



## FOOD ALLERGY POLICY

It is the desire of the teachers and the school board to provide a safe learning environment for all students, including those with life threatening food allergies. Our staff will work with parents to determine each child's individual needs and make efforts to meet these needs.

### Approach to Food Allergies

- The Food Allergy & Emergency Care Plan (copy attached), will be provided by the school, reviewed and signed by the parent/guardian and physician. (A physician's Anaphylaxis Plan will also be accepted in place of physician's signature.)
- A master list identifying students, their grade and their allergens will be maintained, updated annually and shared with all staff members, including substitute teachers and supervisory volunteers.
- A supply of emergency medication, as ordered by the student's physician, will be obtained from parents and kept in the Allergy Kit.
- The FAAEC Plan & Kit will be available and safely accessible in the student's classroom.
- The principal will schedule an annual training from an appropriate medical provider for the school staff, including substitute teachers and supervisory volunteers. Training shall include: information on food allergies, how to recognize allergic reaction, and how to respond in the event of an anaphylaxis allergic reaction.
- Teachers will have student's FAAEC Plan & Kit in place before students attend their first day of school.
- Allergy Emergency Drills will be held several times a year to ensure the efficiency of the FAAEC Plan. Staff should be prepared to handle an allergic reaction during the school day regardless of time or location.
- In the event of an allergic reaction:
  - The FAAEC Plan will be followed.
  - Emergency medical services will be contacted promptly.
  - Emergency contacts will be notified.

### Allergen Awareness

- A child could be allergic to any food, but the eight most common allergens are peanuts, tree-nuts, milk, eggs, soy, wheat, fish and shellfish. These account for 90% of all reactions



in children with the most severe reactions typically being to peanuts, tree-nuts, fish and shellfish.

- Students and staff will be appropriately educated through presentation, media and/or literature on allergens and the importance of following the set policies and procedures as directed.
- The severity of each student's allergy will be different, as such, staff will be aware of how to properly read food labels, specifically looking for the student's food allergen and how it is processed.
- Allergens are identified on labels as listed below, using peanuts and tree-nuts as the example:
  - CONTAINS "peanuts & tree-nuts"
  - MAY CONTAIN "peanuts & or tree-nuts"
  - MANUFACTURED ON THE SAME EQUIPMENT as "peanuts & or tree-nuts"
  - MAY HAVE COME IN CONTACT with "peanuts & or tree-nuts"
  - MANUFACTURED IN THE SAME FACILITY as "peanuts & tree-nuts"

### **Food Allergy & Anaphylaxis Emergency Care Plan and Allergy Kit**

- For every student with an identified allergy, an Allergy Kit will be maintained by the school. This kit will be kept in a standardized, visible location that is easily accessible by adult staff. All staff, including substitute teachers and supervisory volunteers, will be made aware of the FAAEC Plan & Kit location.
- The Allergy Kits will include the following:
  - A signed FAAEC Plan w/ student's photo.
  - Emergency Medication as prescribed by the student's physician, provided by the parent/guardian.

### **Classrooms**

- No food containing any allergen that triggers a severe allergic reaction to an enrolled student will be permitted in that student's classroom.
- Students will not be excluded from classroom or school activities solely based upon their food allergy. Staff will work to eliminate the use of food allergens in educational lessons, arts and crafts projects or incentives.
- Academic accommodations may be necessary and will be made on case-by-case basis.
- An allergen alert notice will be displayed on the door of any classroom where there is a student with severe allergies.

# Holland

ADVENTIST ACADEMY

- Parents will receive an information letter from administration and/or teachers at the beginning of the school year notifying them that their child has a classmate with a severe food allergy and suggested steps they can take to help prevent allergen exposure.
- If an animal is present in the classroom, special attention will be paid to the ingredients in its food to ensure that there are no conflicts with allergy concerns.

## Cafeteria

- Consumption of foods should be limited to the cafeteria. Any exceptions must be approved by school administration and consistent with the Food Allergy Policy.
- Lunch and special event food items are to be eaten in the cafeteria. Allergen-free table guidelines will apply, but foods need not be allergen free.
- Snacks are to be eaten in the cafeteria. Allergen-free table guidelines will apply, but snacks need not be allergen-free.
- Students with allergies will only eat snacks that have been provided by or been given prior approval by their parent/guardian.
- Volunteers are required to have had approved allergy training before supervising lunch where there is a student with an identified allergy.
- HAA will provide an allergen-free table according to the needs of current students with identified allergies.
- Sharing or trading food will generally be discouraged and will not be permitted with students who have food allergies.
- Lunchroom supervisors will check food items in lunches of non-allergic students desiring to sit at the allergen-free table to ensure allergen safety.
- A supply of Epinephrine will be kept in the cafeteria in a visible location that is easily accessible by adult staff.
- All students and staff will be expected to wash hands with soap and water before and after lunch to prevent the spread of allergens. Faculty supervision will be provided.

