

FOOD AND SEVERE ALLERGY MANAGEMENT PLAN

OBJECTIVES:

- o To define the process of identifying, managing and ensuring continuity of care for students with life-threatening allergies.
- o To maintain the health and protect the safety of students who have life-threatening allergies during the school day.
- o To assure that interventions, individualized healthcare plans (IHPs), and emergency anaphylaxis action plans are based on medically accurate information and evidence- based practices, and comply with district policy and state laws (FFAF LEGAL; TEC §38.015; TEC §38.0151; TEC 22.0022)

OVERVIEW AND RATIONALE:

Some allergens such as food, medication, insect stings and latex can trigger a severe, systemic allergic reaction called anaphylaxis. Anaphylaxis is a lifethreatening allergic reaction, and is considered an emergency.

Allergies, especially food allergies, are a significant issue in schools. The most common life-threatening allergies are to foods, but environmental and chemical allergies may also pose a health risk for some students or staff members. The most dangerous symptoms include breathing difficulties and a drop-in blood pressure or shock, which is potentially fatal.

The best way to prevent allergic reactions is to avoid the allergen. The risk of exposure to allergens, including accidental exposure to foods, can be reduced in the school setting with cooperation between parents, students, healthcare providers, school nurses, and school staff.

Epinephrine (adrenaline) is a quick-acting hormone that works to relieve all of the physiological processes that occur with anaphylaxis. The use of auto-injector epinephrine is recommended in the emergency treatment of an anaphylactic reaction, and designated school staff responsible for administering emergency medications for anaphylactic reactions must be familiar with the operation of these devices used by the students in the school building.

PROCEDURAL GUIDELINES

IDENTIFICATION OF A STUDENT WITH FOOD ALLERGIES OR ENVIRONMENTAL ALLERGIES AT RISK FOR ANAPHYLAXIS:

Notification of a food allergy:

- o In accordance with Texas Education Code Chapter 25, Section 25.0022, the District requests annual disclosure of all food allergies by the parent or guardian on the *Student Health History* form. This form will be available in enrollment packets and from the campus nurse. This form request disclosure of a student's food allergies, risk of anaphylaxis and/or prescribed injectable epinephrine (EpiPen) or other medications in order for the District to take precautions regarding the student's safety.
- O When a student's severe food allergy, risk of anaphylaxis and/or prescribed EpiPen is disclosed by the parent or guardian, then an *Anaphylaxis Action Plan* should be completed by the **parent and student's physician** and be submitted to the nurse. Parents and guardians may obtain a copy of the *Anaphylaxis Action Plan* from the campus nurse.
- O A special diet request form (*Certification of Disability and/or Allergy for Special Dietary Needs*) must be completed by the **parent and physician** for any modifications or substitutions of meals purchased through DISD cafeteria due to food allergies. This form is available from the campus nurse. Completed forms must be submitted to the nurse. The nurse will then contact the cafeteria staff to initiate prescribed meal modifications.
- Upon receipt of the completed *Anaphylaxis Action Plan* the school nurse will:
 - o Develop an IHP for management of the student's food/severe allergy.
 - o Enter the disclosed allergy as a Health Condition in Ascender Health Record and add to the Alert box as needed.
 - o Initiate the 504 process, if appropriate.
 - Notify the Director of Child Nutrition and the campus cafeteria manager of completed Certification of Disability and/or Allergy for Special Dietary Needs forms.

CREATING AN ALLERGEN-SAFE SCHOOL ENVIRONMENT

- Campus staff will complete <u>Level I Awareness Training for Food/Life-threatening</u>
 <u>Allergies</u>. This training will cover the following subjects:
 - o Most common food allergens and environmental allergens.
 - o Importance of environmental controls and avoidance.

