OLENTANGY LOCAL SCHOOLS LIFE-THREATENING FOOD ALLERGY GUIDELINES

BACKGROUND
The purpose of this document is to provide information and to outline guidelines to support the Olentangy Local School District’s Life-threatening Food Allergy Management Policy 6083. The district has created this document to help our staff members and families work together to minimize risks and provide the safest education environment possible for students with life-threatening food allergies, while they are at school.

Allergic food reactions can span a wide range of severity of symptoms. The most severe and potentially life-threatening reaction is anaphylaxis. This protocol is to be used for students who are at risk for anaphylaxis and in circumstances where a previously undiagnosed life-threatening allergic response occurs.

Anaphylaxis, a life-threatening allergic reaction, refers to a collection of symptoms that can affect multiple systems in the body. The most dangerous symptoms are breathing difficulties, a drop in blood pressure, or shock. These symptoms are potentially fatal if not treated promptly. Severe allergic reactions can occur within minutes of ingestion or can be delayed for several hours. Some reactions are “biphasic” in nature with an initial period of symptoms, a symptom-free period of up to several hours, followed by severe shock-like symptoms.

Foods that most commonly cause anaphylaxis are peanuts, tree nuts, shellfish, milk, wheat, soy, fish, and eggs. Ingestion of the food allergen is generally the principal route of exposure leading to food-induced anaphylactic reactions. For sensitive individuals, exposure to even a trace amount of the allergenic food can cause a life-threatening reaction. Contact can also result in an allergic reaction. Most contact reactions will only cause a local reaction in the area of exposure. However, if the students with life-threatening food allergies touch their allergen and then put their fingers in their eyes, nose or mouth, the body then treats this exposure as an ingestion, and anaphylaxis can occur.

School is a high-risk setting for accidental exposure to a food allergen, due to factors such as large number of students and cross-contamination of tables, desks, and other common or shared surfaces. This plan addresses the need to limit or avoid possible exposure of students with life-threatening allergies to their allergen(s).

Reactions are extremely unpredictable. Symptoms and severity can vary greatly with each reaction. At present there is no cure for food allergies and strict avoidance is the key to preventing reactions.

MEDICATIONS
Anaphylaxis is treated with an easily administered epinephrine auto-injector. Epinephrine is a prescribed medication that immediately begins to counteract the life-threatening symptoms. Some physicians may recommend two doses. This is in case of a bi-phasic
reaction, in case the first dose is not enough, or in the rare case that the first injector pen
malfunctions.

Epinephrine should be readily accessible at all times during school hours. The location
of the medication should be known to the student as well as all staff members who are
responsible for the student throughout his/her school day.

Unfortunately, total avoidance of an allergen is not always possible. This is because many of
the offending substances are so widespread or hidden in our daily environment. That is why
emergency responsiveness (being prepared and ready) is so important. Each child with a life-
threatening allergy should have a Food Allergy Action Plan in place.

**Immediate medical treatment is critical!** Deaths have occurred because of delays in
recognizing symptoms and not responding promptly or effectively by administering epinephrine.
When in doubt, medical advice indicates that it is better to give the student's prescribed
epinephrine and then seek medical attention. Fatalities are most likely to occur when
epinephrine is needed but not administered. It is imperative that following the administration of
epinephrine, the student be transported by emergency medical services to a hospital
emergency department. This is true even if symptoms appear to have resolved.

**CARE PLAN CONSIDERATIONS/OPTIONS**
A management plan that focuses on food allergy awareness, avoidance and immediate
treatment of allergic reactions is critical to saving lives.

These guidelines will help create the framework that will allow our schools to accommodate
students with life-threatening food allergies. High-risk situations will still occur in any school
setting and even with these recommended procedures in place, accidental contact remains a
potential threat. Implementing the necessary procedures will help maintain the safest
environment possible.

There are a variety of student accommodation and care plans that are appropriate to use
for students in our schools that experience health conditions that may impact a student's
school day and academic program.

The plans that are most often seen are:

**Food Allergy Action Plan (FAAP)** – a plan completed by the student's licensed
physician or physician's designated licensed extender, i.e., a Nurse Practitioner or
Physician's Assistant, which is designed for use by both nursing and school personnel.
This plan will clearly define the medical needs of the student with food allergies. It
outlines the care that the student could need in an emergency situation, specifically
addresses how to treat symptoms, and is used as a guide to respond to a student who is
experiencing a potentially life-threatening allergic reaction.

