Managing Food Allergies in Early Care Settings

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Welcome to our webinar!

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Today’s Presenters

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AAFA Patient Advocate
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Challenges for adults

• Parent may be placing child in the care of someone else for the first time
• New diagnoses-learning curve for parents
• Varying degrees of knowledge of those caring for child
• Allergens may be an important part of other child’s diet (i.e. milk)
• Fear of using epinephrine
Issues related to child growth and development

- They cannot articulate what they are feeling/may not have awareness (re: symptoms)
- Explore surroundings through all senses....with mouth
- Crawling on floor
- Fine and gross motor skills are not fully developed
- Learning the concept of sharing
Allergic Reactions to Foods in Preschool-Aged Children in a Prospective Observational Food Allergy Study
FINDINGS

Majority of reactions were to:

- milk (42.3%)
- egg (21%)
- peanut (7.9%)
FINDINGS

Accidental exposures were attributed to:
- label-reading errors,
- unintentional ingestion, and
- cross-contact
- (11% intentional ingestion)
Only 29.9% of severe reactions were treated with epinephrine
FACTORS

• Not recognizing severity of reaction,
• Epinephrine was unavailable,
• Fears of injecting epi
**Food Allergen Exposure in the School Setting: Evidence, challenges, and interventions**

<table>
<thead>
<tr>
<th>Type of Exposure</th>
<th>Relevant Facts</th>
<th>Practical Challenges</th>
<th>Practical Interventions*</th>
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| Oral Exposure    | - There can be “hidden ingredients” in foods.  
- Labels and ingredients can change without warning [1].  
- Items with advisory labels can contain allergens [2].  
- Trace amounts can cause severe allergic reactions.  
- Allergens can be detectable in saliva [3].  
- All children are protected by law to have a right to a free and appropriate education in the least restrictive environment.  
- Cross contact is presence of unidentified allergen [1,3].  
  - Allergen contact with surfaces, food, and saliva are common sources.  
  - Exposure by mouth or mucus membranes is a common cause of reactions. | - Difficult to monitor outside food, especially if not labeled.  
- Reading labels takes training, pre-planning, assigned personnel, and time allowances.  
- Celebrations are common source of unlabeled food and cross-contact risk.  
- Majority of allergic reactions in school start in classrooms [4].  
- Allergic child can be targeted for being cause of potentially unpopular accommodations.  
- Limited and pre-screened food projects in classrooms that do not contain the allergen.  
- Parent notification of any food projects or activities.  
- Scrutiny of chosen foods before use.  
- Safe snack stash in classrooms that allow food.  
- Fresh fruits and vegetable snack alternatives.  
- Adult assistance for food allergic children in selection of safe foods from cafeteria lines.  
- No sharing or trading of food, drinks, or personal items.  
- Appropriate cleaning of high-touch surfaces and hands.  
- Consider encouraging parents of allergic children to send in all foods for child.  
- Parent and student community education to create supportive environment.  
- Encouragement to report any bullying/harassment.  
- No eating on school bus (exception for children medical conditions). |

**Additional consideration for preschool/early elementary**
- Young children can pass saliva to each other via age appropriate exploration [3, 6].  
- Some schools children eat in their classrooms/learning environments.  
- Supervision during meal/snack time dependent on resources and staff.  

**Additional consideration for adolescent/teenage students**
- Older students under less supervision and more reliant on self-management.
Children ages 2-5 years put hands/objects in mouth
~ 40 times per hour
~ 80 times per hour (ages 1-2 years)
THE ROLE OF THE PRESCHOOL
Develop a WRITTEN Food Allergy Management and Prevention Plan (FAMPP)
PRIORITY ONE
The Daily Management of Food Allergies for INDIVIDUAL Children
WRITTEN PLAN:

- Information from healthcare provider including: diagnosis, child’s allergens, reaction history
- Strategies to prevent exposure to allergens (in classroom, while eating, play areas)
- Strategies to keep child fully included in all aspects of the day
- Emergency Action Plan

