Highlights from the
CDC National Guidelines for Managing Food Allergies in Schools and Early Care Education Programs

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Today’s Presenter

Karie Mulkowsky
CDC Project Coordinator
Food Allergy Research & Education
CDC Food Allergy Guidelines

• Published in October 2013

• Result of 2011 FDA Food Safety Modernization Act

• Multiple consultants and contributors
Need for National Guidelines

- Food allergies are a growing food safety and public health concern that affect an estimated 4-6 percent of children in the United States.

- Studies show that 16 – 18 percent of children with food allergies have had a reaction from accidentally eating food allergens while at school.

- Nearly 25 percent of severe reactions experienced at school are among children having no previous diagnosis of a food allergy.
How the Guidelines can Help

• Support implementation of Food Allergy Management and Prevention Plans (FAMPPs) in schools

• Provide practical information, planning steps, and strategies

• Guide improvements in existing plans and practices

• Help schools develop a plan where none currently exists

• Ensure that policies are inline with federal and state laws

“Schools will not need to change their organization or structure or incorporate burdensome practices to respond effectively… should not have to incur significant financial costs where basic health and emergency services are already provided.”
CDC Guidelines Highlights

• Essential First Steps for Schools
  1. Use a coordinated approach
  2. Provide clear leadership
  3. Develop a Food Allergy Management and Prevention Plan (FAMPP)

• Follow Federal Laws
  • Individual plans and FAMPPs must follow federal laws & regulations

• Recommendations for Safety and Inclusion
  • Practices and Accommodations for a safe and healthy school environment

• Putting Guidelines into Practice
  • Actions District and School Administrators and Staff
Food Allergy Management and Prevention Plan (FAMPP)

1. Ensure daily management of food allergies for individual children
2. Prepare for food allergy emergencies
3. Provide professional development on food allergies for staff members
4. Educate children and family members about food allergies
5. Create and maintain a healthy and safe educational environment
Priorities for Managing Food Allergies

Priority ONE:

Ensure the daily management of food allergies for individual children.

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**FOOD ALLERGY & ANAPHYLAXIS EMERGENCY CARE PLAN**

**EPINEPHRINE AUTO-INJECTOR DIRECTIONS**
1. Remove the Epinephrine Auto-Injector from the plastic, carrying case.
2. Pull off the blue safety release cap.
3. Using the hard push the orange tip against the side of your thigh.
4. Hold for approximately 10 seconds.
5. Remove and wash the area for 10 seconds.

**AUTO-Q® EPINEPHRINE INJECTOR, (USP) DIRECTIONS**
1. Remove the outer case of Auto-Q. This will automatically activate the auto-injector.
2. Pull off the safety guard.
3. Place the back end against your thigh.
4. Push down hard until you feel resistance.
5. Hold for 5 seconds. Remove from thigh.

**ADRENALIC® (ADRENALIC® GENERIC DIRECTIONS**
1. Remove the outer case.
2. Remove gray cap labeled "1" and "2".
3. Place and secured tip against and side of your thigh.
4. Push down hard until you feel resistance.
5. Hold for 10 seconds. Remove from thigh.

**EMERGENCY CONTACTS**
- Call 911
- **MEDICATIONS/DOSSES**
  - **INJECT EPINEPHRINE IMMEDIATELY.**
  - **MILD SYMPTOMS**
    - Nausea
    - Skin rash
    - Swelling
  - **SEVERE SYMPTOMS**
    - Shock
    - Severe itching
    - Difficulty breathing
    - **MEDICATIONS/DOSSES**
      - **EPINEPHRINE**
        - **DOSE:** 0.15 mg/kg of body weight (max. 0.3 mg, 0.5 mg, 1 mg).
        - **INTERVAL:** Every 30 minutes
  - **INJECTION SITE:** Lower thigh
  - **MEDICATION ADMINISTRATION:**
    - **INJECTION SITE:** Lower thigh
    - **PENETRATION DEPTH:** Approximately 1" deep

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1. Ensure daily management of food allergies for individual children

• Identify children with food allergies

• Develop an individualized written accommodation plan
  • A section 504 plan, or other individual written plan, outlines any accommodations needed so that the child can be safely included in school activities
  • The Emergency Care Plan (ECP) or Individual Healthcare Plan (IHCP) explains how to recognize and treat an allergic reaction.