## Allergen-free Table

- Designate an allergen-free table to be used daily for students with identified severe food allergies if a physician or parent has determined this accommodation is needed.
- Lunch supervisors will be trained to implement and maintain allergen-free tables.
- A lunch supervisor should sit in close proximity to the allergen-free table to provide increased supervision and implementation. However, students needing allergen-free tables should not be obviously isolated; they should sit with or near grade level peers.



- Enforce a “No Food Sharing” rule at the allergen-free table.
- Clearly mark the table to decrease cross-contamination risk. (Due to health sanitation rules, signs should not be taped to the top of the table.)
- Clean and sanitize with soap and water or all-purpose cleaning agents in accordance with state and local food safety regulations. A separate cloth will be used to prevent the spread of allergens.

### Field Trips

- The parent/guardian of an allergic student will be notified in advance of an upcoming field trip (minimum of one week).
- Students with identified allergies will travel with an appropriately trained individual.
- Field trip vehicles transporting students with allergies will be allergen-free.
- Staff will be responsible for carrying the FAAEC Plan & Kit.
- Epinephrine cannot be left in parked cars. It must be stored at temperatures from 68°F - 77°F. If left in hotter or colder temperatures, it will be unusable.
- A cell phone or other communicating device must be available on the trip for emergency calls.

### Substitute Teachers

- Substitute teachers are required to have had approved allergy training before substituting in a classroom where there is a student with a severe allergy.
- A master allergy list will be provided to each substitute upon checking in for assignment.

### Extracurricular Activities

- All extracurricular activities must be consistent with school policies and procedures regarding food allergies.

### Special Events & Hot Lunches

- The parent/guardian of a student with food allergies will be notified in advance of food items being served (minimum of one week).
- Discuss and seek input from parents regarding menus, food products and ingredients.
- Food labels and food ingredient lists should be made available to parents upon their request.



**PLACE  
PICTURE  
HERE**

Name: \_\_\_\_\_ D.O.B.: \_\_\_\_\_

Allergy to: \_\_\_\_\_

Weight: \_\_\_\_\_ lbs. Asthma:  Yes (higher risk for a severe reaction)  No

**NOTE: Do not depend on antihistamines or inhalers (bronchodilators) to treat a severe reaction. USE EPINEPHRINE.**

**Extremely reactive to the following allergens:** \_\_\_\_\_

THEREFORE:

If checked, give epinephrine immediately if the allergen was **LIKELY** eaten, for **ANY** symptoms.

If checked, give epinephrine immediately if the allergen was **DEFINITELY** eaten, even if no symptoms are apparent.

FOR ANY OF THE FOLLOWING:  
**SEVERE SYMPTOMS**



**LUNG**

Shortness of breath, wheezing, repetitive cough



**HEART**

Pale or bluish skin, faintness, weak pulse, dizziness



**THROAT**

Tight or hoarse throat, trouble breathing or swallowing



**MOUTH**

Significant swelling of the tongue or lips



**SKIN**

Many hives over body, widespread redness



**GUT**

Repetitive vomiting, severe diarrhea



**OTHER**

Feeling something bad is about to happen, anxiety, confusion

**OR A COMBINATION** of symptoms from different body areas.



- 1. INJECT EPINEPHRINE IMMEDIATELY.**
- 2. Call 911.** Tell emergency dispatcher the person is having anaphylaxis and may need epinephrine when emergency responders arrive.
  - Consider giving additional medications following epinephrine:
    - » Antihistamine
    - » Inhaler (bronchodilator) if wheezing
  - Lay the person flat, raise legs and keep warm. If breathing is difficult or they are vomiting, let them sit up or lie on their side.
  - If symptoms do not improve, or symptoms return, more doses of epinephrine can be given about 5 minutes or more after the last dose.
  - Alert emergency contacts.
  - Transport patient to ER, even if symptoms resolve. Patient should remain in ER for at least 4 hours because symptoms may return.

## MILD SYMPTOMS



**NOSE**

Itchy or runny nose, sneezing



**MOUTH**

Itchy mouth



**SKIN**

A few hives, mild itch



**GUT**

Mild nausea or discomfort

**FOR MILD SYMPTOMS FROM MORE THAN ONE SYSTEM AREA, GIVE EPINEPHRINE.**

**FOR MILD SYMPTOMS FROM A SINGLE SYSTEM AREA, FOLLOW THE DIRECTIONS BELOW:**

1. Antihistamines may be given, if ordered by a healthcare provider.
2. Stay with the person; alert emergency contacts.
3. Watch closely for changes. If symptoms worsen, give epinephrine.