**Individualized Health Plan (IHP)** – A document developed by the school nurse in
 collaboration with parents and the school team to identify the accommodations to be
made for the food allergic student throughout the school day. This plan takes into
account the student’s medical diagnosis and physician recommendations, food allergy
history and the severity of the allergy.

For a list of risk areas to consider incorporating in a student’s IHP, see the Life-
threatening Food Allergy IHP Checklist document.

**Section 504 Plan** - When a physician assesses that a child’s food allergy could result in anaphylaxis and the allergy management affects the student’s ability to make educational progress, the child’s condition may meet the definition of a “physical or mental impairment” that “substantially limits one or more major life activities” under the Federal Americans with Disability Act 9 (ADA), Section 504 of the Rehabilitation Act of 1973. 29 U.S.C. 705(20)(B)

**RESPONSIBILITIES OF A PARENT OF A STUDENT WITH LIFE-THREATENING FOOD ALLERGIES**

Parents and guardians are asked to assist the school in the prevention, care and management of their child’s food allergies and allergic reactions by doing the following:

- Educate the child in self-management of his/her allergy in age-appropriate ways.
- Inform the school nurse of your child’s allergies prior to the child’s first day of school (or as soon as possible after diagnosis).
- Work with the school team collaboratively to develop an Individualized Health Plan (IHP) that identifies risk areas and addresses the necessary accommodations to be made throughout the school that are specific to your child.
- Provide a Food Allergy Action Plan (FAAP). This form must be approved and signed by physician or physician’s designated licensed extender.
- The IHP should be reevaluated prior to the start of each school year.
- Complete and submit all required medication forms.
- Provide updated emergency contact numbers and medical information.
- Provide the school nurse with up-to-date emergency medications (including epinephrine) so that they can be placed in all required locations for the current school year. Medications will comply with the district medication policy of proper labeling and expiration.
- Consider providing a medical alert type bracelet or necklace for your child.
- Provide a small photo of your child to be included in the IHP and FAAP.
- Complete appropriate forms requested by other departments and/or programs.
- Work with school staff to introduce the child to his/her teacher(s).
- Work with school food service personnel to determine the safety of the foods offered on the menu. Inform your child as to what foods are safe to eat. Introduce your child to the cafeteria manager.
- If the student rides the school bus to or from school, the parent / guardian should work with the transportation department to determine the child’s needs. Introduce the child to his/her bus driver(s).
- Go on your student’s field trips if possible and if requested.
- The Food Allergy Action Plan will be available for parents to copy and give to others who assume responsibility for their child.
- Make sure that supervising staff are aware of their child’s medical concerns during school-sponsored after-school activities and programs.
- Inform the school of any changes in the child’s life-threatening food allergy status.

**RESPONSIBILITIES OF A STUDENT WITH LIFE-THREATENING FOOD ALLERGIES**
The long-term goal for individuals with life-threatening food allergies is to be independent in the prevention, care, and management of his/her food allergies and allergic reactions based on his/her developmental level.

A student with life-threatening food allergies should:

- Develop a relationship with the school nurse, clinic aide and office staff.
- Use proper hand washing before and after eating and throughout the school day after using common areas or shared equipment.
- Avoid sharing or trading of foods, drinks or eating utensils with others.
- Take age-appropriate responsibility for avoiding food allergens. Avoid eating anything with unknown ingredients or known to contain an allergen.
- Avoid putting anything in the mouth such as writing utensils, fingers, or other foreign objects.
- Be proactive in the care and management of food allergies and reactions based on developmental level. Learn to recognize personal symptoms.
- Inform an adult immediately if a reaction is suspected, if an accidental exposure occurs, or symptoms appear.
- Report teasing or bullying to appropriate adult.
- Carry emergency epinephrine if ordered by the physician and notify a school staff member if the epinephrine is forgotten or lost. If not carrying medication on his/her person, know the location and which adults have possession of these emergency medications.
- Develop an awareness of environment and his/her allergy-controlled zones.
- Be aware of his/her IHP and his/her responsibilities.

RESPONSIBILITIES OF ALL STAFF
The following items are for all members of the teaching staff, regardless of whether the food-allergic student is in their class.