- o Signs and symptoms of an anaphylactic reaction.
- o How to administer EpiPen.
- Designated staff will complete Level II-Specialized Training for Food/Life-threatening Allergies. "Designated staff" includes any staff member who is responsible for a student with a severe allergy during any part of their school day- including school sponsored events, programs, extra- curricular programs, or athletics.
- Training will cover the following subjects:
 - o More comprehensive Level information.
 - o Individualized information for each student with a food or other severe environmental allergy.
 - o How to administer EpiPen.
 - o Planning for students who do not have EpiPen at school.
 - o Environmental control factors including handwashing.
 - o Working with Emergency Medical Services (EMS).
 - Substitute preparedness planning.
- Allergen foods will be eliminated from classrooms and other learning environments used by children with food allergies at risk for anaphylaxis at all campuses.
- Pre- packaged food items with readable ingredient lists will be required for projects, activities and celebrations in elementary, intermediate, and junior high classrooms of students with food allergies at risk for anaphylaxis so potential food allergens can be identified.
- Appropriate cleaning protocols will be followed on campuses, with special attention to identified high-risk food allergy areas (i.e. cafeteria tables).
- Any principal-designated, Level II trained staff on each campus will be trained in emergency medication administration for anaphylaxis in the nurse's absence.
- A post exposure conference will be held if an anaphylactic event occurs.
- Information concerning the DISD *Food and Severe Allergy Management Plan* will be available on the district website-Health Services Department or from the Health Services Coordinator and/or the campus nurse.

IDENTIFICATION OF STUDENTS AT RISK FOR ANAPHYLAXIS

- The nurse will provide and collect a *Student Health History* form for each student on her/his campus at the beginning of the school year, or upon enrollment. The *Student Health History* form will request information about a student's allergies to enable parents to disclose allergy information.
- The nurse will review all *Student Health History* forms in a timely manner.

- The nurse will contact the parents of any student who has been identified to have a severe allergy, risk for anaphylaxis, and/or prescribed injectable epinephrine. The nurse will:
 - Request completion of the *Anaphylaxis Action Plan* by the identified student's healthcare provider and parent.
 - Anaphylaxis Action Plans generated by the student's healthcare provider (physician, physician assistant, advanced practice nurse) are acceptable if they provide adequate information and consent.
 - o Obtain written parental consent for all medications prescribed.
 - Request all medications be provided by the parent in a properly labeled container and are unexpired.
 - o If no *Anaphylaxis Action Plan* is returned, but the parent requests and provides allergy medication (*TEC 22.052; FFAC Legal; FFAC Local*):
 - The nurse will enter allergy information into the student's Emergency Information Alert box in Ascender Health Records.
 - The nurse will enter the disclosed allergy as a Health Condition in Ascender Health Record including:
 - Specific food or substance the student is allergic;
 - Signs/symptoms of the allergic reaction; and
 - History of previous allergic reactions.
- Documentation from a physician of a food allergy will be placed in the student's health file, and in Ascender Health record. The nurse may enter appropriate notes about a student's possible food allergy in Ascender Health Record, including a notation that the parent has notified the school district of a student's possible food allergy. (*TEC 22.0022*)

ACTIONS FOR ANAPHYLAXIS

POSSIBLE SYMPTOMS OF AN ALLERGIC REACTION SEVERE SYMPTOMS:

LUNG: Short of breath, wheeze, repetitive coughing **HEART**: Pale, blue, faint, weak pulse, dizzy, confused

THROAT: Tight, hoarse, trouble breathing or swallowing, repetitive clearing of throat

MOUTH: Obstructive swelling (tongue or lips), drooling, blueness around mouth

SKIN: Many hives over body **GUT**: Vomiting, crampy pain

MILD SYMPTOMS:

MOUTH: Itchy mouth

SKIN: A few hives around mouth/face, mild itching

GUT: Mild nausea/discomfort

RESPONSE TO AN ALLERGIC REACTION

Any staff member who becomes aware that a student is having an allergic reaction:

- **1.** Stay with the student. NEVER LEAVE STUDENT UNATTENDED
- **2.** Administer EpiPen (call for Nurse or trained personnel immediately). It is important not to delay the administration of EpiPen.
- 3. Contact 911
- **4.** Contact the parents
- **5.** If the student is not conscious, turn student on his/her side to keep the airway clear and prevent aspiration of fluids into the lungs
- **6.** Allow the student to sit upright (or ease student to the floor, if necessary)
- 7. Loosen tight clothing and place something soft and flat under head
- ${f 8.}\,$ Move other students away from the area if possible
- **9.** Document incident and give to Nurse

Note: Effects of EpiPen last only 10-20 minutes. Emergency medical care (911) must be obtained immediately.

RESPONSIBILITIES OF FAMILY AND STUDENT

- Notify the campus nurse of the student's allergies in accordance with TEC, Section 25.022. Use of the DISD Student Health History form is the preferred method of notification.
- Complete the *Anaphylaxis Action Plan* (parent and physician) and return to the campus nurse.
- Contact the nurse to review the *Anaphylaxis Action Plan* and provide input in developing the student's IHP. Discuss accommodations the student may need throughout the school day or during school-sponsored activities.
- Collaborate with the nurse regarding school sponsored before/after school activities your student participates in (i.e. after school program, athletics, cheer, etc).
- Collaborate with the nurse regarding any accommodations the student may need during these before/after school activities.
- Provide properly labeled medications and replace medications after use or upon expiration.
- Continue to educate your child in the self-management of their food allergy including:
 - Safe and unsafe foods.
 - o Strategies for avoiding exposure to unsafe foods.
 - o Symptoms of allergic reactions.
 - How and when to tell an adult they may be having an allergy-related problem.
 - o How to read food labels (age/developmentally appropriate).
 - o If determined by physician, parent and nurse to be competent to self-administer emergency anaphylaxis or asthma medications, the importance of keeping their emergency medication(s) with them and ongoing support of proper skills and knowledge to use prescribed emergency medication, including EpiPen (*TEC 38.015*; *FFAC Legal*)
 - o Importance of not sharing their medications with anyone.
 - Parent attendance on elementary field trips is welcome. Notify the nurse if you are unable to attend a field trip with your child so preparation for emergency medications can be made.
 - Provide nurse/campus emergency contact information and update as needed.

RESPONSIBILITIES OF THE STUDENT

- No trading food with others.
- Avoid eating anything with unknown ingredients or known to contain any allergen.

- Be proactive in the care and management of their food allergy and reactions (as age/developmentally appropriate).
- Immediately notify an adult if they eat something they believe may contain a food to which they are allergic.

RESPONSIBILITIES OF CAMPUS ADMINISTRATION

- Oversee the administration of the DISD *Food and Severe Allergy Management Plan* on the campus.
- Designate staff (Level II) who will be trained to respond to exposure or allergic reactions and administer EpiPen or medications when a nurse is not available.
- Assure annual training compliance and provide opportunities for Level I and Level II- Food/Life-threatening Allergies for staff annually.
- Ensure that designated staff complete Level I and Level II- Food/Life-threatening Allergies annually.
- Offer professional development for staff regarding confidentiality and compliance with FERPA to prevent open discussion of specific students.
- Communicate expectations to staff regarding treatment of students with food or other allergies. A food-allergic student should not be referred to as "the peanut kid", "the bee kid" or any other name related to the student's condition.
- Ensure that administrative staff, campus nurse and, athletic coaches/sponsors, PE teacher(s), cheerleading sponsor(s), are current in CPR/AED certification.
- Ensure that a food-allergic student is included in all school activities (students should not be excluded from school activities solely based on their food allergy).
- Ensure that teachers have a plan in place and it is adhered to in notifying substitute teachers that they have a student with food allergies who is at-risk for anaphylaxis in their classroom.
- Ensure that an area is designated as allergy-aware (No Nut or No Allergen Zones) in the cafeteria if needed.
- Ensure that appropriate cleaning of allergy-aware areas in cafeteria is being followed.

