



Upcoming Meeting Dates

Policy 5516 – Additional Information

- Policy Committee Chair Memo, 11/20/2014
- CT State Department of Education: Management Plans
- Policy 5516 – Revised Language
- Epi-Pen Chart – 2014-2015

Health Department Comments re: Safe Snack Guide

OHS BC Minutes, 10/16/2014



UPCOMING MEETING DATES

- | | |
|-------------|---|
| November 25 | 7:00 PM – Board of Education Meeting
Organizational Meeting
501 Kings Highway East
2 nd Floor Board Conference Room |
| November 25 | 7:30 PM – Board of Education Meeting
Regular Meeting
501 Kings Highway East
2 nd Floor Board Conference Room |
| December 1 | 4:15 PM – Board of Education Meeting
Policy Committee
501 Kings Highway East
Superintendent's Conference Room |
| December 1 | 7:30 PM – Board of Education Meeting
Special Meeting
501 Kings Highway East
Superintendent's Conference Room |
| December 9 | 7:30 PM – Board of Education Meeting
Regular Meeting
501 Kings Highway East
2 nd Floor Board Conference Room |

FAIRFIELD PUBLIC SCHOOLS

Board of Education

To: Board of Education Members

From: Jennifer Maxon Kennelly
Policy Committee Chair

Date: November 20, 2014

Re: Policy 5516

Accompanying this memo is revised language to Policy 5516 **Life Threatening Allergies and Glycogen Storage Disease Management Policy**. In response to input from faculty, staff, parents, and Board members, the Policy Committee thought it was prudent to revise this language prior to making the motion for the vote on the policy on November 25th. You can see the changes in blue, which the committee came to an agreement on at our November 17th Policy meeting.

We feel confident that this language before you represents a community effort to best address the needs of all our stakeholders. We look forward to the conversation at the Board table.

Additional accompanying information:

- Data regarding the food allergies, epi-pen orders (indicative of a life threatening allergy), and the orders pertinent to nut allergies.
- Information regarding the recommended representation on the district-wide, multi-disciplinary team.

Section 3

Management Plans for Food Allergy and Glycogen Storage Disease

The CSDE and the DPH recommends that districtwide management plans for food allergy and GSD focus on safety, prevention, education, awareness, communication and emergency response. Management plans should strike a balance between the education, health, social normalcy and safety needs of the individual student with life-threatening food allergies and GSD and the education, health and safety needs of all students. Management plans for food allergy and GSD should be the basis for the development of procedural guidelines that will be implemented at the school level and provided for consistency across all schools within the district.

The goals for districtwide management plans for food allergy and GSD include:

- maintaining the health and protecting the safety of children who have life-threatening food allergies and GSD in ways that are medically-accurate, developmentally-appropriate, promote self-advocacy and competence in self-care and provide appropriate educational opportunities;
- ensuring that interventions, action plans and IHCPs for students with life-threatening food allergies and GSD are based on medically accurate, developmentally-appropriate information and evidence-based practices; and
- defining a formal process for identifying, managing and ensuring continuity of care for students with life-threatening food allergies and GSD across all transitions (PK through Grade 12).

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Process for Development of Districtwide Management Plan for Food Allergy and GSD

The process for developing or revising management plans for food allergy and GSD is as important as the final product – the plan. Districtwide implementation requires a team approach with appropriate representation from schools, families, health professionals and the local community. Consensus should therefore be grounded in medically appropriate, research-based interventions, as well as best practices based on local district needs and the special health care needs of children with life-threatening food allergies and GSD.

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Team Members

The districtwide team works to develop, implement, monitor, review and revise the management plan for life-threatening food allergies and GSD effectively. Team members may include:

IN THIS SECTION

[Process for Development of Districtwide Management Plan for Food Allergy and GSD](#)

[Team Members](#)

[Plan Components](#)

[Important Issues in Development of Management Plan for Food Allergy and GSD](#)

[Banning of Specific Foods](#)

[Medications](#)

[Section 504 of the Rehabilitation Act of 1973](#)

- school superintendent or designee
- building principal or designee
- school nurse supervisor or school nurse
- school medical adviser
- teacher representative
- parent representative
- student representative
- other school staff (e.g., school psychologist or counselor)
- school medical adviser
- school food service director or representative
- coach
- transportation coordinator
- supervisor of custodial staff
- community health care provider(s), e.g., pediatrician, APRN, dietitian, nutrition or health consultant, local EMS representative
- national and local experts

Before developing the plan, the district team should review the district's policies and protocols regarding the care of students with life-threatening food allergies or GSD, students' needs and then identify areas that need development or improvement.

