



THE NATIONAL CENTER ON
Health

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Health Services Newsletter

FOOD ALLERGIES IN HEAD START

The safety of children with food allergies is everyone’s responsibility. An estimated 5 percent of children in the U.S. are affected by food allergies². Allergies can begin at any age, so children may already have a food allergy or may develop one. The most common food allergies are related to tree nuts, eggs, milk and wheat. Allergic reactions that children experience may range from mild to severe, even life-threatening, anaphylactic reactions. Health leaders working directly with families can prepare programs for children with allergies. As the health manager, you can help your program prevent and manage allergic reactions, as well as support children, staff and families on ways to avoid exposure to allergens. As part of the HSAC, staff and administrators, families, and primary care providers can establish systems, routines and practices that allow all children to safely participate.

Your Program Should HAVE...

- a policy for asking parents during initial intake about known allergies
- individualized written care plans for children with food allergies, developed with and approved by the family and health care provider;
- a communication plan that alerts all staff, substitutes and volunteers to individualized care plans while maintaining confidentiality;
- a policy for medication administration and training;
- a written plan for urgent medical care; and;
- a policy regarding whether it is permissible to bring food from home to the program.



Allergies are caused by an overreaction of the body's immune system in response to a substance that it believes is harmful. As a result, the body creates antibodies that fight against the substance.¹

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Voluntary Guidelines for Managing Food Allergies In Schools and Early Care and Education Programs



SUPPORTING STAFF

Clear systems, policies, and practices ensure all staff have information and training to recognize and take immediate action in the event of an allergic reaction.

Make sure all staff, including food preparation staff, receive training in:

- reading food labels and recognizing ingredients that may trigger reactions;
- preventing exposure to foods to which children are allergic;
- recognizing symptoms of an allergic reaction;
- administering prescribed and over-the-counter medications;
- understanding when to seek routine or emergency medical care; and
- effective communication with families

The Centers for Disease Control and Prevention's Voluntary Guidelines for Managing Food Allergies in Schools and Early Care and Education Programs provide more detailed guidance on reducing allergic reactions and responding to life-threatening reactions.

“A major factor in death from anaphylaxis has been a delay in the administration of life-saving emergency medication, particularly epinephrine.”²

QUESTIONS TO ASK FAMILIES

What are the first signs when your child has an allergic reaction?

How do you calm/reassure your child when she has a reaction?

Is there a special way to help him take his medication? (e.g., on your lap, rubbing his back, singing a special song ...)

ENGAGING FAMILIES

Draw on families' strengths by asking them about their child's allergies and the most effective strategies they have used to deal with an allergic reaction. If the physician has recommended an over-the-counter or prescription medication, be sure the family understands your program's medication administration policies and procedures. As you develop the child's individual health plan, discuss his medical history and review with families which food(s) their physician has documented their child must avoid. Talk about procedures the program will put in place to meet the child's nutritional needs while striving to keep him safe from exposure to allergens. This is a good time to discuss the program's plan for urgent medical care, and strategies families can use at home to prevent or address an allergic reaction. Together, you can develop a care plan that will encourage a consistent approach to keeping the child safe and healthy, and give families confidence in your ability to protect their child.

Be sure all families know the program's nutrition - related policies and procedures.

Be sure to obtain consent to share necessary information with staff and volunteers who interact with their child.



WHAT NEXT?

Providing a safe environment for children with food allergies takes vigilance and commitment across the program. Here are some other steps you can take.

- **Post information about each child's allergies, with a clear photo of the child, in every room in which the child spends time, that is accessible to staff but not in a publicly-visible location.**
- Ensure that when the child is on the playground, a field trip, or Head Start transportation, someone **familiar with a child's care plan and trained in relevant medication administration** accompanies the child with prescribed emergency medication (e.g., EpiPen).³
- Consider adding a clinician or dietician with a specialty in pediatric allergies to your HSAC.
- Engage your HSAC in reviewing policies and procedures to address food allergies.

See **Resources** for further guidance and information.

References:

1. California Childcare Health Program. (2007). *Health and Safety Notes – Allergies*. http://www.ucsfchildcarehealth.org/pdfs/healthandsafety/AllergiesEN_091907.pdf
2. American Academy of Pediatrics, American Public Health Association, National Resource Center for Health and Safety in Child Care and Early Education. (2011). *Caring for our children: National health and safety performance standards; Guidelines for early care and education programs, 3rd edition*. Elk Grove Village, IL: American Academy of Pediatrics; Washington, DC: American Public Health Association.
3. Pennsylvania Chapter of the American Academy of Pediatrics. (2014). *Model child care health policies, 5th edition*. (S.S. Aronson, ed.) Elk Grove Village, IL: American Academy of Pediatrics. <http://www.ecels-healthychildcarepa.org>
4. Familydoctor.org. (2010). *Food Allergies*. <http://familydoctor.org/en/diseases-conditions/food-allergies>

What is the difference between food allergy and food intolerance?⁴

Food allergies trigger a reaction by the body's immune system. For example, a milk allergy involves the immune system and symptoms may include hives and breathing problems. While many people consider themselves allergic to certain foods, they actually have an intolerance to the food that causes a number of unpleasant symptoms, but is not an allergy. For example, lactose (dairy) intolerance may cause bloating, cramping, and other gastrointestinal symptoms, which do not involve the immune system.

What is anaphylaxis?

Anaphylaxis is a severe and potentially life-threatening allergic reaction. It develops extremely rapidly and must be treated promptly with epinephrine, either by emergency medical personnel or by trained program staff administering the child's prescribed dosage. Symptoms may include shortness of breath or wheezing; swelling of lips, tongue or throat; nausea/vomiting; rash; stomach pain; or other symptoms.

RESOURCES

ECLKC Resources

[Food Allergies: Questions and Answers for Parents](#)
[Alergias alimentarias: Preguntas y respuestas para los padres](#)

[Caring for Children with Asthma \[Key Concepts, Background Information\]](#)

Other Resources

[Caring for Our Children Standard 4.2.0.10: Care for Children with Food Allergies](#)

[Caring for Our Children Standard 9.2.4.1: Written Plan and Training for Handling Urgent Medical Care or Threatening Incidents](#)

[Voluntary Guidelines for Managing Food Allergies in Schools and Early Care and Education Programs](#) (Centers for Disease Control & Prevention)

[Food Allergies in Children](#) (American Academy of Pediatrics)
[Las alergias a los alimentos y su hijo](#)

[American Academy of Allergy Asthma and Immunology](#)

[Food Allergy and Anaphylaxis Emergency Care Plan](#) (Food Allergy Research and Education)

[Fact Sheet for Families: Food Allergies](#) (California Childcare Health Program)

Fostering a culture of health and wellness for Head Start children, families, and staff.

NATIONAL CENTER ON HEALTH

Our Goal:

To help Head Start and Early Head Start programs implement best practices and effective approaches within medical and dental care access, health awareness, healthy active living, emergency preparedness, and environmental safety to support healthy outcomes and school readiness for young children and their families.

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School readiness begins with health!

