

Hamilton-Niagara Region Application for Student Nutrition Program Funding New Non Designated Programs

Provincial funding for student nutrition programs (SNP) will be allocated to programs that are dedicated to meeting the provincial and regional eligibility requirements. Programs may be funded up to a maximum of 15% of the food and consumable costs incurred and are eligible to apply for funding once within a 12-month period. To assist in the completion of this application, please consult the following support documents:

- [Student Nutrition Program Eligibility Guidelines \(October 2014\)](#)
- [Student Nutrition Program Nutrition Guidelines \(July 2008\)](#)
- [Student Nutrition Program Anaphylaxis Management Protocols \(December 2006\)](#)

Part 1. Contact Information

Name of School/Organization _____ School Board _____
 Principal/Administrator _____ E-mail _____
 Program Coordinator/Contact _____ E-mail _____

Address:

Street _____ Phone No. _____ Fax No. _____
 City _____ Postal Code _____

Part 2. Program Description

Describe where/ how the program will operate _____

Total number of children in your school/organization: _____

If community based, what are the ages of the children/youth participating? _____

If community based, what schools will the participating children/youth come from? _____

Please fill in appropriate details about your program(s):

A. Program

Program Type	# of children per day	# of days per week					# months per year	Grades/age of children
		1	2	3	4	5		
Breakfast								
Snack (am)								
Snack (pm)								
Lunch								

B. Universality

Will your program be available to all children/youth in your school/organization regardless of family income?

Yes No If no, please explain

C. Program Operation Staff & Volunteers

Who will volunteer for your program? (Please check all that apply)

- Parents/Caregivers
- Students
- Service clubs
- Faith based groups or clubs
- Seniors
- Teachers/Principal
- Business
- Others (specify): _____

Total number of volunteers you anticipate _____
 Total number of hours per week you anticipate for all program volunteers to deliver program _____

Please indicate how volunteers will contribute to the overall operation of the program. (Please check all that apply)

- Food Preparation and clean up
- Food purchasing/distribution
- Records and Accounting
- Menu planning
- Serve food
- Other (specify): _____

Part 3: Safe and Nutritious Food

A. Safe Food: Facilities & Equipment

Please describe the facility and equipment used for food preparation (i.e. school kitchen, appliances, food storage, etc.) and the area where the food will be served.

Did you consult a public health inspector while planning your program? Yes ___ No ___

B. Nutritious Food

Please be sure to include a copy of your **weekly menu*** and indicate on the menu if your program is a breakfast, lunch or snack.

Did you consult the Provincial Nutrition Guidelines or contact a local dietitian when planning your menu?

Yes ___ No ___

C. Workshop Attendance

Please indicate which workshops and the date you or any of your volunteers have attended or plan to attend during the school year.

<u>Workshop Attended</u>	<u>Date</u>	<u>Plan to Attend</u>
<input type="checkbox"/> Safe Food handling	_____	<input type="checkbox"/> Safe Food Handling
<input type="checkbox"/> Provincial Nutrition Guidelines And/or Menu Planning	_____	<input type="checkbox"/> Provincial Nutrition Guidelines and/or Menu Planning

D. Anaphylaxis Management

Do you have an awareness of anaphylaxis management and have measures in place to reduce the risk of accidental exposure and to respond appropriately in an emergency? Yes ___ No ___

Part 4: Financial Information

Program costs should be calculated as follows: Breakfast and Lunch \$1.00 /child, Snack \$.60/child

- A. # of program days per week _____
- B. Cost of individual meal (breakfast, lunch or snack) \$ _____
- C. # of children/clients participating each day _____
- D. # of weeks* of funding requested _____

$$\left. \begin{array}{l} B \\ C \\ D \end{array} \right\} A \times B \times C \times D = \$ \underline{\hspace{2cm}}$$

