff meeting before school begins (teaching and non-teaching staff) on a need-to-know basis. Parents/guardians may participate in the discussions about his/her child.
2. Food Allergy Policy and Regulations will be put in faculty handbook and posted on the District's website.
3. Food allergies/anaphylaxis may be explained in health classes.
4. Parents/guardians of children with food allergies should be offered the opportunity to share information. PTA's are encouraged to have an annual presentation for parents and members about food allergies/anaphylaxis.

Individual Health Care Plans and Emergency Health Care Plans

An Individual Health Care Plan and an Emergency Health Care Plan shall be developed for each student identified with any food allergy with potentially serious health consequences. The School Nurse will develop the IHCP and EHCP based on Board of Education Policy and in collaboration with the parents/guardian of the student, and the student's health care provider (If appropriate, student may also be involved in the plan). This shall be done prior to school entry or immediately thereafter for students previously diagnosed with an allergy. It should be done immediately after the diagnosis is made for students already enrolled but newly diagnosed with an allergy. These plans should include both preventive measures to help avoid accidental exposure to allergens and emergency measures in the event of exposure.

An Individual Health Care Plan and Emergency Health Care Plan should be written in lay language and stress what action the school employee should take in the event that a student suffers an allergic reaction. The IHCP and EHCP should be basic but clear and contain the steps to follow in response to the allergic reaction. It is recommended that student's picture be attached to the plan in the event it needs to be used by a substitute who may not know the student well.

The IHCP and EHCP should contain emergency contact information and must be signed by both the parent/guardian and physician. The EHCP should

clearly state that parent/guardian signature on the form indicates their consent for information provided on the plan to be shared with staff in regular contact with their child; in addition will allow communication between school medical personal and the child's physician. It should also be noted that any child given an epi-pen injection be transported by ambulance immediately to nearest hospital emergency department, even if symptoms resolve. After the call for EMS, the parents/guardian and/or emergency contact will be called. A district employee will accompany the child during transport, and stay with the child until a parent/guardian arrives.

The IHCP will be developed in accordance with the standard Nurse Care Plan format including Nursing Diagnosis; intervention and evaluation.

Epi-Pens

Emergency medical kits, with appropriate medications including epi-pens, will be supplied to the school nurse by the parents/guardians from their doctor's prescription for a food-allergic/anaphylactic child. Kits will be put in places agreed upon by the school nurse/administrators and the parents/guardians. The child's Health Plan form and/or ECP will list where the epi-pens are kept in the school building. The school nurse and parent/guardian should periodically check epi-pen supplies and expiration dates. Self-Administering students will be allowed to carry their own epi-pens, provided written approval is supplied by the parent/guardian and physician, and the school nurse is made aware. All food allergic/anaphylactic students are encouraged to have a medical information bracelet or necklace.

The Health Plan relies on having a school nurse/administrators on hand. The nurse will train staff in accordance with Commissioner's Regulations on the administration of prescribed epinephrine auto injectors, including, but not limited to signs and symptoms of a severe allergic reaction warranting administration of epinephrine, and the steps for such administration. The nurse will keep a log of the training. A sheet showing how to administer an epi-pen will be distributed along with the Health Plan form.

Athletic and Extracurricular Activities / Before or After School Child Care

The coach or supervisor of food allergic/anaphylactic children with a Health Plan will be trained to administer an epi-pen by the school nurse as set forth above.

The District will require parents of food-allergic/anaphylactic children who are enrolled in the Before or After School Child Care Program to expressly notify the Program supervisor of their children's food allergies.

Lunch

It is the parent who must make the determination as to the safety of a cafeteria school lunch for their food-allergic child. They should discuss this with the Director of Food Services at (631) 224-2129. Inter-active menus are available on the District's website, www.eischools.org.

Cafeteria

The school will designate and clearly mark certain cafeteria tables as "nut-free". Prior to and after each lunch period, the designated tables and benches or

seats will be cleaned with approved disposable towels. At the end of each school day, the designated and marked tables and benches or seats will be cleaned and closed by the custodian and isolated from use during any after school programs or other events.

Children will be made aware of the importance of not sharing or trading food, utensils, or containers. At the designated tables, children without allergies with lunches purchased in the cafeteria may sit at the nut-free tables with permission from an aide, but must not share food. A nut-free garbage pail will be designated in each cafeteria.

After consultation with parents/guardians, their physician, the school nurse, and school administration arrangements may also be made for children with serious food allergies other than nuts.