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Plan Components

An effective plan should be brief and provide the overarching goals for the district regarding the care of students with life-threatening allergies and GSD. This district plan should include:

- the rationale for the plan;
- a commitment to planning and prevention;
- a collaborative process;
- a formal process for identifying and developing IHCPs and action plans for emergencies (such as, anaphylaxis or hypoglycemia);
- the provisions for education and training;
- a balance between individual, school and community needs; and
- fostering normal development.

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Important Issues in the Development of Management Plan for Food Allergy and GSD

The following issues related to planning for students with life-threatening food allergies and GSD have districtwide implications. The purpose of this section is to explain the issues, suggest ways to address them based on successful practices in school districts and provide resources for further information.

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1. Banning of Specific Foods

School districts must implement a Food Allergy Management Plan to address the needs of students with life-threatening food allergies. Schoolwide bans of specific foods may not render the school environment safe because there is no

Students

Welfare

MANAGEMENT OF FOOD ALLERGIES IN SCHOOLS **5516**

~~The Fairfield Board of Education recognizes the increasing prevalence of potentially life-threatening food allergies among children. Effective management of food allergies in the school setting includes implementing strategies for avoidance of offending foods by allergic children and emergency planning to ensure prompt identification and treatment of allergic reactions that may occur. The Board supports the education of school personnel, students, and parents or guardians regarding food allergy management to maintain a safe school environment for allergic children.~~

~~Approved 8/27/04~~

Students

Students with Special Health Care Needs

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Life Threatening Allergies and Glycogen Storage Disease Management Policy

The Fairfield Public Schools recognize that allergies may be life threatening. For this reason, the District is committed to developing strategies and practices to minimize the risk of accidental exposure to life threatening allergens and to assist in the management of glycogen storage disease and to ensure prompt and effective medical response should a child suffer an allergic reaction while at school. The district further recognizes the importance of collaborating with parents and appropriate medical staff in developing such practices and encourages strategies to enable the student to become increasingly proactive in the care and management of his/her life threatening allergy(ies), or glycogen storage disease as developmentally appropriate. There is currently no cure for life-threatening allergies; there is only medication available for emergency response. The only way to prevent the symptoms of an allergic response is to prevent exposure to allergens, which will require understanding and effort on the part of the entire school community.

Best practice asks us to reduce students' exposure to known allergens in the learning environment, reinforcing a safe and inclusive environment for all students. When a student with life-threatening allergies is present in a school environment, cooperation and compliance is necessary at all levels: District, School, Classroom, Home. Each level has its role and responsibilities:

District:

- Shall clearly communicate district policy to all school leaders and parents and provide for training on food allergy awareness and the administration of medication to all applicable personnel.
- Shall monitor and evaluate all schools for compliance with district policy and follow up with all individuals for instances of policy violations.

School:

- Each school shall clearly communicate the needs of students with life-threatening food allergies to their school community through letters to classroom communities and their families and of district and school expectations of compliance.
- Schools leaders shall inform PTA leaders of the need for safety and inclusion in all school sponsored events.

Classroom:

- Peers shall be educated as to the individualized safety and inclusion needs of fellow students.
- Expectations of compliance shall be clearly communicated to students and their families.

Students

Students with Special Health Care Needs

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Life Threatening Allergies and Glycogen Storage Disease Management Policy (continued)

Home:

- Families shall be educated on food allergy awareness and how to comply with safety requests for students with life-threatening allergies.
- Families shall make every effort possible to ensure the safety of students with life-threatening food allergies when sending a snack into the learning environment.
- Students with life-threatening food allergies should know to never accept food from others and how to communicate their needs to peers.
- Parents of students with life-threatening allergies shall help their student access developmentally appropriate self-advocacy skills. Parents may choose to collaborate with schools on these skills.

To this end, the Fairfield Public Schools adopt the following protocols related to the management of life threatening allergies for students enrolled in district schools.