*September to June school year – approximately 38 weeks

E. Total In-Kind Donations* include:

In-Kind donations refer to any donation of food, space, equipment or service, including volunteer hours, that support the delivery of the student nutrition program

a) Dollar Value of Volunteer Hours

(total number of volunteer hours per week X number of program weeks X \$17.00/hour
If program volunteers include school staff, the following rates per hour can be used to calculate a dollar value: Principals, \$60.00; teachers,\$35.00; education assistants,\$21.00)

$$\left. \begin{array}{l} \text{a) } \$ \underline{\hspace{2cm}} \\ \\ \\ \end{array} \right\}$$

And

E. = \$ _____

b) In-Kind Donations of Food, Space and Service*

b) \$ _____

*Please refer to Appendix A., calculation of in-kind space and service support

F. Total Cost of the Program = (A x B x C x D) + E = \$ _____

- G. Total anticipated non Provincial cash donations from the following:**
- Parental contributions \$ _____
 - Fundraising \$ _____
 - Community business \$ _____
 - G. Total** \$ _____

H. Total Monies on Hand (opening balance) \$ _____

Programs must demonstrate that the estimated dollar amounts of in-kind donations, cash funding from non-provincial sources, and monies on hand represent the remaining 85% of the total program cost.

For Office use: Budget Calculation

E. Total Dollar Value of All In-Kind Donations	
F. Total Program Food and Consumable Cost	\$ _____
G. Total Non-Provincial cash funding from all sources	\$ _____
H. Total monies on Hand	\$ _____
I. Maximum Provincial funding available (up to 15% of food and consumables.cost)	\$ _____
J. Total Funding for Program (G+H+E+I)	\$ _____
Balance (J - F)	+/- \$ _____

Total Funds Approved

\$

To ensure nutritious food is provided, please complete the following menu template.

		Program Type: _____									
Week: 1	Day 1	Day 2		Day 3		Day 4	Day 5				
Vegetables / Fruit:											
Grain Product:											
Milk / Alternative:											
Meat / Alternative:											
Tips and Suggestions											

Requirements:

- Minimum of 1 serving vegetables and/or fruit and 1 serving of milk or milk alternatives at every meal
- Minimum of 1 serving of grain products and/or meat or alternative at every meal (a serving from all food groups is ideal)
- Portion sizes for each food group are based on Canada's Food Guide serving sizes and are age appropriate
- Plain tap water is always available

Are additional servings of food available? Yes No If yes, which foods? _____

Part 6. Authorization and Agreement

Application must be **signed by two (2) people**. One signature must be that of the school principal or, in the case of an organization other than a school, by the Executive Director.

The undersigned, being authorized on behalf of the applicant, hereby certify that the above information is true and accurate to the best of their knowledge.

1. _____
Name Title

Signature Date

2. _____
Name Title

Signature Date

Appendix A.**B.1 Calculation of In-Kind Space utilized for Nutrition Program***

*Based on suggested hourly rates and area utilized for providing the nutrition program, for **each program** day, 1 hour of in-kind facility rental should be allocated.

Space utilized	Number of Program Days				
	1	2	3	4	5
Classroom - \$10.00/hour	\$10.00	\$20.00	\$30.00	\$40.00	\$50.00
School Kitchen - \$20.00	\$20.00	\$40.00	\$60.00	\$80.00	\$100.00
Elementary or Secondary Food Service Classroom - \$24.00/hour	\$24.00	\$48.00	\$72.00	\$96.00	\$120.00
Cafeteria - \$50.00/hour	\$50.00	\$100.00	\$150.00	\$200.00	\$250.00
Staff Room - \$15.00/hour	\$15.00	\$30.00	\$45.00	\$60.00	\$75.00

Total Dollar Value per number of Program Days per Week \$ _____

Number of Program Weeks _____

Total Dollar Value of Space/Facility Rental \$ _____
(Value assigned per number of Program days/week X number of Program weeks)

B.1 Total dollar Value of In-Kind Space \$ _____

B.2. Calculation of In-Kind Service Support*

*Based on the suggested hourly rates, for **each program** day, 1 hour of in-kind support for each service should be allocated.

