
























Sample page of ASSESSMENT BOOKLET

General Assessment Grid

This grid gives you a general assessment of your school's preparedness to manage food allergic children. In each of the columns (1-6), check one of the 3 boxes in that column that best describes your school.

-  → If you've checked a box with this symbol, it is likely an area in which your school needs to improve preparedness
-  → You are probably doing an ok job in these areas, but there's room for improvement
-  → You are taking preparedness seriously and are on the right track

See the Response Preparedness Assessment Tool included in this booklet 

	1 Safety Culture/ Attitude	2 Avoidance & Risk Reduction Strategies	3 Communication with Families	4 Recognition of Symptoms	5 Response Preparedness	6 Teamwork
	You believe anaphylaxis is such a rare event, so you don't need to do any special training for yourself or your staff. 	You assume foods and craft materials are safe unless a parent raises a concern 	You figure families will ask you if they have questions about craft or science materials, and special events. 	You figure it will be obvious to you when it happens. 	You depend on others to tell you what to do if it happens. 	Specific tasks for emergency response are not delegated ahead of time. You'll just figure it all out when it happens. 
	You tell parents to keep medicine in the front office and you figure someone will know what to do with it in an emergency. 	You don't typically read ingredient labels. Or you only do so when you suspect a food, or when asked by parents 	You tell families only if there is going to be food at an event. After all, the children will not be eating materials for craft or science projects. 	You have been told during annual training about what symptoms to look for. You have a general idea of what these would look like. 	You know that the child keeps medicine. But you're not sure where it is. Nor are you sure if you remember how to use it. 	You have talked with your team/staff. Everyone is aware of what needs to be done during an emergency. 
	You meet with parents and make sure there is an emergency action plan. You make sure staff receives repeated training on anaphylaxis and EpiPen use. You know that because it is such a rare event, repeat training is especially needed. 	You read ingredients labels of everything. You assume all foods are unsafe unless screened by both you and the parents 	You tell families ahead of time about materials in the classroom, classroom parties, or special event. Often families will need to check ingredients or research materials. So you assume they will need to know ahead of time. 	You have talked to parents to find out what their child typically experiences, how the child might behave, or words their child uses to report his/her symptoms. You know exactly which symptoms require specific medications. 	You know exactly what is in the emergency action plan. You know what to do with the child while the medicine is being fetched. You know which medicines to administer and how to administer them. 	You have walked through drills in the actual setting (out side in the school yard or inside the school). You know exactly who needs to be gathering medicine, calling 911, administering medication, getting back up medication, etc. 