I. Identifying Students with Life Threatening Allergies

- A. Early identification of students with life-threatening allergies is vital to the effective implementation of this policy. The district therefore requests parents/guardians of children with life-threatening allergy(ies) to promptly notify the school in writing of the allergy(ies).
- B. Upon receipt of parent written notification that their child has been diagnosed with food allergy(ies) and/or other life threatening allergy(ies), the school shall request the parent/guardian to provide the following:
 - 1. Written authorization to obtain detailed written medical information on the child's condition from the physician;
 - 2. Written consent to administer or self-administer medications during the school day, as applicable in accordance with the District's Administration of Medication Policy;
 - 3. An Emergency Care Plan and Treatment Authorization ("Emergency Care Plan") completed and signed by their child's licensed health care provider and signed by the parent;
 - 4. Any medications necessary to prevent or treat allergic reactions along with relevant prescription and dosage information. Replace medications after use or expiration;
 - 5. A description of the student's past allergic reactions, including triggers and warning signs;
 - 6. Current emergency contact information and prompt notice of any updates;
 - 7. A description of the student's emotional response to the condition and the need for intervention; and
 - 8. Recommendations on age-appropriate ways to include the student in planning or care.

Students

Students with Special Health Care Needs

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Life Threatening Allergies and Glycogen Storage Disease Management Policy

I. Identifying Students with Life-Threatening Allergies (continued)

- C. **Suspected Allergies:** In the event the School Nurse suspects that a student has a food allergy or other life threatening allergy(ies) the school shall provide the parent/guardian written notification and request for the student to be evaluated by a physician.
- D. **Non-Cooperation:** If the parent/guardian of a student with known or suspected food allergy(ies) or other life threatening allergy(ies) fails or refuses to cooperate with the school for an evaluation or implementation of an appropriate Individualized Health Care Plan (IHCP) and Emergency Care Plan (ECP), the school shall implement an Emergency Care Plan stating to call 911 immediately upon recognition of symptoms along with sending written notification to the parent/guardian of the student's ECP.

II. Individualized Health Care Plans and Emergency Care Plans

- A. If the District is notified pursuant to Section I of this policy that child has life-threatening allergy(ies), the district shall develop an individualized health care plan (IHCP) for the child.
- B. The IHCP shall be developed by the parents/guardians, school nurse, and appropriate school personnel. Such personnel may include, but are not limited to, school or food service administrator(s); classroom teacher(s); and the student, if appropriate. The school may also consult with the town medical advisor, as needed.
- C. IHCPs are developed for students with special health needs or whose health needs require daily interventions. The IHCP describes how to meet the child's health and safety needs within the school environment and should address the student's needs across school settings. Information to be contained in an IHCP should include a description of the functional health issues (diagnoses); student objectives for promoting self-care and age appropriate independence; and the responsibilities of parents, school nurse and other school personnel. The IHCP may also include strategies to minimize the student's risk for exposure, such as considerations regarding:
 - 1. Classroom environment, including allergy free considerations;
 - 2. Cafeteria safety;
 - 3. Participation in school nutrition programs;
 - 4. Snacks, birthdays and other celebrations;
 - 5. Alternatives to food rewards or incentives;
 - 6. Hand-washing;
 - 7. Location of emergency medication;
 - 8. Risk management during lunch and recess times;
 - 9. Special events;
 - 10. Field trips;

Students

Students with Special Health Care Needs

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Life Threatening Allergies and Glycogen Storage Disease Management Policy

II. Individualized Health Care Plans and Emergency Care Plans (continued)

11. Extracurricular activities;
 12. School transportation;
 13. Staff notification; and
 14. Transitions to new classrooms, grades and/or buildings.
- D. As part of the IHCP, the district shall also develop an Emergency Care Plan (ECP) for each child identified as having a life threatening food allergy. The ECP describes the specific directions about what to do in a medical emergency. The ECP should include the following information, as appropriate:
1. The child's name and other identifying information, such as date of birth, grade and photo;
 2. The child's specific allergy(ies);
 3. The child's signs and symptoms of an allergic reaction;
 4. The medication, if any, or other treatment to be administered in the event of exposure;
 5. The location and storage of the medication;
 6. Who will administer the medication (including self-administration options, as appropriate);
 7. Other emergency procedures, such as calling 911, contacting the school nurse, and/or calling the parents or physician;
 8. Recommendations for what to do if the child continues to experience symptoms after the administration of medication; and
 9. Emergency contact information for the parents/family and medical provider.
- E. The IHCP shall be reviewed annually, or upon receipt of new medical information, and/or in the event of an anaphylactic reaction in school.
- F. An individualized health care plan and glycogen storage disease action plan shall also be developed for any student with glycogen storage disease. Such plan shall include, but is not limited to, the provision of food or dietary supplements by the school nurse or by an employee approved by the school nurse to a student with glycogen storage disease. Such plan may not prohibit a parent/guardian or a person they so designate, from providing food or dietary supplements to the affected student on school grounds during the school day.