• Have immediate access to medication
  • Make sure students have quick access to an epinephrine auto-injector, both at school and during school-related events
Priorities for Managing Food Allergies

Priority TWO:
Prepare for food allergy emergencies.
2. Prepare for food allergy emergencies

• Setup communication systems

• Make sure staff can get to epinephrine quickly and easily

• Make sure to use epinephrine when needed and to call 911

• 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 response to food allergy emergency
Priorities for Managing Food Allergies

Priority THREE:
Provide professional development on food allergies to faculty & staff.
3. Provide professional development to staff members on food allergies

- General training on food allergies:
  - School policies and practices
  - An overview of food allergies
  - Signs and symptoms of a food allergy reaction and anaphylaxis
  - Strategies for reducing and preventing exposure to allergens
  - Emotional impact on children with food allergies

- In-Depth training on food allergies:
  - Federal laws such as the ADA, Section 504, and FERPA
  - How to administer epinephrine
  - Specific strategies for fully integrating children with food allergies into school and class activities
Priorities for Managing Food Allergies

Priority FOUR: Educate children and family members about food allergies.
4. Educate children and family members about food allergies

• Teach all children about food allergies
  • Increase awareness and understanding of food allergies and build support and acceptance of people with food allergies
    • Identify signs and symptoms of anaphylaxis
    • Understand why it is wrong to tease or bully others
    • Understand the importance of finding a staff member who can help respond to suspected emergencies

• Teach all parents and families about food allergies
  • A successful FAMPP needs support and participation from parents of children with food allergies and from parents of children without food allergies
Priorities for Managing Food Allergies

Priority FIVE:
Create and maintain a healthy and safe educational environment.
5. Create and maintain a healthy and safe education environment

- Reduce the risk of exposure
- Develop food-handling policies and procedures
  - Prepare food separately for children with food allergies
- Train all staff who prepare, handle, or serve food how to read labels
- Clean and sanitize with soap and water or all-purpose cleaners
- Make outside groups aware of food allergy policies and rules when they use school facilities
# Food Allergy Management and Prevention Plan Checklist

<table>
<thead>
<tr>
<th>Check If You Have Plans or Procedures</th>
<th>Priorities for a Food Allergy Management and Prevention Plan</th>
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<tbody>
<tr>
<td></td>
<td>1. Does your school or ECE program ensure the daily management of food allergies for individual children by:</td>
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<tr>
<td></td>
<td>□ Developing and using specific procedures to identify children with food allergies?</td>
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<tr>
<td></td>
<td>□ Developing a plan for managing and reducing risks of food allergic reactions in individual children through an Emergency Care Plan (Food Allergy Action Plan)?</td>
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<td></td>
<td>□ Helping students manage their own food allergies? (Does not apply to ECE programs.)</td>
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<tr>
<td></td>
<td>2. Has your school or ECE program prepared for food allergy emergencies by:</td>
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<tr>
<td></td>
<td>□ Setting up communication systems that are easy to use in emergencies?</td>
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<tr>
<td></td>
<td>□ Making sure staff can get to epinephrine auto-injectors quickly and easily?</td>
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<tr>
<td></td>
<td>□ Making sure that epinephrine is used when needed and that someone immediately contacts emergency medical services?</td>
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<td></td>
<td>□ Identifying the role of each staff member in a food allergy emergency?</td>
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<tr>
<td></td>
<td>□ Preparing for food allergy reactions in children without a prior history of food allergies?</td>
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<td></td>
<td>□ Documenting the response to a food allergy emergency?</td>
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<td></td>
<td>3. Does your school or ECE program train staff how to manage food allergies and respond to allergy reactions by:</td>
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<tr>
<td></td>
<td>□ Providing general training on food allergies for all staff?</td>
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<td></td>
<td>□ Providing in-depth training for staff who have frequent contact with children with food allergies?</td>
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<td></td>
<td>□ Providing specialized training for staff who are responsible for managing the health of children with food allergies on a daily basis?</td>
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<td></td>
<td>4. Does your school or ECE program educate children and family members about food allergies by:</td>
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<tr>
<td></td>
<td>□ Teaching all children about food allergies?</td>
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<tr>
<td></td>
<td>□ Teaching all parents and families about food allergies?</td>
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<tr>
<td></td>
<td>5. Does your school or ECE program create and maintain a healthy and safe educational environment by:</td>
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<tr>
<td></td>
<td>□ Creating an environment that is as safe as possible from exposure to food allergens?</td>
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<tr>
<td></td>
<td>□ Developing food-handling policies and procedures to prevent food allergens from unintentionally contacting another food?</td>
</tr>
<tr>
<td></td>
<td>□ Making outside groups aware of food allergy policies and rules when they use school or ECE program facilities before or after operating hours?</td>
</tr>
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</table>
|                                      | □ Creating a positive psychosocial climate that reduces bullying and social isolation and promotes acceptance and understanding of children with food allergies?
Follow Federal Laws