Service	Number of Program Days Per Week				
	1	2	3	4	5
Janitorial Services \$17.00/hour	\$17.00	\$34.00	\$51.00	\$68.00	\$85.00
Principal/Administrator \$60.00	\$60.00	\$120.00	\$180.00	\$240.00	\$300.00
Secretarial \$20.00/hour	\$20.00	\$40.00	\$60.00	\$80.00	\$100.00
Total of service support per number of program days/week	\$97.00	\$194	\$291.00	\$388.00	\$485.00

Total Dollar value per number of program days/week \$ _____

Number of Program Weeks _____

Total Dollar Value of In-Kind Service Support \$ _____
(total dollar value/program days/week X number of program weeks)

B.2 Total Dollar Value of In-Kind Service Support \$ _____

B. Total dollar Value of In-Kind Space and Service Support

(B.1 + B.2) \$ _____

Appendix B.**Nutritious Food Grant Eligibility**

Provincial funding for the program is allocated to local program providers for purchasing nutritious food for children and youth. A program, for the purposes of being eligible for government funding, is not site-based but meal –based. A program is a breakfast, early morning meal, lunch or a snack program.

Universality

- The program is available to all children and youth regardless of their socioeconomic background and ability to pay. The program does not stigmatize or single out children from low-income families.
- All young people are made to feel welcome.

Program Operation

- Existing student nutrition programs are encouraged to operate at least 2 days per week.

Parental Contributions and local fundraising

- The program will inform parents of the costs associated with the program delivery.
- Parents will be asked to contribute based on their ability to pay.
- Local fundraising and partnership development with community sponsors is required to fund the program.

Nutritious food in a safe environment

- The foods offered (whether purchased or donated) are nutritious and follow the SNP Nutrition Guidelines, July 2008.
- The foods offered are inclusive and sensitive to the faiths and cultures of the children and youth and their families.
- Student Nutrition Program facilities must follow public health regulations relating to food premises.
- Student Nutrition Programs must have an awareness of anaphylaxis management and have measures in place, to reduce the risk of accidental exposure and to respond appropriately in an emergency.

Local Program Committee

- A local program committee is established to oversee the administration of the program at the local site.
- Membership on the committee should include but is not limited to: the school principal, teachers and other staff, parents, students, volunteers, public health personnel and other interested stakeholders.
- The committee will be responsible for applying for funding, fundraising, approving the menus and budget, communicating with parents and coordinating volunteers.

Financial Accountability

- School Based programs are required to have an umbrella category called “Student Nutrition Program” within the school’s banking program. Community based programs are required to have a separate bank account in the local program committee’s name.
- The program will provide activity reports at the end of the first quarter (June 30th), third quarter (December 31st) and fourth quarter (March 31st).
- The program will provide financial reports detailing how the funds were spent at the end of the first quarter (June 30th) and third quarter (December 31st).
- The program responds to all requests for additional information as required.
- Receipts must be kept on site.

Data Provision

- The program will provide data to the local service provider and/or HN R.E.A.C.H including the number of children and youth registered or participating at a site and the number of meals/snacks served;
- The program provides the local service provider and/or HN REACH with information identifying additional sources of program funding (e.g. parents, caregivers, corporate sponsors, charities, volunteers, in-kind donations etc); and
- The program responds to all requests for additional information as required.

Program Types

- Programs are meal based not site based.
- Community based programs, both licensed and unlicensed that provide before and after school programs may be eligible for funding if they contribute to children's/youth's school readiness and/or student success.
- The following programs will not be eligible to receive funding for student nourishment programs:
 - Child care facilities because they are mandated to provide meals to the children they serve; and
 - Community Kitchens

Budgeting

Provincial funding for Student Nutrition Programs may contribute up to 15% of the total costs incurred by the local program.

Appendix C.