Students

Students with Special Health Care Needs

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Life Threatening Allergies and Glycogen Storage Disease Management Policy

II. Individualized Health Care Plans and Emergency Care Plans (continued)

- G. The IHCP and ECP shall be disseminated to all school staff who supervise the student during the school day and at school sponsored activities or are responsible for the provision of food to the student. Plan distribution includes, but is not limited to, the students' teachers, classroom assistants, food service staff, coaches, transportation staff, school health professionals, school case managers, custodial staff, student aides and the parents/guardians of the student.

III. Referral to Section 504 and IDEA

In addition to having an IHCP, a student with a life-threatening allergy or glycogen storage disease (GSD) may also be eligible under Section 504 of the Rehabilitation Act if the student has a disability that substantially limits a major life activity or under the Individuals with Disabilities Education ACT (IDEA) if the student has a qualifying disability that adversely impacts the student's education and causes the student to need specialized instruction. The team responsible for the IHCP shall refer the student under Section 504 or the IDEA as appropriate. Eligibility under either Section 504 or IDEA must be considered on a case-by-case basis given each student's unique situation.

IV. Training/Education

- A. All school personnel will be educated on how to recognize symptoms of allergic reactions, preventative strategies to minimize a child's risk of exposure to life-threatening allergies, and what to do in the event of an emergency. Staff education will be coordinated by the principal and school nurse, utilizing a consistent District training module supported by the town Director of Health. Any such training regarding the administration of medication shall be done in accordance with District Policy and State Law.
- B. The District shall offer training consistent with District Policy # 5515 Protocol for Administration of Emergency Medications by Non-nursing Personnel.
- C. The District shall provide each school with consistent and age-appropriate information for students about food allergies, how to recognize symptoms of an allergic reaction and the importance of adhering to the school's policies regarding food and snacks, as well as the development of empathy, understanding, and tolerance for individuals with life threatening allergies and glycogen storage disease. The principal shall coordinate the delivery of this educational information with building staff.

Students

Students with Special Health Care Needs

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Life Threatening Allergies and Glycogen Storage Disease Management Policy

V. Prevention

- A. A District-wide, multi-disciplinary team will develop a Pre K-12 Management Plan ~~plan~~ for the management of life-threatening allergies, including food allergies, aligned to the CSDE Guidelines for Managing Life-threatening Food Allergies ~~in Connecticut Schools,~~ and Glycogen Storage Disease.
- B. The District-wide, multi-disciplinary team will annually review the ~~District's allergy and glycogen storage disease management plan~~ Management Plan and Guidelines.
- C. Food in Elementary Schools
 - ~~1. The only food allowed in Elementary School classrooms will be snacks from the approved Safe School Snack List.~~
 - ~~a. Annually, at the start of the school year, the District Committee will publish an approved Safe School Snack List.~~
 - ~~b. Non-compliant students will be offered an alternative approved snack by the teacher.~~
 - 1. Peanut and tree nuts typically cause the most severe allergic reactions in elementary classrooms. Snacks sent from home for consumption in the classroom must be mindful of this heightened risk and must not contain peanuts and/or tree nuts. The District will make best efforts to recognize peanut and tree nut products that are in violation of this policy.
 - ~~2. All schools will designate food free zones, including the Library, Computer Lab, Music Room, Art Room, and Science Room.~~
 - 2. The District is committed to providing an elementary school classroom environment free of tree nuts and peanuts. Parents are advised that while the District is committed to ensuring that the elementary classrooms are free of tree nuts and peanuts, due to the choices made by individual parents, the District cannot guarantee that every elementary school classroom will be completely free of tree nuts and peanuts at all times. In order to ensure all elementary classrooms are free of tree nuts and peanuts, the District shall remove any and all items containing these allergens from its vending machines and shall insure that ingredients containing these allergens are excluded from school provided snacks. Notwithstanding the above, it shall **not** be the responsibility of the faculty or staff of any elementary school to read student provided food labels or to ascertain whether or not student provided food items contain tree nuts and peanuts. It is the obligation of each parent to determine the content of the food items they provide to their child.
 - ~~3. All classrooms will provide protein soluble hand wipes for mandated use for students to use after snack if hand washing is not available.~~