- A life-threatening food allergy may be considered a disability under certain federal laws.

- Schools have a responsibility to ensure that children are not subject to discrimination on the basis of their disability.
Federal Laws that Protect Students with Food Allergies

- **Section 504 of the Rehabilitation Act of 1973**
  
  Section 504 is a federal law that prohibits discrimination on the basis of disability in programs and activities that receive federal financial assistance. Recipients of federal financial assistance include public school districts, other state and local educational agencies, and postsecondary educational institutions.
Federal Laws that Protect Students with Food Allergies (cont’d)

• **Americans with Disabilities Act (ADA)**
  • Title II of the ADA prohibits discrimination on the basis of disability by public entities, including public elementary, secondary, and postsecondary educational institutions, whether or not they receive federal financial assistance.

• **Department of Agriculture (USDA)**
  • USDA has oversight for providing meals in a variety of Child Nutrition Programs such as the National School Lunch, School Breakfast, and Afterschool Snack Program.
Federal Laws that Protect Students with Food Allergies (cont’d)

• **Individuals with Disabilities Act (IDEA)**
  • A child could be found eligible for services under IDEA because of a food allergy only if it adversely affects the child’s educational performance, and the child needs special education because of the food allergy.

• **Family Educational Rights and Privacy Act (FERPA)**
  • FERPA applies to educational agencies or institutions that receive federal funds under a program administered by the Department of Education.
  • FERPA generally prohibits schools and school districts from disclosing personally identifiable information from a student’s education record unless the student or the student’s parent provides prior, written consent for the disclosure.
Recommendations for Safety and Inclusion

It is no longer enough to just keep a child safe. We must also keep them included.

- Students with disabilities must be educated with typical children to the maximum extent possible in the least restrictive environment.

Reducing the Risk of Exposure to Food Allergens

On October 30, 2013, the CDC published national guidelines for food allergy management in schools. The recommended practices below can be found on p. 43-45 of the CDC Guidelines.

**Classroom**
- Avoid the use of identified allergens in class projects, parties, holidays and celebrations, arts, crafts, science experiments, cooking, snacks, or rewards. Identify class materials as needed.
- Use non-food incentives for prizes, gifts, and awards.
- Avoid serving food from restaurants because food allergens may be present, but unrecognized.
- Encourage children to wash hands before and after handling or consuming food.
- Ilse rapid access to epinephrine auto-injectors to children and train staff to use them.
- Help students with food allergies keep tables and chairs near each other so they can eat without having to deal with other children.
- Consider methods (such as assigned tables) to prearrange contact of foods with known allergies.
- Consider designated allergy-friendly seating arrangements.
- Support parents of children with food allergies who wish to provide safe snacks for their child in the event of an unexpected circumstance.
- Include information about children with special needs, including those with known food allergies, in instructions to substitute teachers.

