FOOD ALLERGY MANAGEMENT PLAN

LVISD SUPPORTS STUDENTS AT RISK FOR ANAPHYLAXIS

A food allergy is a potentially serious immune-mediated response that develops after ingesting or coming into contact with specific foods or food additives. Anaphylaxis is a rapidly progressing, life-threatening allergic reaction. Caring for children with diagnosed food allergies at-risk for anaphylaxis in the school setting requires a collaborative partnership with the students, parents, healthcare providers and school staff.

Currently, management of food allergies consists of educating children, parents and care providers, including school personnel, about strict avoidance of the food allergen, recognizing the signs and symptoms of an allergic reaction, and initiating emergency treatment in case of an unintended ingestion or exposure. In order to address the complexities of food allergy management in schools, it is important that students, parents/caregivers, and school personnel work cooperatively to create a safe and supportive learning environment (National School Boards Association, 2012).

**Responsibility:**

School Nurse, Campus Administrators, Teachers, Bus Drivers, Food Services, Custodial staff, Students, and Parents

**Other** **applicable** **policies**: FFAF (legal)

**Care** **of** **the** **Student** **with** **Food** **Allergies** **At-Risk** **for** **Anaphylaxis**

**Purpose:**

To provide guidance in the management of students with food allergies at-risk for anaphylaxis at school

**Background:**

A food allergy is an abnormal response to a food, triggered by the body’s immune system. Symptoms of a food induced allergic reaction may range from mild to severe and may become life threatening. Reactions vary with each person and each exposure to a food allergen and the severity of an allergic reaction is not predictable. School personnel should be ready to effectively manage students with known food allergies and should also be prepared to recognize symptoms of an allergic reaction in both diagnosed and undiagnosed students in order to respond to the student’s emergency needs.

**Identification of a student with food allergies at risk for anaphylaxis**

3. Environmental Controls will be established on the campus through:

* At Elementary and Intermediate campuses: signs will be posted on classroom

 doors notifying staff and visitors of the possibility that sometime during the day, a

 student with the listed food allergies will be in the room.

* Offering an “allergen free table” in the cafeteria, if needed

•Implementing appropriate cleaning protocols in the school with special attention given to high-risk areas

•Encourage hand washing before and after meals

**PROCEDURE:**

Notification of a food allergy

Upon enrollment of a new student and again annually at the beginning of each school year, the parent or guardian will complete the Student Health Information Form. If they indicate there is a food allergy that rises to the level of potentially putting the student at-risk for anaphylaxis they will be given:

1. Child Food Allergy Action Plan

2. Based on information provided by the parents and upon receipt of the *Food* *Anaphylaxis* *Emergency* *Action* *Plan*, the school nurse will:

•Develops an **Emergency** **Action** **Plan** **(EAC).**

•Develops the **Individualized** **Health** **Care** **Plan** **(IHP)** for Students with Food Allergies At-risk for Anaphylaxis

•Initiate or assists in the 504 process, if appropriate

•For students without an EAC, campus nurses will follow NASN’s **Suggested** **Emergency** **Nursing** **Protocol** **for** **Students** **with** **Possible** **Food** **Allergy** **Symptoms** **Who** **Don’t** **Have** **a** **Personal** **Emergency** **Care** **Plan.**

•The campus nurse collaborates with parents, administration, child nutrition, teachers, bus drivers and custodial staff to implement strategies to reduce the student’s risk of exposure to diagnosed allergen.

•After an anaphylaxis reaction, campus nurse will complete an Anaphylaxis Event and/or Epinephrine Administration Review form. Within ten working days, a copy must be sent to the physician or person who has been delegated prescriptive authority under Occupations Code Chapter 157 and has prescribe epinephrine auto-injectors in the name of a school district in accordance with law.

6. In the rare event of a fatal reaction, the district’s crisis plan will be activated.

5. In the event of an anaphylactic event, a post exposure conference will be held on the campus. The following will be addressed in the debriefing:

•Identification of the source of the allergen exposure •Steps to prevent future exposure

•Review allergy action plan

•Interview of the student and witnesses regarding events leading up to incident •Work with Child Nutrition if allergen was due to food served by the school

•Review EAP/IHP/504 plan(s)

•Replacement of epinephrine if used at school

•in: Child Specific Training: This review is for all employees who are associated with the student including but not limited to the classroom teacher(s), cafeteria personnel, club sponsors, coaches and before/after school care givers. Review will cover the following subjects:

▪Specific students at risk for anaphylaxis

▪Planning for students who do not have epinephrine at school ▪Implementation of EAP/504 plan(s)

▪Communication procedures for initiating emergency protocols, including substitute staff.