Students

Students with Special Health Care Needs

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Life Threatening Allergies and Glycogen Storage Disease Management Policy

W. Prevention (continued)

3. The multi-disciplinary team will develop:
 - a. A voluntary, suggested snack list for parents who would like guidance on identifying nut-free snacks for their children
 - b. An intervention plan for students who bring nut-containing snacks to the Classroom
- ~~4. All kindergarten classes will have their snacks in the cafeteria.~~
4. All in school celebrations shall be food free.
5. All elementary schools will designate food free zones, including the Library, Computer Lab, Music Room, Art Room, Gym, Stage, and Science Room.
6. All elementary classrooms will provide protein soluble hand wipes for mandated use for students to use after snack if hand washing is not available. Students will be required to remain at their desks while eating snacks to contain the spread of allergens.
7. All desks will be cleaned with soap and water, protein soluble wipes, or other approved cleaning agents after snacks are eaten in the classroom.
8. All cafeteria tables will be cleaned with soap and water or other approved cleaning agents after each use.
9. Community/PTA use of elementary school facilities:
 - a. No food is allowed in any classroom;
 - b. Any event in which food will be served or consumed must be held in the school cafeteria or outdoors;
 - c. Outside organizations are encouraged to serve only nut-free food items and consult the suggested food list referenced on the District's website ~~SnackSafely.com website~~ when selecting food to be served in the cafeteria or outdoors.

VI. Communication

- A. The school nurse shall be responsible for coordinating the communication among parents, a student's individual health care provider and the school regarding a student's life threatening allergic condition. School staff responsible for implementing a student's IHCP will be notified of their responsibilities and provided with appropriate information as to how to minimize risk of exposure and how to respond in the event of an emergency.

Students

Students with Special Health Care Needs

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Life Threatening Allergies and Glycogen Storage Disease Management Policy

VI. Communication (continued)

- B. The school administrative staff and school nurse shall communicate annually to all school personnel the availability of training regarding Policy #5515, Protocol for the Administration of Emergency Medications by Non-nursing Personnel.
- C. Each school will ensure that there are appropriate communication systems available within each school (i.e. telephones, cell phones, walkie-talkies) and for off-site activities (i.e. field trips) to ensure that school personnel are able to effectively respond in case of emergency.
- D. The District shall develop standardized letters to be sent home to parents; ~~whenever appropriate, to alert them to food restrictions within their child's classroom or school.~~ introducing, explaining and enforcing the District's food allergy policy and protocols.
- E. Beginning with the school year 2015-2016, the District shall annually, not later than October 1, provide notice to parents of the Plan for the Management of Severe and Life-Threatening Allergies, Including Food Allergies, and
 - 1. Make the plan available on the District's Website and/or the websites of each school under the District's jurisdiction;
 - 2. Provide notice of such plan in conjunction with the annual written statement provided to parents and guardians as required by subsection (b) of section 10-231c of the Connecticut General Statutes.
- F. The District shall annually update its ~~approved website for identifying Safe School Snacks.~~ resources for voluntary, suggested snack alternatives for families.
- G. All communication, written or verbal, shall be compliant with the Family Education Rights and Privacy Act.

VII. Monitoring the District's Plan and Procedures

The District shall conduct periodic assessments of its Food Allergy Management Plan and Procedures. Such assessments shall occur at least annually and after each emergency event involving the administration of medication to determine the effectiveness of the process, why the incident occurred, what worked and what did not work.