**Cafeteria**
- 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 from all identified allergens).
- With parental cooperation, create standard procedures for identifying children with food allergies. For example, a recent picture of each child could be kept in a location that is not visible to other children or the public. Procedures must follow the requirements in FEDPA. (See Section 5 for more information about FEDPA.)
- Make reasonable meal accommodations after receiving approval from a doctor or allergist through dietary orders or an id in the school’s Emergency Response Plan (ERP). For more information, see the USDA Web site.*
- Provide advance 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 each purchase for potential food allergens.
- Designate an allergy-safe food preparation area.
- Keep food items that are foods served to children with allergies for at least 24 hours before serving the food. In the case of food the child has a reaction.
- Report incidents such as cross-contact with an allergen or error in the ingredient list or more immediately to administrators and parents.
- Ilse rapid access to epinephrine auto-injectors to children and train staff to use them.

*www.foodsafety.gov
Classroom Practices and Accommodations

- Avoid the use of identified allergens in class projects, parties, holidays and celebrations, arts, crafts, science experiments, cooking, snacks, or rewards.
  - **Tip**: Skin contact or ingestion of food allergens used in classroom projects are a frequent cause of allergic reactions. Even used food containers (such as egg cartons) may pose a risk that is easily avoided.

- Use nonfood incentives for prizes, gifts, and awards.
  - **Tip**: A classroom movie, extra recess, a fun guest speaker or field trip can motivate students without endangering or excluding those with food allergies.
Classroom (cont’d)
Practices and Accommodations

• Include information about children with special needs, including those with known food allergies, in instructions to substitute teachers.
  • **Tip**: Substitute teachers should be aware of student’s food allergies and special dietary needs.

• Encourage children to wash hands before and after handling or consuming food.
  • **Tip**: Use appropriate hand-washing procedures that emphasize the use of soap and water. Hand sanitizers are not effective in removing food allergens.
Cafeteria Practices and Accommodations

• With parental cooperation, create standard procedures for identifying children with food allergies.
  • **Tip:** Some schools require that these students identify themselves to food service staff; others specially code lunch tickets as a way of alerting staff to a food allergy.

• Procedures must follow FERPA requirements.
  • **Tip:** FERPA prohibits schools from disclosing personally identifiable information unless the student’s parent provides prior, written consent.

• Provide advanced copies of menus for parents to use in planning.
  • **Tip:** Meal substitutions must be made for children whose food allergies constitute a disability.
Cafeteria (cont’d)
Practices and Accommodations

• Be prepared to share food labels, recipes, or ingredient lists used to prepare meals and snacks.
  • **Tip:** Do not rely on lists of "safe" prepackaged food, because ingredients can change often, making such lists out-of-date quickly.

• Keep food labels from all foods served to children with allergies for at least 24 hours after serving in case the child has a reaction.
  • **Tip:** Develop a system for checking ingredient labels carefully for every food item to be served to the student with the allergy.

• Designate an allergen-safe food preparation area.
  • **Tip:** Cafeteria staff must be trained to avoid cross-contact or cross-contamination of safe foods with allergens.
Transportation Practices and Accommodations

• Train transportation staff in how to respond to food allergy emergencies.
  • **Tip:** Include how to manage medications

• Do not allow food to be eaten on buses except by children with special needs such as those with diabetes.
  • **Tip:** Enforce district food policies for ALL students riding a school bus.

• Have rapid access to epinephrine auto-injectors in cases of food allergy emergency and train staff to use them.
  • **Tip:** Bus drivers and transportation staff should be trained on how to use an epinephrine autoinjetor (if delegated to do so).
School Events
Practices and Accommodations

• Do not exclude children with food allergies from field trips, events, or extra-curricular activities.
  • Tip: When planning a field trip, find out if the location is safe for children with food allergies.
• Invite, but do not require, parents of children with food allergies to accompany their child in addition to the regular chaperone.
  • Tip: Make sure there are appropriate emergency protocols and mechanisms in place to respond to a food allergy emergency when away from school.
Physical Education and Recess Practices and Accommodations

• Do not exclude children with allergies from physical education or recess activities.
  • **Tip**: Treat the student with food allergies the same as other students

• Encourage hand washing before and after handling or consuming food.
  • **Tip**: Use appropriate hand-washing procedures that emphasize the use of soap and water.