▪Environmental control factors including hand washing and cleaning procedures

•Training school personnel in the administration of an epinephrine auto-injector must be completed annually; provided in a formal training session or through online education; and include information on recognizing the signs and symptoms of anaphylaxis, administering an epinephrine auto-injector, implementing emergency procedures, if necessary, after administering an epinephrine auto-injector, and properly disposing of used or expired epinephrine auto-injectors. A district shall maintain records on the required training. (Education Code 38.210)

4. School nurse provides/coordinates education and training for school personnel. • Level I training: overview training will be conducted annually at the

 beginning of the school year.

• Training: This includes district wide education to all school personnel on every

 campus. Training will cover the following subjects:

▪Most common food allergens

 ▪Importance of environmental controls

▪Signs and symptoms of an anaphylactic reaction ▪How to use an EAP

▪How to administer epinephrine

**Snack time/Lunchtime:**

•Establish processes to ensure that the student with life-threatening food allergies eats only what she/he brings from home and/or is known to be safe.

•Encourage hand washing before and after snacks and lunch. *Alcohol-based* *hand* *sanitizers* *are* *NOT* *effective* *in* *removing* *allergens* *from* *hands.*

•Prohibit students from sharing or trading food.

•Encourage parents/guardians to send a box of “safe” snacks for their child.

**Classroom Activities:**

•Avoid use of foods for classroom activities (e.g., arts and crafts, counting, science projects, parties, holidays and celebrations, or other projects).

•Welcome parental involvement in organizing planning class parties and special events.

•Use non-food items such as stickers, pencils, etc. as rewards instead of food.

**Classroom:**

•Complete annual and child specific Food Allergy training.

•Review the Emergency Action Plan (EAC) for your student.

 •Keep accessible the EAC with a photo of the student

•Ensure that volunteers, student teachers, aides, specialist and substitute teachers are informed of the student’s food allergy and take necessary safeguards.

•Leave information in an organized, prominent and accessible format for the substitute teacher(s) and other appropriate staff.

•Be aware of how the student with food allergies is treated; enforce rules on bullying

•Work with the school nurse to educate other parents about the presence and needs of students with life-threatening food allergies in the classroom.

•Inform parents and school nurse of any of any school events where food will be served. •Consider eliminating or limiting food in classrooms and other learning environments.

•Avoid isolating or stigmatizing a student with food allergies

•Ensure that a student suspected of having an allergic reaction is accompanied to the clinic by an adult (preferably) or student.

•Do not put a student on the bus if there are any signs or symptoms of an allergic reaction.

**Severe** **Food** **Allergy** **–** **Actions** **for** **Classroom** **Teacher**

**Field Trips:**

•Give the nurse at least a two-day notice prior to field trips.

•Ensure the EAP and the student’s epinephrine is taken on the field trip and all outings. •Collaborate with parents of student with food allergies when planning field trips.

•If field trip timing is during lunch, plan for reduction of exposure to the allergen

•Invite parents of students at risk for anaphylaxis to accompany their child on school trip. The parent’s attendance must not be a condition on the student’s presence on the trip.

•Consider ways to wash hands and encourage hand washing before and after eating (e.g. provision for hand wipes, etc.)

**The student is (as developmentally appropriate):**

•Immediately notifying an adult if they eat something they believe may contain a food to which they are allergic.

•Not eating anything with unknown ingredients or known to contain any allergen.

•Be proactive in the care and management of their food allergies and reactions

•Not to trade food with others.

•Provide emergency contact information and *update* *when* *needed*.

•Meet with the school nurse and other school personnel as needed for post-exposure conference.

•Work with your child in the self-management of their food allergy including: o Safe and unsafe foods

o Strategies for avoiding exposure to unsafe foods o Symptoms of allergic reactions

o How and when to tell and adult they may be having an allergy-related problem o How to read food labels (age appropriate)

o If age appropriate, the importance of carrying and administering their personal asthma and anaphylaxis medications as prescribed.

•Work with the School Nurse to develop and review the EAP and IHP as well as discuss accommodations the student will need throughout the school day, during school-sponsored activities, and on the school bus.

•Provide properly labeled medications and replace medications after use or upon expiration.

* Notify the school of the student’s allergies in accordance with TEC, Section 25.022.
* Complete the Food Allergy Action Plan provided by the school
* If parent wants the student to carry an Epi-pen, **Authorization For Self-Carry/Administration of Epi-Pen at School and After--School Activities** form must be completed and returned to school.

**The** **family** **is** **required to:**

**Severe** **Food** **Allergy** **–** **Actions** **for** **Family** **&** **Student**

•Use only non-latex gloves.

•Do not allow nuts of any kind in any of the food served by the cafeterias.