Students

Students with Special Health Care Needs

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Life Threatening Allergies and Glycogen Storage Disease Management Policy

Legal Reference: Connecticut General Statutes

- 10-15b Access of parent or guardian to student's records.
- 10-154a Professional communications between teacher or nurse and student.
- 10-207 Duties of medical advisors.
- 10-212a Administrations of medications in schools
- 10-212c Life threatening food allergies; Guidelines; district plans
- 10-212a(d) Administration of medications in schools by a paraprofessional.
- 10-212c Life threatening food allergies; Guidelines; district plans, as amended by P.A. 12-198)
- 10-220i Transportation of students carrying cartridge injectors
- 10-231c Pesticide application at schools
- 19a-900 Use of cartridge injectors by staff members of before or after school programs, day camp or day care facility.
- 52-557b Good Samaritan Law. Immunity from liability for emergency medical assistance, first aid or medication by injection
- The Regulations of Connecticut State Agencies section 10-212a through 10-212a-7, Administration of Medication by School Personnel.
- Guidelines for Managing Life-Threatening Food Allergies in Connecticut Schools, Connecticut State Department of Education (2006)
- Federal Legislation
- Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794 § 504; 34 C.F.R. § 104 et seq.)
- Americans with Disabilities Act (ADA) of 1990 (42 U.S.C. §12101 et seq.; 29C.F.R. §1630 et seq.
- The Family Education Rights and Privacy Act of 1974 (FERPA)
- Land v. Baptist Medical Center*, 164F3d423 (8th Cir. 1999)
- The Individuals with Disabilities Education Act of 1976 (IDEA) (20 U.S.C. § 1400 et seq.); 34 C.F.R. § 300 et seq.
- FCS Instruction783-2, Revision 2, Meal substitution for medical or other special dietary reasons.
- P.A. 09-155 An Act Concerning the Use of Asthmatic Inhalers and Epinephrine Auto-Injectors While at School.

Epipen information 2014-15 school year					
	students w/		orders for		
School	food allergies	# Epipen orders	nut allergies	# Care Plans	# Epipens adm. 2013-14
Burr	46	31	27	30	0
Dwight	30	23	22	23	0
HH	31	19	19	19	0
Jennings	39	24	23	24	0
McKinley	29	13	13	13	0
Mill Hill	42	32	32	32	0
NS	31	25	24	25	0
Osborn	40	31	27	31	0
Riverfield	32	18	17	18	0
Sherman	40	29	28	29	0
Stratfield	47	25	19	25	1
ECC	7	7	7	7	0
TOTAL prek-5	414	277	258	276	1
RLMS	53	31	31	31	0
TMS	53	26	25	26	0
FWMS	77	43	37	43	0
TOTAL 6-8	183	100	93	100	0
FWHS	121	37	36	37	0
Ludlow HS	111	37	35	37	1
TOTAL 9-12	232	74	71	74	1
TOTAL district	829	451		450	2

Health Department Comments on the Utilization of SnackSafely.com's Safe Snack Guide

It is understood that avoidance is an essential component in the plans for keeping children with food allergies safe and the Health Department is supportive of approaches that can be effectively implemented to improve avoidance. The implementation of the Safe Snack Guide ("Guide") is likely to offer some level of risk reduction; it would not however eliminate the risk of life threatening allergic reactions from occurring in the schools. Therefore, the school nurses would still be required to conduct the same level of emergency planning, training and education as currently performed in the schools.

The level of risk reduction achieved by the use of the Safe Snack Guide would seem to be dependent on three factors, only one of which falls within the ability of the school system to control.

Effectiveness of Implementation: The school system would need to ensure that mechanisms are in place such that parents are aware of and provided with the most up-to-date version of the Guide and that policies are in place to ensure that all snack items brought into the schools are listed in the Guide.

The Quality of the Safe Snack Guide: The Safe Snack Guide appears to be one of the most comprehensive lists of "safe snacks", meaning they are free of three allergens (peanut, tree nuts and eggs) of the top eight allergens. The website snacksafely.com states the guide is widely used by schools and the guide appears to be regularly updated. From the content provided on their website, it appears that SnackSafely.com and the Safe Snack Guide may be attributed to parents of a child with food allergies who work with industries to verify ingredient and processing information related to products those industries sell. While the authors are knowledgeable and have produced what appears to be a valuable product; the website does not indicate if there is a Board of Directors, Medical Advisory Board or any independent entity with content expertise reviewing the content of the Safe Snack Guide or providing guidance to SnackSafely.com.

The disclaimer on the front page of the Safe Snack Guide indicates that individuals purchasing any listed food item are responsible to "check the product label to ensure that undesired allergens are not included as ingredients and to verify with the manufacturer that trace amounts of undesired allergens were not introduced during the manufacturing process". This statement could be seen as negating the value of the Guide and implementing a responsibility on all parents/guardians purchasing an item listed in the Guide. Such purchaser required verification could not be effectively monitored.

