

Wee Friends Too
ELIJAH'S LAW
ALLERGY AND ANAPHYLAXIS POLICY

The Wee Friends Too Allergy & Anaphylaxis policy is designed to establish guidelines and procedures for staff and families to deal with the prevention and response to anaphylaxis.

Anaphylaxis Prevention

- Upon enrollment and whenever there are changes, parents/guardians will be required to provide the program with up to date information regarding their child's medical conditions, including any allergies the child may have and any emergency medications prescribed for potential anaphylaxis. The parents/guardians will work in conjunction with the program and the child's physician to complete the documents required for any allergy that the child may have. These documents will guide all staff in the necessary actions to take during an allergic or anaphylactic reaction. The program will keep these documents and any emergency medications in a designated area known to all staff members as outlined in the program's health care plan and will ask for updated paperwork when necessary.

Documents

- Any child with a known allergy will have the following documents on file when applicable:
 - NYS OCFS form 7006 – Individual Health Care Plan for a Child With Special Healthcare Needs or approved equivalent
 - NYS OCFS form 6029 – Individual Allergy and Anaphylaxis Emergency Plan or approved equivalent
 - NYS OCFS form 7002 – Medication Consent Form or approved equivalent
- In addition, the child's allergies will be indicated on their enrollment form.
- These forms will be completed by the child's parents in conjunction with the program and the child's physician. In the event of an anaphylactic reaction, staff will call 911 and follow the instructions outlined in these documents.

Staff Training

- All staff members will be trained in the prevention, recognition, and response to food and other allergic reactions and anaphylaxis upon hire and at least annually thereafter. A number of staff will also maintain certifications in CPR, First Aid, and medication administration. If a child with an allergy requires the administration of epinephrine or other emergency medications, the parents will be required to train any staff member caring for that child on the administration of the prescribed medication.

Strategies to Reduce the Risk of Exposure to Allergic Triggers

- Each classroom will have a posting with a list of individual children's allergies that is visible to all staff and volunteers caring for the child. All staff will take steps to prevent exposure to a child's known allergy, including but not limited to reading food labels. Handwashing, cleaning and all other regulations related to allergies and anaphylaxis as outlined in the OCFS Childcare Regulations will be followed by all staff and volunteers.

Communication

- Upon enrollment of a child with a known allergy, all staff and volunteers will be made aware of the child's allergy and associated medication needs, as well as ways to reduce the risk of exposure to said allergen. In addition, all parents and children will be made aware of any allergies in the classroom, as well as actions being taken to reduce exposure. Confidentiality will be maintained when discussing any child's allergy with parents and other children.

Annual Notification to Families

- Families can find the most updated policy on the schools website and will be notified about it upon enrollment. Hard copies will be available on the parent information board. This policy will be reviewed and updated annually. Families will be notified of any updates to this policy.

Stock Epinephrine

- Our program will stock non-patient specific epinephrine auto-injector devices for emergency treatment of a person appearing to experience anaphylactic symptoms.

- We will stock the following doses:
 - Infant/toddler dose (0.1mg) for persons who are 16.5-33 lbs
 - Pediatric dose (0.15mg) for persons who are 33-66 lbs
 - Adult dose (0.3mg) for persons 66 lbs or more

For children weighing less than 16.5 lbs, the program will NOT administer epinephrine and will call 911.

- At least one caregiver will take the required training and be responsible for the general oversight of the non-patient specific epinephrine acquired by the program, including checking the expiration dates of the auto-injectors month. This person will be listed in Appendix H of the program's health care plan. The non-patient specific epinephrine auto-injectors will be kept in (specify location) in their original package, and stored in accordance with manufacturer instructions. A first aid kit will be kept in (specify location), and will contain all items specified in the program's health care plan.

- The program will call 911 immediately after the designated caregiver administers epinephrine. In addition, the program will notify the child's parent and their OCFS licensor or registrar. A Log of Medication Administration (OCFS-LDSS-7004) will be completed after the administration of the epinephrine auto-injector device.