## MEDICATIONS/DOSES

Epinephrine Brand or Generic: \_\_\_\_\_

Epinephrine Dose:  0.15 mg IM  0.3 mg IM

Antihistamine Brand or Generic: \_\_\_\_\_

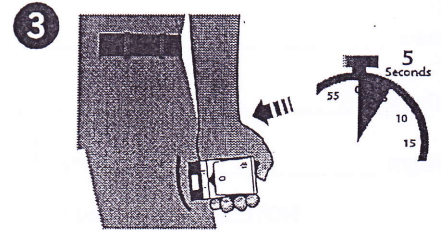
Antihistamine Dose: \_\_\_\_\_

Other (e.g., inhaler-bronchodilator if wheezing): \_\_\_\_\_



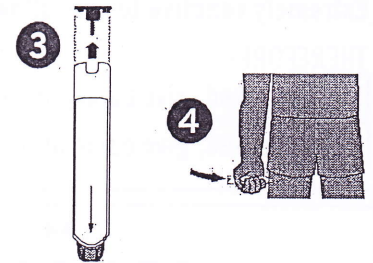
**HOW TO USE AUVI-Q® (EPINEPRHINE INJECTION, USP), KALEO**

1. Remove Auvi-Q from the outer case.
2. Pull off red safety guard.
3. Place black end of Auvi-Q against the middle of the outer thigh.
4. Press firmly, and hold in place for 5 seconds.
5. Call 911 and get emergency medical help right away.



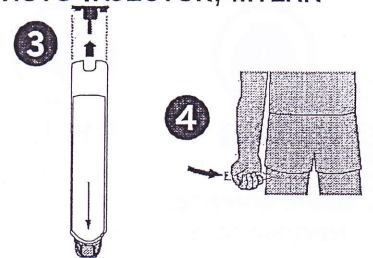
**HOW TO USE EPIPEN® AND EPIPEN JR® (EPINEPHRINE) AUTO-INJECTOR, MYLAN**

1. Remove the EpiPen® or EpiPen Jr® Auto-Injector from the clear carrier tube.
2. Grasp the auto-injector in your fist with the orange tip (needle end) pointing downward.
3. With your other hand, remove the blue safety release by pulling straight up.
4. Swing and push the auto-injector firmly into the middle of the outer thigh until it 'clicks'.
5. Hold firmly in place for 3 seconds (count slowly 1, 2, 3).
6. Remove and massage the injection area for 10 seconds.
7. Call 911 and get emergency medical help right away.



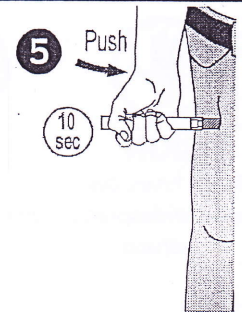
**HOW TO USE EPINEPHRINE INJECTION (AUTHORIZED GENERIC OF EPIPEN®), USP AUTO-INJECTOR, MYLAN**

1. Remove the epinephrine auto-injector from the clear carrier tube.
2. Grasp the auto-injector in your fist with the orange tip (needle end) pointing downward.
3. With your other hand, remove the blue safety release by pulling straight up.
4. Swing and push the auto-injector firmly into the middle of the outer thigh until it 'clicks'.
5. Hold firmly in place for 3 seconds (count slowly 1, 2, 3).
6. Remove and massage the injection area for 10 seconds.
7. Call 911 and get emergency medical help right away.



**HOW TO USE IMPAX EPINEPHRINE INJECTION (AUTHORIZED GENERIC OF ADRENALICK®), USP AUTO-INJECTOR, IMPAX LABORATORIES**

1. Remove epinephrine auto-injector from its protective carrying case.
2. Pull off both blue end caps: you will now see a red tip.
3. Grasp the auto-injector in your fist with the red tip pointing downward.
4. Put the red tip against the middle of the outer thigh at a 90-degree angle, perpendicular to the thigh.
5. Press down hard and hold firmly against the thigh for approximately 10 seconds.
6. Remove and massage the area for 10 seconds.
7. Call 911 and get emergency medical help right away.



**ADMINISTRATION AND SAFETY INFORMATION FOR ALL AUTO-INJECTORS:**

1. Do not put your thumb, fingers or hand over the tip of the auto-injector or inject into any body part other than mid-outer thigh. In case of accidental injection, go immediately to the nearest emergency room.
2. If administering to a young child, hold their leg firmly in place before and during injection to prevent injuries.
3. Epinephrine can be injected through clothing if needed.
4. Call 911 immediately after injection.

**OTHER DIRECTIONS/INFORMATION** (may self-carry epinephrine, may self-administer epinephrine, etc.):

Treat the person before calling emergency contacts. The first signs of a reaction can be mild, but symptoms can worsen quickly.

**EMERGENCY CONTACTS — CALL 911**

RESCUE SQUAD: \_\_\_\_\_  
 DOCTOR: \_\_\_\_\_ PHONE: \_\_\_\_\_  
 PARENT/GUARDIAN: \_\_\_\_\_ PHONE: \_\_\_\_\_

**OTHER EMERGENCY CONTACTS**

NAME/RELATIONSHIP: \_\_\_\_\_  
 PHONE: \_\_\_\_\_  
 NAME/RELATIONSHIP: \_\_\_\_\_  
 PHONE: \_\_\_\_\_