

Before and After School & Summer Child Care Programs www.bascol.org

Dear Medical Provider,

Attached you will find the Office of Children and Family Services OCFS-6029 Individual Allergy and Anaphylaxis Emergency Plan form.

In 2019 Governor Cuomo signed new legislation called "Elijah's Law". The law is named after 3-year-old Elijah Silvera from New York City who was given a grilled cheese sandwich while at day care despite having a known severe dairy allergy. After Elijah went into anaphylaxis, his family was not told what he had eaten and 911 was not called. Elijah died in November 2017. Implementation of Elijah's Law requires changes to your child care program, valuable, potentially life-saving changes, that are intended to prevent further tragedy.

Child care providers are required to have parent/guardian and health care practitioner complete the OCFS-6029 Individual Allergy and Anaphylaxis Emergency Plan for any child with a known allergy. The provider must work with the parent/guardian and the child's health care practitioner to develop written instructions outlining what the child is allergic to, prevention strategies, and steps that must be taken if the child is exposed to a known allergen or is showing symptoms of exposure. The plan must be reviewed upon admission to the child care program, annually thereafter, anytime there are staff or volunteer changes, and/or anytime information regarding the child's allergy or treatment changes.

Please note that each allergen must be listed in a separate box. If needed attach additional pages.

If medications are needed at the program in case of a reaction, the separate (OCFS-7002) Medication Consent Form, which includes all the information required by NYS regulations, will need to be completed, in order to be able to administer children medication during program hours.

Thank you for helping us to keep our children safe and healthy!

Sincerely,

Terry Liberty

Terry Liberty
Business Manager

NEW YORK STATE OFFICE OF CHILDREN AND FAMILY SERVICES INDIVIDUAL ALLERGY AND ANAPHYLAXIS EMERGENCY PLAN

Instructions:

- This form is to be completed for any child with a known allergy.
- The child care program must work with the parent(s)/guardian(s) and the child's health care provider to develop written instructions outlining what the child is allergic to and the prevention strategies and steps that must be taken if the child is exposed to a known allergen or is showing symptoms of exposure.
- This plan must be reviewed upon admission, annually thereafter, and anytime there are staff or volunteer changes, and/or anytime information regarding the child's allergy or treatment changes. This document must be attached to the child's Individual Health Care Plan.
- Add additional sheets if additional documentation or instruction is necessary.

Allergen: (i.e., a	Type of Exposure: ir/skin contact/ingestion, etc.):	Symptoms include but are not limited to: (check all that apply)
	3	☐ Shortness of breath, wheezing, or coughing ☐ Pale or bluish skin, faintness, weak pulse, dizziness ☐ Tight or hoarse throat, trouble breathing or swallowing ☐ Significant swelling of the tongue or lips ☐ Many hives over the body, widespread redness ☐ Vomiting, diarrhea ☐ Behavioral changes and inconsolable crying ☐ Other (specify) ☐ Shortness of breath, wheezing, or coughing ☐ Pale or bluish skin, faintness, weak pulse, dizziness ☐ Tight or hoarse throat, trouble breathing or swallowing ☐ Significant swelling of the tongue or lips ☐ Wany hives over the body, widespread redness ☐ Other (specify) ☐ Shortness of breath, wheezing, or coughing ☐ Pale or bluish skin, faintness, weak pulse, dizziness ☐ Tight or hoarse throat, trouble breathing or swallowing ☐ Significant swelling of the tongue or lips ☐ Many hives over the body, widespread redness ☐ Vomiting, diarrhea ☐ Behavioral changes and inconsolable crying

OCFS-6029 (12/2020))	
Date of Plan:	1	1

THE FOLLOWING STEPS WILL BE TAKEN IF THE CHILD EXHIBITS SYMPTOMS including, but not limited to:

- Inject epinephrine immediately and note the time when the first dose is given.
- Call 911/local rescue squad (Advise 911 the child is in anaphylaxis and may need epinephrine when emergency responders arrive).
- Lay the person flat, raise legs, and keep warm. If breathing is difficult or the child is vomiting, allow them to sit up
 or lie on their side.
- If symptoms do not improve, or symptoms return, an additional dose of epinephrine can be given in consultation with 911/emergency medical technicians.
- Alert the child's parents/guardians and emergency contacts.
- After the needs of the child and all others in care have been met, immediately notify the office.

MEDICATION/DOSES

- Epinephrine brand or generic:
- Epinephrine dose:
 0.1 mg IM
 0.15 mg IM
 0.3 mg IM

ADMINISTRATION AND SAFETY INFORMATION FOR EPINEPHRINE AUTO-INJECTORS

When administering an epinephrine auto-injector follow these guidelines:

- Do not put your thumb, fingers or hand over the tip of the auto-injector or inject into any body part other than the mid-outer thigh. If a staff member is accidentally injected, they should seek medical attention at the nearest emergency room.
- If administering an auto-injector to a young child, hold their leg firmly in place before and during injection to prevent injuries.
- Epinephrine can be injected through clothing if needed.
- Call 911 immediately after injection.

STORAGE OF EPINEPHRINE AUTO-INJECTORS

- All medication will be kept in its original labeled container.
- Medication must be kept in a clean area that is inaccessible to children.
- All staff must have an awareness of where the child's medication is stored.
- Note any medications, such as epinephrine auto-injectors, that may be stored in a different area.
- Explain here where medication will be stored:

MAT/EMAT CERTIFIED PROGRAMS ONLY

Only staff listed in the program's Health Care Plan as medication administrant(s) can administer the following medications. Staff must be at least 18 years old and have first aid and CPR certificates that cover all ages of children in care.

- Antihistamine brand or generic:
- Antihistamine dose:
- Other (e.g., inhaler-bronchodilator if wheezing):

*Note: Do not depend on antihistamines or inhalers (bronchodilators) to treat a severe reaction. USE EPINEPHRINE.

STORAGE OF INHALERS, ANTIHISTAMINES, BRONCHODILATOR

All medication will be kept in its original labeled container. Medication must be kept in a clean area that is inaccessible to children. All staff must have an awareness of where the child's medication is stored. Explain where medication will be stored. Note any medications, such as asthma inhalers, that may be stored in a different area. Explain here:

STRATEGIES TO REDUCE THE RISK OF EXPOSURE TO ALLERGIC TRIGGERS

The following strategies will be taken by the child care program to minimize the risk of exposure to any allergens while the above-named child is in care (add additional sheets if needed):

Document plan here:				
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EMERGENCY CONTACTS - CALL 911				
		13517		
Ambulance: () -				
Child's Health Care Provider:	Phone #: () =	=	
Parent/Guardian:	Phone #: ()		
CHILD'S EMERGENCY CONTACTS				
Name/Relationship:	Phone#: (hone#: () -		
Name/Relationship:	Phone#: () -			
Name/Relationship:	Phone#: ()	湿	
Parent/Guardian Authorization Signature:	Date:	1	1	
Physician/HCP Authorization Signature:	Date:	/	1	
Program Authorization Signature:	Date:		1	