• Have rapid access to epinephrine auto-injectors in cases of food allergy emergency.
  • **Tip**: Ensure that staff are trained on how to use them.
Putting Guidelines into Practice

- Use a coordinated approach based on effective partnerships
- Understand school’s responsibilities under Section 504, the ADA, the IDEA, and FERPA
- District-level and School-level active participation

School Staff and Faculty

- Child with Food Allergy & Parent
- Effective Management of Food Allergies
- Allergist or Other Primary Care Provider
## Roles for District and School Administrators and Staff

<table>
<thead>
<tr>
<th></th>
<th>Role Description</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Lead or Participate in the school or school district’s coordinated approach to managing food allergies.</td>
</tr>
<tr>
<td>2</td>
<td>Ensure the daily management of food allergies for individual students.</td>
</tr>
<tr>
<td>3</td>
<td>Prepare for food allergy emergencies.</td>
</tr>
<tr>
<td>4</td>
<td>Support or Participate in professional development on food allergies.</td>
</tr>
<tr>
<td>5</td>
<td>Provide food allergy education to students and parents.</td>
</tr>
<tr>
<td>6</td>
<td>Create and maintain a healthy and safe school environment.</td>
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</tbody>
</table>
Actions for District-Level Personnel

- Develop a comprehensive set of school district policies to manage food allergies
- Ensure that each school has a team that is responsible for food allergy management
- Support and allocate resources and time for professional development and training on food allergies
- Help schools without a registered nurse on site develop plans
- Consistently enforce policies that prohibit discrimination and bullying against all students, including those with food allergies
- Know and educate others about federal and state laws
Actions for School-Level Personnel

<table>
<thead>
<tr>
<th>School Administrators</th>
<th>School Nurses</th>
<th>Teachers</th>
<th>Health Aids</th>
<th>Bus Drivers</th>
</tr>
</thead>
<tbody>
<tr>
<td>School Doctors</td>
<td>Food Service Managers</td>
<td>Maintenance Staff</td>
<td>School Counselors</td>
<td>Other Mental Health Staff</td>
</tr>
</tbody>
</table>

- Help plan and implement the school’s FAMPP
- Read, review, and be familiar with each student’s individual written plan
- Provide and participate in professional development and training on food allergies – tailored to each specific job function
- Know how to respond to an allergic reaction if it occurs while the student is at school
- Prepare for food allergy reactions in children without a prior history of food allergies
- Reinforce the school’s rules against bullying and discrimination
Food Allergy Bullying and Social Isolation

About one-third of kids with food allergies report that they have been bullied specifically because of their allergies

Bullying

• Food allergic children are often teased, taunted, and harassed
  • waving the allergen in front of the child
  • being forced to touch the food they are allergic to
  • having the food they are allergic to thrown at them

Social Isolation

• Acceptance by peers is essential for a child’s emotional and social development
  • When children with food allergies cannot participate, and are not included in classroom and school activities, it can cause emotional distress
To Recap...

- **Food Allergy Management and Prevention Plan (FAMPP)**
  1. Ensure daily management of food allergies for individual children
  2. Prepare for food allergy emergencies
  3. Provide professional development on food allergies for staff members
  4. Educate children and family members about food allergies
  5. Create and maintain a healthy and safe educational environment

- **Follow Federal Laws**
  - Section 504, ADA, USDA, IDEA, FERPA

- **Recommendations for Safety and Inclusion**
  - Classroom, Cafeteria, Transportation, School Events, PE & Recess

- **Putting Guidelines into Practice**
  - Actions for District and School Staff
Successful Food Allergy Management in Schools

- Where food allergic children are safe and included; protected by the law, and free from social isolation, bullying and discrimination.

- Where school staff and administrators are trained in daily food allergy management and how to respond to a food allergy emergency.
Additional Food Allergy Resources

➢ To access the CDC Guidelines directly from the CDC, go to www.cdc.gov/healthyyouth/foodallergies/index.htm

➢ To access the CDC Guidelines and additional training materials from FARE, go to www.FoodAllergy.org/CDC
Our Next Webinar

The Balancing Act: Nutrition and Food Allergy

Mary Beth Feuling, MS, RD, CSP, CD
Children’s Hospital of Wisconsin
Wednesday, October 8
1:00 – 2:00 PM ET

Member registration opens
Friday, September 12

Open registration begins
Monday, September 22
Questions ?