*This plan will be a useful tool when child enters school*
Strategies for Reducing Exposure to Allergens
Non-food incentives for prizes, gifts, and awards

Oriental Trading
Methods to prevent cross-contact when storing food in the classroom
Hand washing before and after consuming/handling food
Avoid the use of allergens in class projects, parties, holidays and celebrations, arts, crafts, science experiments, cooking, snacks, or rewards.
Wash tables, chairs and any other eating area with approved cleaner before each meal and snack
Keep eating area separate from learning/playing area
# Potential Food Allergens in Preschool and School Activities

According to the American Academy of Allergy, Asthma, and Immunology, “Food-related lesson plans for math or science, crafts, and cooking classes may need to be substituted depending on the allergens of the students.”

Below is a list of common food allergens you may encounter food allergens, along with alternatives and procedures. This is only a general guide and is not inclusive of every potential food allergen. It is important to be fully aware of the food allergies of the child, especially if they engage in activities that involve food-related activities. Remember, ingredients can be added to change them!

### Activity/Materials

<table>
<thead>
<tr>
<th>Activity/Materials</th>
<th>Allergen(s)</th>
<th>Potentially Safe Alternatives and Appropriate Procedures</th>
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</table>
| Creating snacks, grapes, pasta, cupcakes or other small foods | Potentially all* | - Read labels to choose foods that are safe ingredients.  
- Remember that different-sized packages can have different ingredients or cross-contact issues. |
| Sensory tables that use grapes, pasta, candies or other small foods | Potentially all* | - Read labels to choose foods that are safe ingredients.  
- Use non-food items. |
| Baking projects                           | Potentially all* | - Share safe recipes.  
- Request participants to bring their own baking activities. |
| Projects using empty egg cartons, milk cartons, beverage cartons, yogurt containers, food jars, etc. | Potentially all* | - Provide safe empty containers for the day.  
- Purchase new egg cartons at www.eggcartons.com |
| Birthday and holiday celebrations         | Potentially all* | - Provide a non-food celebration (i.e., games, goodie bags, stickers).  
- Provide safe cake or cupcakes for the day. |
| Play kitchen                              | Potentially all* | - Provide safe “real” containers to replace allergenic ones, since empty “real” egg cartons, milk cartons, cereal boxes, baby food jars, etc. may contain allergens. |
| Musical instruments – Allergens may be present on mouth-blowen musical instruments | Potentially all* | - Remove mouth-blown musical instruments from classrooms.  
- Provide a designated seat with mouth-blown instruments for your child’s use only. |
| Hand-washing (teachers and children)      | Potentially all* | - Use soap, liquid soap, and lotion to determine if allergens are present.  
- Use paper towels to dry hands, since cloth towels may contain food residue. |
| Finger painting                           | Wheat, Milk, Corn, Oil       | - Read labels to find milk-free finger paints.  
- Read labels to find a safe laundry soap.  
- Laundry starch or soap can be affected if avoiding corn. |
| Bird feeders                              | Wheat, Peanut butter, Nuts, Seeds | - Consider making a hummingbird feeder instead, using sugar, water, and food coloring.  
- Use sunflower or safflower oil or other non-food birdseed oil.  
- Use a mix with regular oil and sunflower oil or other non-food birdseed oil.  
- Use small seeds or seed mix without wheat seeds or nut oils. |
| Planting seeds                            | Legumes (such as beans, peas or peanuts) | - Read labels to find potting soil free of nutshell and soy.  
- Use any other seeds.  
- Purchase safe empty containers at www.eggcartons.com |

*Potentially all* means that all allergens are possible. For example, an empty egg carton may not just pose an egg risk. If the empty carton is used to store nuts, it could pose a nut risk. It would be best to take some precautions to avoid food allergies, such as buying new, unopened egg cartons.