Food Service

When a food-allergic child has been identified by his parents/guardians and physician, a student's food allergies information, will be shared with the food service staff. The School Lunch Director will continue to check ingredient labels for food products used in the School Lunch Program. Vending machine providers and School Store Advisors will check ingredient labels for food and drink products used. In addition, the School Lunch Director will make a list of known technical, scientific and alternate names for common food allergens to be shared with each school, vending company and school store. School food service will make efforts to eliminate utilization of nut containing products.

Elementary Classrooms, Snacks, and Parties

Parents/guardians will be generally informed prior to the start of the school year as to those allergies identified within each classroom. Personally identifiable information will not be disclosed unless a parent/guardian gives prior written consent. Allergy information will be updated periodically throughout the school year. When the parent/guardian and family physician have informed the school nurse of a child with a serious food allergy, a letter will be sent home to the class notifying them not to bring in foods that contain nuts (or, where appropriate, other food allergens.) A follow-up reminder will be provided at Meet the Teacher Night.

It is the policy of the District to allow only non-food based birthday celebrations and it is encouraged that all other activities and celebrations be non-food based. Curriculum based activities involving food are permitted with written parental consent. If balloons are used for celebrations or activities, they must be Mylar, not latex.

Home baked goods and other foods prepared at home are only to be used for individual consumption. No goody bags or items are to be brought in for the class.

Food-allergic children may eat only food brought in from their home, as per their Health Plan.

The teacher will discuss with children, in an age appropriate manner, about the seriousness of food allergies and the importance of not sharing or trading snack with a food-allergic classmate. After any activity involving food, tables and seats

will be properly cleaned. If necessary, food-allergic students should keep the same desk and locker all school year, if the Health Plan warrants the same.

When parents/guardians and their family physician notify the school about a food-allergic/anaphylactic child, the student's teachers, including "special area" teachers, and other staff such as paraprofessionals, teaching assistants, monitors, clericals, will be informed on a need-to-know basis once written parental permission has been obtained. Teachers should be mindful when using food that is part of the curriculum in lesson plans. These foods should not conflict with their students' allergies or anaphylactic condition.

The District is also concerned about avoiding non-food sources of food allergies. Parents/guardians must notify the school nurse of any non-food source items that pose a threat to their child. These items include, but are not limited to; latex balloons, tennis balls, gym equipment, in particular stuffed toys and bean bags; arts and crafts supplies such as play dough, paint, and crayons; cleaning supplies such as soaps; and classroom pet supplies such as pet foods and pet litter should be checked for the presence of nut products. Staff members will avoid using peanut butter, nuts or any extracts or derivatives in any school activity. If balloons are used, they must be Mylar, not latex.

Secondary Classrooms

At times, there is a need for curriculum-based, food centered activities in classrooms. Prior to these events, letters are sent home to parents informing them of the upcoming event requesting written consent. The District food service provider is encouraged to be used, and rooms other than classrooms should be used whenever possible. Signs will also be posted in the middle school and high school in areas where food is available, and at all fundraising activities involving food, to remind students that they must be aware of the possible presence of nuts or nut products. If balloons are used, they must be Mylar, not latex.

Field Trips

Field trip permission forms should include a separate medical section. When a child identified with a serious medical condition, such as food allergies/anaphylaxis, has a field trip his parent/guardian will be requested and encouraged to accompany the child on all such trips. If a parent/guardian will not attend, a designated person trained in their use will be responsible for the child's epi-pens and keep the child in their group. With parent permission, staff and chaperones will be briefed on the identity of the child, the specific allergies, and the symptoms to be aware of on a need-to-know basis. On every field trip there will be access to a telephone, cell phone, or radio communication in case of emergency.

There will be no unnecessary eating on the school bus during a field trip. If the class will be eating at a restaurant, the food-allergic/anaphylactic child must bring his or her own food or provide written permission from the parent/guardian to eat out.

District Wide Events

Non-classroom activities where food is present, there will be written notification prior to the event. Items from the safe snack list is encouraged. If balloons are used, they must be Mylar, not latex.

Substitute Teachers

The regular teacher will keep information about food-allergic/anaphylactic children with his/her substitute plans. The substitute teacher will be informed of the child's allergies and directed to speak to the nurse before the start of the day.

Use of Facilities by Outside Groups

All outside groups that use the District's facilities are discouraged from using peanut products at events or meetings for children. In addition, any outside group's use of District facilities should not include use of designated nut-free cafeteria tables. The Food Allergy and Student Wellness policies are attached to the Use of Facilities Form and users must sign that they have read and will abide by these when using District facilities. If food will be available to children, signs must be posted warning of the possible presence of nuts or nut products. If balloons are used, they must be Mylar, not latex.

Cross-Reference: 5405, Student Wellness
5428, Anaphylaxis

Adopted: July 9, 2013

Revised: August 14, 2014, August 11, 2016, July 6, 2017, August 22, 2018