RESPONSIBILITIES OF THE NURSE

- Implement the administration of the DISD *Food and Severe Allergy Management Plan* on the campus in consultation with the campus administrators, prescribing physicians, Special Education staff and 504 coordinators when appropriate.
- Provide and or Coordinate Level I and Level II Food/Life-threatening Allergies annually for staff.

- Maintain documentation of staff training including principal designation and appropriate training/skills checklists (e.g. Oral Medications, Inhaled Medications, EpiPen, etc.).
- Review submitted annual *Student Health History* forms in a timely manner. Contact parents/guardians who have indicated their student has a food allergy and have not submitted a completed *Anaphylaxis Action Plan* for their student. Request completion of the action plan.
- Review submitted *Anaphylaxis Action Plans* of students (or completed *Permission to Administer Medication* forms for those who haven't submitted an allergy plan).
- Collaborate as needed with the parents/guardians in reviewing *Anaphylaxis Action Plan/Medication Permission Forms* and creating IHP's.
- Notify teachers on the student's schedule, when an *Anaphylaxis Action Plan* has been added or modified for a student.
- Notify Child Nutrition and 504 coordinators of a student with a severe food or environmental allergy as needed and provide a copy of the *Anaphylaxis Action Plan* as appropriate.
- Review and modify IHPs, 504 plans and IEPs annually and as needed.
- Coordinate and or Train principal-designated Level II trained staff annually in responding to exposure or allergic reactions and administration of EpiPen and/or medications when a nurse is not available.
- Ensure that emergency life-saving medication (EpiPen) is properly labeled and stored in an accessible (does not have to be locked during school hours) and dates have not expired.
- Coordinate with Principals/Teachers and/or coaches on plans of care for students with severe allergies and access to any emergency medications for student if needed.
- Ensure that a Level II trained staff member attends field trips or school outings if parents are not in attendance.
- Participate in campus post anaphylaxis conference.
- When appropriate provide letter home to classroom regarding food or other severe allergies.
- When appropriate provide educational information to students in classroom regarding food or other severe allergies.

RESPONSIBILITES OF THE CLASSROOM TEACHER

- Complete Level I and/or Level II Food/Life-threatening Allergies annually.
- Review student(s)' *Anaphylaxis Action Plan* and/or IHP with the campus nurse. Understand an implement the *Anaphylaxis Action Plan* for your student(s). Ask the nurse for any clarification needed regarding plan(s).
- Ensure that all substitute individuals, special program teachers, etc. are informed of the student's food or severe allergy, including access to 1-page signs/symptoms of severe allergic reaction (anaphylaxis) form.

- Assure a plan is in place for substitutes and access to emergency plans and signs/symptoms of severe allergic reaction are readily available.
- Eliminate identified allergens in classroom of student with food allergies at risk for anaphylaxis.
- As provided by the campus nurse, send District letter to parents/guardians of classmates
 of a food-allergic student who is at risk for anaphylaxis, explaining any restricted allergen
 foods in the classroom.
- Inform parents and campus nurse of any events where food will be served.
- Enforce district policy on bullying related to food or other allergens.
- Know the campus communication plan with the front office and/or campus nurse.
- Ensure that student suspected of having an allergic reaction is accompanied by an adult to the clinic.
- Do not put a student on the bus if there are any signs or symptoms of an allergic reaction, or if a potential exposure has occurred.

Classroom Activities:

- Ensure that a food-allergic student (or any student with a life-threatening allergy) is included in all school activities. Students should not be excluded from school activities solely based on their allergy.
- Allow only pre-packaged food items with complete ingredients lists in the classrooms of students with food allergies at risk for anaphylaxis. This includes projects, activities and celebrations so that potential food allergens can be identified.
- Use non-food items such as stickers, pencils, etc. as rewards instead of food.