•Review and follow sound food handling practices to avoid cross-contamination with potential food allergens.

•Follow cleaning and sanitation protocol to avoid cross-contamination.

•Provide Overview anaphylaxis training to all child nutrition personnel.

•Encourage teachers to not use food as rewards and manipulatives in classrooms.

**Severe** **Food** **Allergy** **-** **Actions** **for** **School** **Administrators**

**Severe** **Food** **Allergy** **–** **Actions** **for** **Child** **Nutrition**

Campus administrator should:

•Collaborate with School Nurse to ensure a process is in place for identifying students with food allergies who are at-risk for anaphylaxis.

•Ensure that staff completes Anaphylaxis Food Allergy training annually.

•Ensure that a plan is in place to designate a table(s) as allergy free in the cafeteria, if appropriate.

•Be prepared to take emergency action for a student in the cafeteria in the event of an allergic reaction.

•Provide access of the menu to the parent/guardian of students with food allergy, and notification if menu changes. Consider how to provide specific ingredient lists to parents upon request.

•Maintain contact information for manufacturers of food products (Consumer Hotline).

•Train all child nutrition staff and substitutes to read food labels and recognize food allergies.

•After receiving notice from nurse, enter allergy into nutrition billing system so cashiers have access to what foods are not to be served. Cashiers are the last line of defense in the cafeteria to a student choosing the wrong food.

•Review the legal protections for students with life-threatening allergies and ensure that students with severe food allergies that participate in the federally funded school meal program are given safe food items as outlined by the physician’s signed statement.

•Read all food labels and recheck routinely for potential allergens.

**Severe** **Food** **Allergy** **–** **Actions** **for** **Custodial** **Staff**

•Collaborate with the School Nurse to be aware of areas that may require specialized cleaning.

•Clean desks, tables, chairs, and other surfaces with special attention to designated areas for students with food allergies who are at-risk for anaphylaxis.

Custodial staff should:

•Attend/participate in annual Level I Anaphylaxis Food Allergy training.

•Promote and monitor good hand washing practices.

•Restrict the use of foods that are known allergens.

•Discourage trading or sharing of food and utensils.

•Collaborate with School Nurse to ensure coaches/sponsors know if the student is self-carrying epinephrine and/or where the student(s) epinephrine is located on the campus.

•Collaborate with School Nurse to ensure coaches/sponsors of the activity receive Food Allergy training.

•Obtain a copy of the EAP from the school nurse for students with food allergies who are at-risk for anaphylaxis who participating in the activity.

Coaches/sponsors should:

**Severe** **Food** **Allergy** **–** **Actions** **for** **Coaches/Athletic Trainers/Sponsors** **of** **Before** **and** **After** **School** **Sponsored** **Activities**

•Ensure that bus drivers know how to contact EMS in the event of an emergency.

•**Maintain** **a** **policy** **of** **no** **consumption** **of** **food** **or** **drinks** **on** **the** **buses.**

•Obtain a copy of the EAP from the school nurse for students with food allergies who are at-risk for anaphylaxis who ride the bus,

•Provide Level II Food Allergy training to bus drivers who have a student with food allergies who are at-risk for anaphylaxis on their route.

Transportation department should:

•Provide Level I Anaphylaxis Food Allergy training to all bus drivers.

**Severe** **Food** **Allergy** **–** **Actions** **for** **Transportation** **Department**

 NO

**Anaphylaxis Planning Algorithm**

Above-referenced forms returned and medication provided

* Call parent and remind that the forms and/or meds are needed.
* If forms still not returned, send Action Plan Letter home via folder and regular mail.

The school nurse will:

•Refer the student to the 504 committee

•Develop an IHP

•Conduct Level II staff training

•Post allergy aware signs on (ES and IS campuses)

•Designate allergy free table (if requested)

•Provide classroom teachers with a copy of the Food Allergy Action Plan

•Keep the epinephrine in an unlocked, accessible cabinet.

No further action needed

YES

YES NO

Nurse notifies the following:

* Child Nutrition – Email Director of Food Services so allergy can be entered into their child nutrition and cash register system that allows cashier to see allergy warnings as student goes through the line.
* Class Room Teacher(s) – notify teacher, provide allergy door card and arrange for Level II training.
* Transportation – if student rides the bus, notify transportation and send a copy of

 *School* *Anaphylaxis* *Emergency* *Action* *Plan*

* Custodian – review cleaning procedures in common areas

Provide parent with the following documents as appropriate:

* Medication Administration Form
* Epi-pen Authorization Form (for self-carry only)
* Food Allergy Action Plan

* Student enrolled in school.
* Parent writes that their student has a food allergy on Student Health Information Form

Nurse enters the information into TxEIS Student Health section