Anaphylaxis Management in Student Nutrition Programs

Background:

Anaphylaxis is a growing public health issue. In June 2005 the Ontario legislation passed Bill 3, *An Act to Protect Anaphylactic Pupils*. "Sabrina's Law" became effective January 1 2006 and requires that every school board establish and maintain an anaphylaxis policy. School Principals are required to develop individual plans for pupils at risk of

Funded by the Ontario Ministry of Children and Youth Services (MCYS) and administered regionally by Haldimand-Norfolk
R.E.A.C.H.

anaphylaxis. Student nutrition program providers **must** have an awareness of anaphylaxis management and have measures in place to reduce the risk of accidental exposure and to respond appropriately in an emergency.¹

Definition: Anaphylaxis can be defined as “a severe allergic reaction to any stimulus, having sudden onset, involving one or more body systems with multiple symptoms.”¹

Symptoms: Signs and symptoms of a severe allergic reaction can involve any of the following; hives, swelling, nausea, pain, vomiting diarrhea, throat tightness, difficulty swallowing, difficulty breathing, dizziness, fainting or loss of consciousness.

Triggers:

The most common food triggers are peanuts, tree nuts, milk, eggs, fish, shellfish and to a lesser extent, sesame seeds, soy, and wheat. Insect stings from bees, wasps and hornets are also a common trigger.

Avoidance Strategies

Avoidance of a specific allergy is the cornerstone of management in preventing anaphylaxis.¹

School Based Student Nutrition Programs

Bill 3 (Sabrina’s Law) requires that every school board establish and maintain an anaphylactic policy. The **school principal has the responsibility** to develop and maintain the school’s anaphylactic management plan and individual plans for each pupil who has an anaphylactic allergy. School anaphylactic plans will include the following:

- strategies to reduce the risk of exposure to anaphylactic causative agents in classrooms and common school areas
- a communication plan to disseminate information on allergies to parents, students and community members
- education and training sessions for all employees and others who have direct contact with pupils on a regular basis
- individual anaphylactic plan for each student who has an anaphylactic allergy
- A registration process that ensures all parents, guardians and students supply information on life-threatening allergies.
- maintenance of a file for each anaphylactic pupil of current treatment and other information including any prescriptions and instructions and a current emergency contact list¹

Bill 3 requires every school principal to develop an individual plan for each pupil who has an anaphylactic allergy. This plan will include details informing employees and others who are in direct contact with the pupil on a regular basis of the type of allergy, monitoring and avoidance strategies and appropriate treatment.²

Review of these plans and sharing of relevant information should occur at the start of the school year.

Community Based Student Nutrition Programs

The recently published national anaphylaxis guidelines, *Anaphylaxis in Schools & Other Settings*, encourages all childcare facilities to have regular staff training and emergency protocols in place. However, community based nutrition programs in which the “community” of children is constantly changing as well as the “drop in” nature of the program make it very difficult to implement and monitor food policies. ¹The following general recommendations **must** be adopted by all community based student nutrition programs **that deal with Haldimand-Norfolk R.E.A.C.H.** to identify the level of risk and define the roles and responsibilities of program volunteers, parents and nutrition program participants.

¹ Anaphylaxis in Schools and Other Settings

² Bill 3: An Act to Protect Anaphylactic Pupils
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- **Identify individuals at risk:** Community based programs **must** have a registration process in place that ensures all parents, guardians and students supply information on life-threatening allergies. Parental consent **must** be part of this registration process. (Appendix A. sample template)
- **Create an Anaphylaxis Plan:** An anaphylaxis plans that defines roles and responsibilities and includes information about avoidance strategies, volunteer training, 911 protocols and an emergency plan **must** be developed. (See attached materials) Program volunteers, parents and participants **must be informed of** the plan **and shall have it explained to them.**
- **Clarify Roles and Responsibility:** The primary responsibility for allergen avoidance lies with the food-allergic person or parent in the case of younger children.²
- **It is the responsibility of parents with anaphylactic children to identify their children. Community based nutrition programs funded through Haldimand Norfolk R.E.A.C.H. must understand the basics of anaphylaxis and have emergency protocols and staff training in place.**²

For more information:

www.allergysafecommunities.ca

Avoidance Strategies

Avoidance is the cornerstone of preventing an allergic reaction. Much can be done to reduce the risk when avoidance strategies are developed.