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PRIORITY TWO:
Prepare for Food Allergy Emergencies
Prepare for Food Allergy Emergencies

- Set up communication systems
- Quick & easy access to epinephrine
- Use epinephrine when needed and immediately call EMS
- Identify role of each staff member in a FA emergency
- Prepare for FA emergencies in children without prior history
- Document response to FA emergency
PRIORITY THREE: STAFF TRAINING
TRAIN STAFF

- General training on food allergies to ALL staff
- In-depth training for staff with frequent contact to children with food allergies
Signs & Symptoms of Allergic Reaction

For a suspected or active food allergy reaction

**SEVERE SYMPTOMS**

- **LUNG:** Short of breath, wheezing, repetitive cough
- **HEART:** Pale, blue, faint, weak pulse, dory
- **THROAT:** Tight, hoarse, trouble breathing, swelling
- **MOUTH:** Significant swelling of the tongue, lips
- **SKIN:** Hives over body, widespread redness
- **GUT:** Repeated vomiting, severe diarrhea
- **OTHER:** Feeling something bad is about to happen, anxiety, faintness

**OR MORE THAN ONE MILD SYMPTOM**

- **NOSE:** Itchy, runny nose, sneezing
- **MOUTH:** Itchy mouth
- **SKIN:** A few hives, mild itch
- **GUT:** Mild nausea, discomfort

**1** Insect EPINEPHRINE IMMEDIATELY.

**2** Call 911. Request ambulance with epinephrine.

Consider Additional Meds

- Antihistamines
- Inhaled (nebulizer) if asthma

Positioning

Lay the person flat and raise legs.
If breathing is difficult or they are vomiting, let them sit up or lie on their side.

Next Steps

- If symptoms do not improve, or symptoms return, more doses of epinephrine can be given about 5 minutes or more after the last dose.
- Transport to and remain in an ER for at least 4 hours because symptoms may return.

Do not depend on antihistamines. When in doubt, give epinephrine and call 911.

How a Child Might Describe a Reaction

- "This food is too spicy."
- "My tongue is hot [or burning]."
- "It feels like something’s poking my tongue."
- "My tongue [or mouth] is tingling [or burning]."
- "My tongue [or mouth] itches."
- "It [my tongue] feels like there is hair on it."
- "My mouth feels funny."
- "There's a frog in my throat."
- "There’s something stuck in my throat."
- "My tongue feels full [or heavy]."
- "My lips feel tight."
- "It feels like there are bugs in there." (to describe itchy ears)
- "It [my throat] feels thick."
- "It feels like a bump is on the back of my tongue [throat]."
How to Read Food Labels

Tips for Avoiding Your Allergen

- All FDA-regulated manufactured food products that contain a “major food allergen” (milk, wheat, egg, peanuts, tree nuts, fish, crustacean shellfish, and soy as an ingredient) are required by U.S. law to list that allergen on the product label. For tree nuts, fish and crustacean shellfish, the specific type of nut or fish must be listed.
- Read all product labels carefully before purchasing and consuming any item.
- Be aware of unexpected sources of allergens, such as the ingredients listed below.
- *Note: This list does not imply that the allergen is always present in these foods; it is intended to serve as a reminder to always read the label and ask questions about ingredients.

For a Milk-Free Diet
Avoid foods that contain milk or any of these ingredients:
- butter
- cheese
- cream
- ice cream

Milk is sometimes found in the following:
- baked goods
- candy
- coffee creamer
- gravy powders
- margarine
- mozzarella
- processed meat products

Keep the following in mind:
- Individuals and milk allergy should also avoid cheese, milk chocolate, ice cream, soy milk, and other dairy products.
- The dairy product’s label may list lactose as an allergen. Patients who are allergic to lactose also need to avoid milk.

For an Egg-Free Diet
Avoid foods that contain eggs or any of these ingredients:
- baked goods
- chocolate
- cola
- candy
- cake

Egg is sometimes found in the following:
- baked goods
- candy
- gravy

Keep the following in mind:
- Individuals with egg allergy should also avoid eggs, egg yolk, and egg whites.
- The egg product’s label may list albumin as an allergen. Patients who are allergic to albumin also need to avoid eggs.