The Role of Parents of Children without Food Allergies: Around the same time at which snacks are being prepared or packaged it would be typical to have school lunches or other meals being prepared at the home that are not subject to the same allergen avoidance practices creating a possibility of cross contamination of a listed snack items or their packaging. While there can be steps taken to educate parents/guardians on steps to prevent cross contamination, these practices cannot be effectively verified/monitored.

These comments are provided, as requested, for your use in considering the utilization of the Safe Snack Guide. While adoption would not change the current work performed by the school nurses, we do want to emphasize that the use of such a guide should not lessen the other avoidance and planning efforts currently in place in the schools (i.e. hand-washing, wiping down desks, emergency planning).

Respectfully submitted,

Bruce McDonald, MD Jacob Hen Jr., MD
School Medical Advisor Chairman, Board of Health

Sands Cleary, MS, RS
Director of Health

Joanne Ryan, RN, BSN
Nursing Supervisor

OSBORN HILL SCHOOL BUILDING COMMITTEE MEETING DRAFT MINUTES

October 16, 2014

Osborn Hill Elementary School

760 Stillson Road, Fairfield, CT 06824

Library

Members Present: Bret Bader, Bill Dunn, Kim Marshall (chair), and Susie Cardona

Others Present: Sal Morabito, Frank Arnone, Jessica Gerber (BoE), Larry Secor (OCR) and Judy Ewing

Call to Order

Ms. Marshal called the meeting to order at 7:10 p.m.

Approval of meeting minutes

Mr. Dunn made a motion to approve the minutes. Mr. Bader seconded the motion to approve the August minutes.

The motion was approved unanimously: 4:0

Approval of invoices

Three invoices were presented by Mr. Secor for approval.

1. Gennarini Application and Certification for Payment (ACP): No. 4: 9/30/2014 \$112,557.79

Mr. Bader made a motion to approve the above reference invoice. Mr. Dunn seconded the motion.

The motion was approved unanimously: 4:0

2. Silver Petrucelli & Associates, Inc, #14-1922 \$2,072.40

Mr. Dunn made a motion to approve the above reference invoices. Ms. Cardona seconded the motion.

The motion was approved unanimously: 4:0

3. Nafis & Young Engineers, Inc. Invoice # 272-14 \$3,280.00

Mr. Bader made a motion to approve the above referenced invoice. Ms. Cardona seconded the motion.

The motion was approved unanimously: 4:0

Update from the Architect – Mr. Silver was unavailable for the meeting. Mr. Secor provided current status report.

OCR Report

Mr. Secor reported that the first part of the three phase project has essentially been completed. This phase included hallway, window and door replacements in the upper class wing of the school. Roller shades are scheduled to be installed next week on the windows (see change order listed below).

Stripping of PCBs from bar joists and walls has been completed, however due to State (DoH) testing requirements; the removal of the gymnasium roof has been delay. The schedule date for removal is now currently the weekend of November 15. Despite being several weeks behind, if the current schedule is maintained, the work could be still be completed by the previously expected January timeline.

Mr. Secor stated that there was a change order for \$8,521.50 that he recommended approving for the installation of roller shades on the thirty nine doors (\$190.00 ea). The reason for this recommendation was that even though the glass windows is tempered and tinted, additional school security was needed.

Ms. Marshall made a motion to approve the requested change order. Mr. Dunn seconded the motion.

The motion was approved unanimously: 4:0

Mr. Secor discussed the need to reconcile his project expense worksheet with the Town's finance budget report as a discrepancy has come to his attention after the close of the fiscal year 2013-14. Ms. Marshall, Mr. Secor and Ms. Holland will clarify the remaining funds in the budget. It is not anticipated that these funds would be enough to allow for the building committee to contract for construction of the walkway connecting the school with the annex. Mr. Morabito indicated that a grant request had been submitted, but that the status was yet to be determined (possibly by the next meeting). The Building Committee would wait for further status on the grant, prior to approach any Town body for additional funding or the elimination of this component of the project. The option for construction offered by Gennarini on the walkway would be allowed to expire.

Old Business None

New Business None

Public Comment None

Next Meeting 11/20/2014

Adjournment - Mr. Dunn made a motion to adjourn the meeting. Ms. Cardona seconded the motion.

The motion passed unanimously: 4:0

Meeting adjourned at 7:57 p.m.

Respectfully Submitted,
OHS Building Committee