¹ Anaphylaxis Management

² Anaphylaxis In Schools and Other Settings

Food Allergens

For food-allergic individuals, the key to remaining safe is avoidance of the food allergen. It must be stressed that very small or minute amounts of certain foods can cause severe reactions when ingested. Even a small amount 'hidden' in a food or a trace amount of an allergen transferred to a serving utensil has the potential to cause a severe allergic reaction.¹

While it is difficult to completely eliminate all allergenic ingredients due to hidden or accidentally introduced sources, it is possible and extremely important to reduce the risk of exposure to the. Effective ingredient label reading, special precautions for food preparations, proper hand washing, and cleaning go a long way toward reducing the risk of an accidental exposure.¹

Parents of food –allergic children are often concerned that the odor or smell of a particular food such as peanut butter will cause a life-threatening or anaphylactic reaction. Inhalation of airborne peanut protein can cause allergic reactions,¹ though usually not systemic anaphylaxis. The odor alone has not been known to cause an anaphylactic reaction.¹

The following guidelines are recommended to reduce the risk of exposure for children/youth with food allergy:

1. Adult supervision of young children while eating is strongly recommended.
2. Individuals with food allergy should not trade or share food, food utensils, or food containers. They should also place meals on a napkin or personal placemat.
3. Parents should work closely with Student Nutrition Program volunteers/staff to ensure that food being served is appropriate.
4. Ingredients of food brought or donated should be clearly identified. Check with your local health unit for guidelines on donated foods.
5. All children should be encouraged to comply with a 'no eating' rule during daily travel on school buses.
6. All children should wash their hands before and after eating.
7. Surfaces such as tables, toys, etc. should be carefully cleaned of contaminating foods. Contact your local health unit for information on safe food handling.¹

For further information contact Anaphylaxis Canada or www.allergysafecommunities

Volunteer Training for those involved with Identified Anaphylactic Children

Despite best avoidance efforts, accidents can and do happen. Being prepared for the unexpected is always necessary. In the event of a severe allergic reaction, epinephrine is the treatment or drug of choice to treat

¹ Anaphylaxis in Schools & Other Settings

¹ Anaphylaxis in Schools & Other Settings

anaphylaxis. There are no contraindications to the use of epinephrine for a life threatening allergic reaction. Simply put, this means that in normally healthy individuals, epinephrine will not cause harm if given unnecessarily. The Canadian Society of Allergy and Clinical Immunology recommends that parents of children at risk of a life threatening allergic reaction sign a consent form allowing the use of epinephrine in an allergic emergency.²

All Individuals entrusted with the care of children need to have familiarity with basic first aid and resuscitative techniques. Contact you local public health unit, Anaphylaxis Canada, VON or the Red Cross for information on training programs.

All individuals/volunteers in regular contact with children at risk of anaphylaxis **must** participate in formal training on how to use epinephrine auto-injectors. Standardized anaphylaxis training should be **undertaken** once a year at a minimum, preferably around the start of the school year. Training should include ways to reduce the risk of exposure, recognition of signs and symptoms of anaphylaxis and when and how to give the epinephrine auto-injector. Contact you local public health unit, Anaphylaxis Canada, VON or the Red Cross for information on training programs. For on-line anaphylactic training information, go www.eworkshop.ca/allergies

(There must be at least one person per team who has had formal training)

Emergency 911 Protocol (to be posted beside telephone)

1. Dial 911 or Emergency Phone Number

² Anaphylaxis in Schools & Other Settings

2. My name is _____

3. We are located at:

Address: _____

Nearest major intersection: _____

4. Tell them: _____

5. Give the following information about the child:

- level of consciousness
- breathing
- bleeding
- age

6. My phone number is: _____

7. The closet entrance for the ambulance is on:

8. Do you need any more information?

9. How long will it take you to get here?

10. Tell them: “A staff member will meet you at the entrance to provide further information.”

Call the parents/guardians emergency contact.