For a Wheat-Free Diet
Avoid foods that contain wheat or any of these ingredients:
- flour
- bread
- cakes

Wheat is sometimes found in the following:
- canned soups
- cereal

Keep the following in mind:
- Individuals with wheat allergy should also avoid bread, pasta, and other wheat products.
- The wheat product’s label may list gluten as an allergen. Patients who are allergic to gluten also need to avoid wheat.
- Follow your doctor’s advice regarding these ingredients.

For a Soy-Free Diet
Avoid foods that contain soy or any of these ingredients:
- baked goods
- soy
- peanuts

Soy is sometimes found in the following:
- baked goods
- soy sauce

Keep the following in mind:
- Individuals with soy allergy should also avoid soy sauce.
- The soy product’s label may list gluten as an allergen. Patients who are allergic to gluten also need to avoid soy.
- Follow your doctor’s advice regarding these ingredients.

How to Use Epinephrine (if allowed)
PRIORITY FOUR:
Educate ALL Children & Family Members About Food Allergies
- Teach ALL children about food allergies
- Teach all parents and families about food allergies in general without breaching privacy
Be a PAL to Friends with Food Allergies

Did you know that 1 in 13 kids in the United States has a food allergy? That’s about two kids in every classroom. For kids with food allergies, even a tiny amount of the food they are allergic to can make them very sick.

The most common food allergies are to milk, egg, tree nuts (like walnuts and almonds), soy, wheat, fish, and shellfish (like shrimp and crab). But a person can be allergic to any food!

Since food allergies affect so many kids, it is good to learn how you can Be A PAL to a friend with food allergies! Here’s how:

**Know that food allergies are very serious.**
It’s hard to believe that foods you eat every day can hurt others, but it’s true!

- If someone with a food allergy eats something they are allergic to, they can get very sick and sometimes have to go to the hospital.
- If a friend or classmate has a food allergy, don’t tease, bully or make fun of them. Tell an adult right away if you see others picking on someone with a food allergy.

**Don’t share your food with friends who have food allergies.**
You can share jokes and laughs with your friends with food allergies, but don’t share food. For kids with food allergies, sharing food can be very dangerous. So don’t offer kids with food allergies anything from your lunch or snack. Why? Because it may have something in it that could make them very sick or hurt them.

**Wash hands after eating.**
Washing your hands with soap and water after you eat is very important. It’s a good way to clean off any food that is on your hands.

**Help all of your friends and classmates have fun together!**
There are lots of ways to have fun without food! Listening to music, playing board or video games, making crafts, going for a bike ride, and playing sports are just some of the cool things you can do together. This way, everyone stays safe and has fun!

**If a friend with food allergies feels sick, get help right away!**
If your friend feels sick or thinks they may have eaten something they are allergic to, tell an adult right away or dial 911! They will make sure your friend gets help and gets the medicine they need to feel better.

Save this handout so you won’t forget how to Be A PAL, and Protect A Life From Food Allergies!

www.foodallergy.org

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Food Allergies in the U.S.

15 million Americans have food allergies, a serious medical condition.

People can be allergic to any food, but there are 8 foods that cause the most reactions:

- Milk
- Eggs
- Peanuts
- Tree nuts
- Soy
- Wheat
- Fish
- Shellfish

Reactions can range from a mild response to anaphylaxis, a severe and potentially deadly reaction.

Every 3 minutes a food allergy reaction sends someone to the ER.

The number of people who have the disease is growing, increasing 50% among children between 1997 and 2011.

It now affects 1 in 13 children.

There is no cure for food allergy, but scientists are working to find treatments to prevent life-threatening reactions.

You can help make the world a safer place for those with food allergies.

