

MANAGING STUDENTS FOOD ALLERGIES

Food allergies can be life threatening. For those students at risk for food-induced anaphylaxis, the most important management in school is prevention. The risk of accidental exposure to foods can be reduced in the school setting if schools work with students, parents, and physicians to minimize risks and provide a safe educational environment for food-allergic students.

GOAL: to maintain the health and protect the safety of children who have life-threatening food allergies in ways that are developmentally appropriate, promote self-advocacy, competence in self-care and provide appropriate educational opportunities.

School Administration & Staff

Although schools cannot guarantee an allergy-free environment, Guilford Public School administration and staff should:

1. be knowledgeable about and follow applicable federal laws including ADA, IDEA, Section 504, and FERPA and any state laws or district policies that apply;
2. review student health records submitted by parents and physicians;
3. develop and implement a Emergency Care Plan for a food-allergic student, on the basis of need, as determined by the school nurse and school medical advisor;
4. avoid excluding students from school activities solely based on their food allergy;
5. identify a core team that may include the school nurse, health services coordinator, school medical advisor, teacher, principal, school food service, and counselor (if available) to work with parents and the student (age appropriate) to implement an individual Emergency Care Plan and to communicate that plan to all involved;
6. participate (core team) in changes made to the prevention plan to promote food allergy management;
7. ensure that all staff, including substitute teachers and interns, who interact with the student on a regular basis, understand food allergy management, can recognize symptoms, how to respond in an emergency, and work with other school staff to eliminate the use of food allergens in the allergic student's meals, educational tools, arts and crafts projects, or incentives;
8. leave Emergency Care Plan with lesson plans for teacher substitutes;
9. practice the Emergency Care Plans (staff) at the beginning of the school year to assure the efficiency/effectiveness of the plans;
10. coordinate with the school nurse to be sure medications are appropriately stored, emergency kit is available that contains a physician's standing order for medication and store medications in a easily accessible but secure location central to designated school personnel;
11. designate school personnel who are properly trained to administer medications in accordance with the State Nursing and Good Samaritan Laws governing the administration of emergency medications and provide training on a regular basis;
12. ensure that there is a staff member available who is properly trained to administer medications during the school day, regardless of time or location;

13. never allow a student you suspect of having an allergic reaction to walk alone to the school nurse- send with an adult or call for medical assistance;
14. review policies and the Emergency Care Plan with the core team members, parents/guardians, student (age appropriate), and physician after a reaction has occurred;
15. communicate this food allergy policy on all school web sites;
16. enforce a “no eating” policy for birthdays and similar spontaneous celebrations in the school setting to ensure adequate opportunity for planning and notification of parents of food-allergic students;
17. collaborate with the district transportation administrator to assure that school bus driver training includes symptom awareness and what to do if a reaction occurs;
18. develop and implement an emergency plan for food-allergic students on school buses, the Emergency Care Plan with photo should stay with the bus driver, (a copy to be given to EMT/first responder);
19. inform substitute bus drivers of students with life-threatening food allergies;
20. require that all buses have communication devices in case of an emergency;
21. enforce a “no eating” policy on school buses with exceptions made only to accommodate students with special needs under federal or similar laws;
22. food service manager will ensure that all food service staff, their substitutes and cafeteria monitors are trained to recognize the signs and symptoms of an allergic reaction and what to do in the event of a reaction;
23. create a specific area that will be allergen safe in the cafeteria, as needed;
24. strictly follow food handling, food preparation, cleaning and sanitation protocols to avoid cross-contact;
25. make required food substitutions with documentation signed by the student’s licensed health care provider. In order to make appropriate substitutions or modifications for meals served to students with life-threatening food allergies, the practitioner’s statement must identify the student’s disability (as defined under the USDA guidelines) why the disability restricts their diet, the food or foods to be omitted from the student’s diet, and the food or foods to be substituted.
26. to the extent possible, school food service staff should work with parents to provide them with food labels, in order for parents to identify and approve which foods their child may select for meals in school;
27. discuss and plan field trips with the family of the food-allergic child to decide appropriate strategies for managing the food allergy, including procedures for handling emergencies;
28. follow federal/state/district laws and regulations regarding sharing medical information about the student;
29. teachers educate students to avoid endangering, isolating, stigmatizing or harassing classmates with food allergies.

Family

The Board of Education encourages families to adhere to the following guidelines for managing food allergies in the school setting:

1. notify the school of the student's allergies;
2. provide written documentation, instructions, and medications as directed by a licensed health care provider;
3. work with the school team to develop a plan that accommodates the student's needs throughout the school including in the classroom, in the cafeteria, in after-care programs, during school-sponsored activities, and on the school bus;
4. include a photo of the child on written "Emergency Care Plan" form;
5. provide a list of food and ingredients to avoid;
6. provide the school nurse with at least annual updates on your child's allergy status;
7. provide the school nurse with at least two up-to-date epinephrine auto-injectors;
8. replace medications after use, upon expiration, or upon notification from nurse;
9. educate the student in the self-management of their food allergy including safe and unsafe foods, symptoms of allergic reactions, how and when to tell an adult they may be having an allergy-related problem, how to read food labels (age appropriate);
10. review the Emergency Care Plan with the core team members, the child's physician, and the child (if age appropriate) after a reaction has occurred;
11. provide emergency contact information;
12. provide the school nurse with the licensed health care provider's statement, if student no longer has allergies.

Student

The Board of Education encourages students to adhere to the following guidelines for managing food allergies in the school setting:

1. do not trade/share food with others.
2. do not eat anything without a labeled ingredient statement or known to contain any allergen or without parental permission;
3. be proactive in the care and management of their food allergies and reactions based on their developmental level;
4. notify an adult immediately if they eat something they believe may contain the food to which they are allergic or are experiencing any symptoms;
5. wash hands before and after eating;
6. report any instances of teasing or bullying immediately;
7. carry an epinephrine auto-injector at all times, when documented as appropriate to self –carry.

PA 05-104 An Act Concerning Food Allergies and the Prevention of Life Threatening Incidents in School

CGS 10-212a Administration of Medications in Schools

CGS 10-220i Transportation of Students carrying cartridge injectors

CGS 52-557b Good Samaritan Law. Immunity from liability for emergency medical assistance, first aid or medication by injection

PA 05-144 and 05-272 An Act Concerning the Emergency Use of Cartridge Injectors

PA 04-224 An Act Concerning Childhood Nutrition in Schools, Recess and Lunch Breaks