

**Youth Development, Inc.  
Early/Head Start  
Child Health and Safety**

**Policy Number:**

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**Agency Approval Date:**

07/26/03

**Policy Council Approval**

**Date:** 07/26/03, 08/09/13

**Governing Board Approval**

**Date:**

Reviewed: March 6, 2007  
10/2008, 9/2010, 5/24/13,  
7/2015, 09/2016

**COMPONENT:** Health and Safety (1304.22)

**SUBJECT:** Policy for Monitoring Children Diagnosed with Food or other Allergies or otherwise Identified as “At Risk” for Allergy-Related Anaphylaxis.

**OBJECTIVE:** This policy is designed to ensure that any child diagnosed with a food allergy or any other type of allergy which puts them at risk for allergy-related anaphylaxis receives appropriate monitoring while attending any YDI program.

**SUPPORTIVE DATA:** Anaphylaxis is a serious allergic reaction that is rapid in onset and may cause death. It typically causes a number of symptoms including an itchy rash, throat swelling, and low blood pressure. Common causes include insect bites/stings, foods, and medications. It is diagnosed based on the presenting symptoms and signs. The primary treatment is injection of epinephrine, with other measures being complementary.

**OPERATIONAL PROCEDURE:** Any child enrolled in an YDI program diagnosed with a food allergy or any other type of allergy which puts them at risk for allergy-related anaphylaxis will be subject to these policies and procedures.

- A. Individual Health Care Plan- An individualized Health Care Plan should be developed by the parent/guardian and the child’s health care providers. The Health Care Plan should address the child’s health issues, specific needs of the child, and provide specific instructions for each of the following:
  - a. Specific allergies/triggers and symptoms identified by the child’s physician(s).
  - b. Diet or other allergy-related causative issues.
  - c. The actions to be taken in the event of an allergic reaction.
  - d. The specific medications needed and the parameters and procedures for administering them.
  
- B. Parents/guardians of children with food or other allergies which may cause anaphylactic reactions should:

- a. Provide staff with complete medical history and current information about the child's allergies, symptoms, and reactions if any.
- b. Provide written documentation from a professional medical provider detailing medical care and medication administration instructions and protocols.
- c. Provide staff with all required medications approved by child's medical provider(s) which are to be taken at school, such as epinephrine pens and antihistamines (refer to Administering Medication policy).
- d. Work with staff to develop an individualized health care plan which accommodates their child's health care needs.
- e. Replace medications as they expire or when they are completely used up.
- f. Review policies and procedures related to seizure monitoring and care.
- g. Help educate their child in the self-management of their allergy, including: safe and unsafe foods/allergens, strategies for avoiding exposure to unsafe foods/allergens, symptoms of allergic reactions, how and when to tell an adult they may be having an allergy-related problem, and how to read food labels as age appropriate.

C. YDI staff will:

- a. Review the health records submitted by parent/guardian and physicians.
- b. Review (Policy for Monitoring Children Diagnosed with Food or other Allergies or otherwise Identified as "At Risk" for Allergy-Related Anaphylaxis Protocol) with parents/guardians.
- c. Notify the Health Manager, or other designated staff, to work with parents/guardians and or medical care professionals to develop/create center-based, individualized health care/Anaphylactic Action plans for any child diagnosed with food allergies or any other type of allergies which puts them at risk for allergy-related anaphylaxis.
- d. Receive training on how to recognize anaphylactic shock reactions, as well as proper medication administration.
- e. Ensure that all staff that interacts with children, who have anaphylactic causing allergies, knows their specific triggers such as food and other allergens can recognize symptoms/reactions, knows what to do in the event of an emergency/reaction, and works with other school staff to eliminate the use/exposure of specific foods and other allergens.
- f. Read and fully comprehend all aspects of all specifically designed individualized health care plans.
- g. Include children with food or other types of allergies in all school related activities, as their health permits.
- h. Coordinate with other center staff to ensure all medications are appropriately stored.
- i. Keep medications in easily accessible and secure locations, out of reach of children.
- j. Administer medications (as necessary) in accordance with medical provider(s) instructions.
- k. Monitor children for any reactions to medications.

- l. Provide anaphylactic shock related trainings to bus drivers and monitors transporting children with a food allergy or any other type of allergy which puts them at risk for allergy-related anaphylaxis.
- m. Discuss with parents/guardians appropriate strategies for caring for a child experiencing an allergic reaction on field trips.
- n. Follow federal and state laws and regulations regarding sharing confidential, medical information on any child.
- o. Enforce a “no eating” policy on school buses with exceptions made only to accommodate special needs under federal or similar laws, or local policy.

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