11. **Call the parents/guardians emergency contact number.**

Student Nutrition Program Registration

Name of Student: _____	Age: _____
School: _____	Grade: _____
Classroom Teacher: _____	
Name of parent and/or guardian: _____	Home Phone # _____
	Work Phone # _____
Emergency Contact Person: _____	Phone # _____

Program Registration

I. _____
(parent or guardian)

agree to let _____ take part in
(name of student)

the _____ nutrition program held at _____
(address of program)

Please complete the following, listing any special health or dietary concerns for your child.

Medical conditions: _____

Food allergies: _____

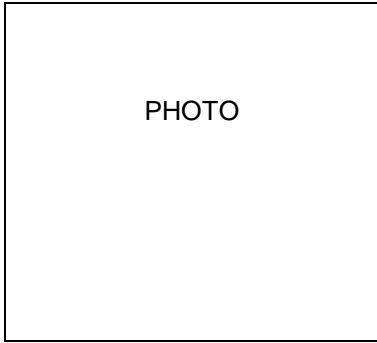
Food restrictions: _____

(signature of parent/guardian) Date: _____

Sample Anaphylaxis Emergency Plan: _____ (name)

This person has a potentially life-threatening allergy (anaphylaxis) to:

(Check the appropriate boxes)



- Peanut
- Tree nuts
- Egg
- Milk
- Other: _____
- Insect stings
- Latex
- Medication: _____

Food: **The key to preventing an anaphylactic emergency is absolute avoidance of the allergen. People with food allergies should not share food or eat unmarked / bulk foods or products with a “may contain” warning.**

Epinephrine Auto-Injector: Expiry Date: _____ / _____

Location of Auto-Injector(s): _____

Asthmatic: Person is at greater risk. If person is having a reaction and has difficulty breathing, give epinephrine auto-injector before asthma medication.

A person having an anaphylactic reaction might have ANY of these signs and symptoms:

- **Skin:** hives, swelling, itching, warmth, redness, rash
- **Respiratory (breathing):** wheezing, shortness of breath, throat tightness, cough, hoarse voice, chest pain/tightness, nasal congestion or hay fever-like symptoms (runny, itchy nose and watery eyes, sneezing), trouble swallowing
- **Gastrointestinal (stomach):** nausea, pain/cramps, vomiting, diarrhea
- **Cardiovascular (heart):** pale/blue colour, weak pulse, passing out, dizzy/light headed, shock
- **Other:** anxiety, feeling of “impending doom”, headache

Early recognition of symptoms and immediate treatment could save a person’s life.

Act quickly. The first signs of a reaction can be mild, but symptoms can get worse very quickly.

1. **Give epinephrine auto-injector** (e.g. EpiPen or Twinject™) at the first sign of a reaction occurring in conjunction with a known or suspected contact with allergen. Give a second dose in 10 to 15 minutes or sooner IF the reaction continues or worsens.
2. **Call 911.** Tell them someone is having a life-threatening allergic reaction. Ask them to send an ambulance immediately.
3. **Go to the nearest hospital,** even if symptoms are mild or have stopped. Stay in the hospital for an appropriate period of observation, generally 4 hours, but at the discretion of the ER physician. The reaction could come back
4. **Call parent or guardian.**

Emergency Contact Information

Name	Relationship	Home Phone	Work Phone	Cell Phone

The undersigned, parent or guardian authorizes any adult to administer epinephrine to the above-named person in the event of an anaphylactic reaction, as described above. This protocol has been recommended by the child’s physician. The training regarding the administration of the emergency medication was provided by:

- parent doctor Nurse Red Cross Emergency Training other _____

Parent/Guardian Signature

Date

Physician Signature

Date:

Adapted from Allergy Safe Communities, www.allergysafecommunities.ca/assets/emergencyplan_eng.pdf