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 accidentall

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 foodallergic/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

EAST ISLIP UNION FREE SCHOOL DISTRICT

FOOD ALLERGIES	Policy 5422	
FOOD ALLERGIES REGULATION	5422	

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.

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.

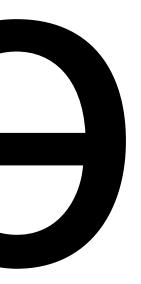
Elementary Classrooms, Snacks, and Parties

Parents guardians will be generally informed prior to the start of the school year as to those

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 p a305 -1.15 TdJ0 Tw6 (s)-1 (o c)-(t)-2 (aB(s)4 1.15 Tt4.1 (s0 Tw6.7 0 Td;-1 (nyd()Tj0.09 Td)-1.15 Td)-1.15 Td, and a school nurse of any non-food source items that p a305 -1.15 TdJ0 Tw6 (s)-1 (o c)-(t)-2 (aB(s)4 1.15 Tt4.1 (s0 Tw6.7 0 Td;-1 (nyd()Tj0.09 Td)-1.15 Td, and a school nurse of any non-food source items that p a305 -1.15 TdJ0 Tw6 (s)-1 (o c)-(t)-2 (aB(s)4 1.15 Tt4.1 (s0 Tw6.7 0 Td;-1 (nyd()Tj0.09 Td)-1.15 Td, and a school nurse of any non-food source items that p a305 -1.15 TdJ0 Tw6 (s)-1 (o c)-(t)-2 (aB(s)4 1.15 Tt4.1 (s0 Tw6.7 0 Td;-1 (nyd()Tj0.09 Td)-1.15 Td, and a school nurse of any non-food source items that p a305 -1.15 TdJ0 Tw6 (s)-1 (o c)-(t)-2 (aB(s)4 1.15 Tt4.1 (s0 Tw6.7 0 Td;-1 (nyd()Tj0.09 Td)-1.15 Td, and a school nurse of any non-food source items that p a305 -1.15 TdJ0 Tw6 (s)-1 (o c)-(t)-2 (aB(s)4 1.15 Tt4.1 (s0 Tw6.7 0 Td;-1 (nyd()Tj0.09 Td)-1.15 Td, and a school nurse of any non-food source items that p a305 -1.15 TdJ0 Tw6 (s)-1 (o c)-(t)-2 (aB(s)4 1.15 Tt4.1 (s0 Tw6.7 0 Td)-1.15 Td, and a school nurse of any non-food source items that p a305 -1.15 Td, and a school nurse of any non-food source items that p a305 -1.15 Td, and a school nurse of any non-food source items that p a305 -1.15 Td, and a school nurse of any non-food source items that p a305 -1.15 Td, and a school nurse of any non-food source items that p a305 -1.15 Td, and a school nurse of any non-food source items that p a305 -1.15 Td, and a school nurse of any non-food source items that p a305 -1.15 Td, and a school nurse of any non-food source items that p a305 -1.15 Td, and a school nurse of any non-food source items that p a305 -1.15 Td, and a school nurse of any non-food source items that p a305 -1.15 Td, and a school nurse of any non-food source items that p a305 -1.15 Td, and a school nurse of a school nurse of a school nurse of a school nurse of a school



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 by 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