

# NSP Allergy Action Plan

(To be posted in the classroom)

## Action Plan:

**(Plan should include how allergy food is labeled/identified coming into the classroom, what to do if there are substitutes in the classroom, etc.)**

Use form Inventory (Allergy Ingredient) Check and Substitutions during meal times. The 1<sup>st</sup> checker is the nutrition service provider and the 2<sup>nd</sup> checker will be a classroom staff member serving the food.

NSP Signature \_\_\_\_\_ Date \_\_\_\_\_

Lead Teacher Signature \_\_\_\_\_ Date \_\_\_\_\_

Site Director Signature \_\_\_\_\_ Date \_\_\_\_\_