Educational Resources

- Books: BugaBees, Alexander the Elephant
- Videos: Hayden’s Food Allergy Video, AllergyHome modules, Binky Goes Nuts, Alexander the Elephant
- Music/CDs: Kyle Dine
- BE A P.A.L. Program
- Stickers, pencils, bookmarks from FARE
- POSTERS: Be A PAL, Symptoms of Allergic Reaction, Top Allergens
PRIORITY FIVE:
Create & Maintain a Healthy & Safe Educational Environment
Create a Positive Climate

• Make children feel secure & safe
• Address bullying
• Avoid isolation
• Have clear rules & expectations
• Ok NOT to share food
• Strategies to reduce exposure to allergens
ROLE OF THE PARENT
Role of the Parent

- Notify School of Your Child’s Allergies
- Bring Medications to School
- Provide Emergency Care plan from your child’s pediatric allergist
- Work with provider to create an appropriate plan for your child (accommodations)
- Let them know that you support them and that it is ok to use epinephrine
- Keep an open dialogue, share information & resources
- Encourage your child to use medical id
- Say “thank you”
The Laws
People with a disability cannot “be excluded from participation in or be denied the benefits of the services, programs, or activities of a public entity...”
Include more people in the definition of disabled

More major life activities are included

Conditions that are episodic or in remission must be considered when they are active
“[A] person who has a physical or mental impairment which substantially limits one or more major life activities or has a record of such an impairment or is regarded as having such an impairment.”
Does the ADA apply?

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<th>Public Schools</th>
<th>Private Schools</th>
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<tbody>
<tr>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
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Secular

Religious
The idea is not to exclude a person by being unwilling to make an accommodation that is fairly simple and easy to make.
Exceptions to Modifications

- No "fundamental alteration/undue burden"
- It would be a "direct threat"
- Denial must be made by head of preschool and put in writing

Image courtesy of Stuart Miles / FreeDigitalPhotos.net
Under ADA

- Can’t have rules that explicitly exclude children with disabilities

- Cannot base admissions on rules such as “toilet trained,” that would result in discrimination of children with disabilities

- Can’t charge more for children with disabilities

- Can’t refuse a child because concern about insurance increases
ADA Resources

- ADA Information Line – 800-514-0301

- “Commonly Asked Questions about Child Care Centers and the ADA”

[http://www.ada.gov/chcaflyr.htm](http://www.ada.gov/chcaflyr.htm)
ADA Remedies

- Complaint with DOJ
  - Can fine school up to $50,000

- Private lawsuit
  - No damages
  - Injunction & attorneys’ fees
The Disabled Access Credit is available to small businesses

- 30 or fewer employees OR
- total revenues of $1,000,000 or less.
- up to $5000 a year is available to offset costs for making ADA modifications.
Section 504

- May apply in preschool setting
- Schools that receive federal funds
- Watch out for indirect funding
- Enforced by DOE Office of Civil Rights
State Laws/Regulations

- Separate from elementary school rules
- Varies state-to-state
- May give MORE protection than ADA/504
To find out about your state

National Resource Center for Health and Safety in Child Care and Early Education

Real Case Scenario

See *Allergic Living* article, Summer 2014, page 62
Take-Away Points

- Written plan
- Food allergy policies
- Find a school willing to work with you
- Chances are ADA will apply (unless religious)
- Reduce exposure to allergens
- Make sure staff is educated about food allergies
- Make sure staff knows how to treat a reaction
Free Resources

FARE (www.foodallergy.org)
- Be a PAL Program, posters, books, educational materials

Kids With Food Allergies (www.kidswithfoodallergies.org)
- KFA List of Allergens in Craft Materials, recipes, webinars

AllergyHome.org
- Chart of Allergen Exposure, posters, modules

Allergyready.com
- Online training for teachers and professionals

CDC Guidelines (esp. the table)
www.foodallergy.org/CDC

NEA Food Allergy Handbook
(http://neahin.org/foodallergies/)
Questions?
Our Next Webinar

What Every Parent Must Know About Managing Food Allergies at School

Gina Clowes
Food Allergy Research & Education
Wednesday, August 20
1:00 – 2:00 PM ET

Member registration opens
Friday, July 11

Open registration begins
Monday, July 21