Snack time/Lunchtime:

- Assist students with life-threatening food allergies in monitoring that ONLY foods from home or foods purchased in the cafeteria are consumed. Visitors may only bring food for their own family members.
- Promote and monitor good handwashing practices before and after snacks and lunch and anytime potential allergens may have been touched. *Alcohol-based hand sanitizers are NOT effective in removing allergens from hands.*
- Prohibit students from sharing or trading food.
- Encourage parents/guardians to send "safe" snacks for their child.

Field Trips:

- Give the nurse at least a TWO week notice prior to field trips for necessary preparation.
- Ensure that the *Anaphylaxis Action Plan* and the student's prescribed EpiPen are taken on field trips. **Call 911 if an allergic reaction occurs and/or EpiPen is administered.**
- Collaborate with parents of student with food allergies when planning field trips.

- Consider eating on field trips and plan for reduction of exposure to a student's lifethreatening food allergy.
- Enforce DISD procedure of no eating/drinking on the bus except for water. Special
 considerations may be given for trips of extended duration or unique circumstances
 involving meal schedules.
- Invite parents of students at risk for anaphylaxis to accompany their child on school trips, and/or to act as a chaperone; however, the student's safety and/or attendance must be assured regardless of the parent's presence on the trip.
- Collaborate with the nurse to ensure at least one staff member on the field trip is trained in recognizing signs and symptoms of life-threatening allergic reactions and is trained to use an EpiPen.
- Consider availability of handwashing facilities and encourage handwashing before and after eating. Provision of hand wipes is acceptable in lieu of handwashing facilities.

RESPONSIBILITIES OF CHILD NUTRITION DIRECTOR

- Provide Level I- Food/Life-threatening Allergies Awareness training to food service staff annually. Maintain documentation of trained staff.
- 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 programs are given safe food items as outlined by the physician's signed statement.
- Upon receipt of diagnosis of a food allergy from a healthcare provider, make appropriate substitutions or modifications for meals served to students with food allergies, as specified by the healthcare provider/prescribing physician.
- Train food service staff and their substitutes to read product food labels and recognize food allergen as needed.
- Maintain contact information for manufacturers of food products (Consumer Hotline).
- Review and follow sound food handling practices to avoid cross-contamination with potential food allergens.
- Follow cleaning and sanitation protocol to avoid cross-contamination.
- Maintain current menus via the website with notifications of any menu changes. Provide specific ingredient lists to parents upon request.
- Be prepared to take emergency action for a student in the cafeteria in the event of an allergic reaction.

RESPONSIBILITY OF COACHES, SPONSORS AND OTHER PERSONS IN CHARGE OF SCHOOL-SPONSORED ACTIVITIES

• Conduct the program or school sponsored activity in accordance with DISD policies and procedures regarding students with food or other severe allergies who are at-risk for anaphylaxis.

- Provide Level I and Level II- Food/Life-threatening Allergies training for all coaches and other key staff annually. Maintain documentation of trained staff.
- Ensure all coaches and cheer sponsor(s) are current in CPR/AED and 1st Aid certification.
- Consult with nurse to identify students in your care who have *Anaphylaxis Action Plans*.
- Obtain a copy of the *Anaphylaxis Action Plans* of students in your care and ask nurse for any clarification needed regarding plan.
- Ensure all Coaches/Sponsors know if the student is self-carrying an EpiPen and/or where the student's EpiPen is located on the campus.
- Restrict the use of foods that are known allergens to students with food allergies at risk for anaphylaxis.

RESPONSIBILITY OF TRANSPORATION DEPARTMENT

- Provide Food/Life-threatening Allergies Awareness training to all bus drivers annually. Maintain documentation of trained staff.
- Ensure that bus drivers know how to contact EMS in the event of an emergency.

RESPONSIBILITIES OF CUSTODIAL STAFF

• When a student or students are identified as having food allergies at risk for anaphylaxis on the campus, designated custodial staff will be provided the appropriate training, by campus administration or the campus nurse, to ensure student safety.