- Encourage hand washing for all students before and immediately after eating snack or lunch to avoid transferring residue to shared surfaces. Effective hand washing with soap and warm water is one of the simplest and most effective ways to prevent unnecessary allergen exposure to students. Regular hand washing after activities, prior to lunch, after lunch and after recess creates a safer environment for all students. A mild cleansing wipe can be considered when washing facilities are not available or accessible. Hand sanitizer is not a sufficient way to remove a food protein. It is the actual scrubbing or wiping process combined with the soap and water that removes it from the skin.
- Be cautious of residue on shared resources like furniture and supplies, keyboards, gym equipment, library materials, musical instruments, etc.
- Be cautious of food in non-obvious places such as on staff desks, in clinic, in office, etc.
- Support peer education and create awareness throughout the school. For example, no sharing of food, eating utensils or drinks, the importance of hand washing after eating and the rules of an allergen-free table.
- Complete “Public School Works” district-wide, mandatory, in-service training and education on reducing life-threatening allergy risks, recognizing food allergy symptoms, and emergency procedures. This training will include, but is not limited to the following topics:
  a. A description/definition of severe allergies and the most common foods causing allergic reactions.
b. The signs and symptoms of allergic reactions and anaphylaxis.
c. The correct use of epinephrine and the importance of not hesitating to administer in an emergency situation. If a student with food allergies reports or shows signs of an allergic reaction, immediately initiate the FAAP.
d. Specific steps to follow in the event of an emergency, including the importance of calling 911 when epinephrine is administered.

This training shall occur prior to the student's first day of school.

- Be prepared for special events and non-routine days. The greatest risk for a student to have an allergic reaction is when the normal routine is broken.
- **Never question or hesitate to immediately initiate a FAAP if a food-allergic student reports signs of an allergic reaction.**

**RESPONSIBILITIES OF SCHOOL ADMINISTRATOR**

Olentangy Local Schools School Administrator shall ensure the following:

- All applicable federal laws, including ADA, Section 504, FERPA, state laws and district policies/guidelines will be followed.
- Appropriate allergy forms are made available to the parent/guardian.
- Be available to meet with parents and listen to their needs and concerns.
- Support the creation of the IHP by establishing a core team comprised of parent, building administrator, teacher, student, school nurse, cafeteria manager, and/or other personnel deemed necessary to make decisions about food allergies.
- Completion of the district-wide mandatory in-service training and education on reducing life-threatening allergy risks, recognizing food-allergy symptoms, and emergency procedures for appropriate staff to include, but not limited to the following topics:
  - A description/definition of severe allergies and a discussion of the most common foods causing allergic reactions.
  - The signs and symptoms of allergic reactions and anaphylaxis.
  - The correct use of epinephrine and the importance of not hesitating to administer it in an emergency situation. If a student with food allergies reports or shows signs of an allergic reaction, immediately initiate the FAAP.
  - Specific steps to follow in the event of an emergency, including the importance of calling 911 when epinephrine is administered.

This training shall occur prior to the student's first day of school.

- A no-food, drink or utensil trading/sharing policy.
- That life-threatening allergy-safe zone is established if requested by parent. This will be defined in a student’s IHP. These zones will be designated by a universal symbol. These zones will be cleaned and sanitized as per district protocol (Custodial Services Section).
- That the IHP is available in the nurse’s office as well as any other locations designated in a student’s IHP.
- That FAAP and/or IHP is in an organized, prominent and accessible format for a
substitute teacher. A brightly colored label will be on the outside of sub folders (MEDICAL ALERT). The medical issue will be written in the blank specific to the student.

- That established cleaning protocols are followed to ensure that the threat of allergens is minimized (Custodial Services Section).
- That letters are sent to all parents of children assigned to a classroom where one of the students has been identified as having a life-threatening food allergy (K-5). This will be carried out in accordance with patient confidentiality regulations.
- That emergency communication device (walkie-talkies, cellular phones, etc.) is available for use in all activities — physical education, recess, transportation, etc. — that involve a student with a life-threatening food allergy and where a phone is not immediately accessible.

RESPONSIBILITIES OF CERTIFIED SCHOOL NURSE
The school nurse is the primary coordinator of each student’s life-threatening allergy plan.

Each certified school nurse will have the following responsibilities:

- Contact parent of food-allergic student after initial diagnosis or each school year prior to student’s return to school, and schedule a meeting to develop or revise an existing plan to meet the health needs of the student. Participants may include parent/guardian, classroom teacher, administrator, counselor, or clinic aide. A FAAP checklist (appendix) and packet will be provided to the parent to complete. The FAAP must be signed by a physician.
- Develop an IHP (appendix) and review and revise as needed. Provide a copy to the parent for approval, and distribute copies to essential school staff; update annually. Add student to building health concerns list.
- A form letter (appendix) will be sent to the classroom parents informing them of a student with a life-threatening food allergy and/or allergen-free status of the classroom (appendix).
- Notify food service and transportation departments of the student’s allergy
- Provide an annual opportunity for all elementary building staff to perform a return demonstration of epinephrine auto-inject and document participation.
- Provide appropriate materials to classroom teacher of food-allergic student to include in the sub folder; i.e. copy of FAAP, IHP, and the handout “How a Child Might Describe a Reaction.” Additionally, a “Medical Alert” sticker will be provided to place on the front of the folder.
- If requested by parent, provide age-appropriate classroom education to classmates of the student with a life-threatening food allergy.
- Supervise maintenance of an emergency notebook compiled with emergency plans of students with a life-threatening food allergy; the location will be easily accessible, clearly labeled, and known by essential staff members.
- Emergency medication and copies of the Food Allergy Action Plan and/or IHP will be kept in an easily accessible cabinet. Each student’s supplies will be kept in a large baggie or plastic pencil box with his/her name, teacher/grade/team, and expiration date of epinephrine. (note: per ORC 3313.713 – medications must be kept locked in a centrally located placed except for medications ordered by a physician to be carried by the student).
• Provide an opportunity for classroom teacher to demonstrate administration of epinephrine prior to the field trip; review symptoms of an allergic reaction. This may be delegated to the clinic aide.

RESPONSIBILITIES OF CLINIC AIDE

Each clinic aide will have the following responsibilities:
• Maintain a clinic sub folder that is current and provides detailed information regarding students with a food allergy.
• During an absence, designate a member of the office staff, who will be in the building all day, to assist a sub clinic aide in the event of an emergency.
• Monitor expiration dates of each student’s epinephrine; notify parent when auto-injector expires. If parent does not return the call, and/or provide epinephrine after two calls, document the information on the student’s health record. Notify the school nurse and the administrator.
• In absence of school nurse, provide epinephrine auto-injector training for the substitute teacher of student with a food allergy; utilize “Anaphylaxis Checklist for the Sub.” This document will be maintained in a file by the clinic aide.

RESPONSIBILITIES OF CLASSROOM TEACHERS WITH STUDENTS WITH LIFE-THREATENING FOOD ALLERGIES

The teacher has the greatest impact on both the student and the classroom environment.

• Collaborate with parent/guardian and school nurse to discern all health needs of the student during the school day, including allergen avoidance, education, and emergency readiness. Establish classroom protocol regarding management of food in the classroom.
• Review the FAAP and IHP with the certified school nurse in order to be familiar with the student’s FAAP and IHP before a reaction occurs to ensure the efficiency and effectiveness of the plans. Keep the plans in an easily accessible location.
• If medication is designated to be kept in the classroom, coordinate with the school nurse to ensure that it is stored appropriately. Be aware that students are permitted to carry epinephrine if ordered by a physician and approved by the parent.
• Reinforce school guidelines regarding stigmatizing or harassing a food-allergic student. Be cautious not to isolate or exclude student with food allergies from school activities due to their allergy.
• In conjunction with the school nurse, if classroom has been designated allergen-free, send letters to all classroom parents regarding classroom precautions that will be utilized to keep the food-allergic student safe.
• Provide detailed pertinent information regarding student’s health needs in sub folder; include FAAP and IHP in a prominent location within the folder so that it is immediately noticeable.
• Notify any in-coming student teachers and/or aides regarding the student’s medical condition and needs.
• Inform parent/guardian of impending class parties, field trips, or in-class events where food will be present. This includes animal visits as the food for the animal
may contain an allergen. Inform clinic personnel within 2 weeks of the field trip.
• At parent request, post an allergen alert sign outside the classroom to identify the
  allergens not permitted in the classroom.
• Consider non-food rewards in the classroom.
• If an unknown food or restricted food is inadvertently brought into the classroom,
  store in the office and call parent for pick-up.
• Reinforce hand washing with soap and water before and after eating.
• Enforce that there will be absolutely no sharing of food, eating utensils or drinks.
• **Never question or hesitate to immediately initiate the Food Allergy Action**
  **Plan if a food-allergic student reports signs of an allergic reaction. Call 911**
  **if epinephrine auto-injector has been administered.**

**RESPONSIBILITIES OF THE FOOD SERVICE DEPARTMENT**
The cafeteria is a high-risk situation for any student with life-threatening food allergies. When
products containing the allergen are served or consumed in the cafeteria, accidental contact
with the offending allergen is always a possibility.

The Food Service Department shall:
• Not knowingly serve/sale peanut butter or peanut butter products in the elementary
  cafeterias.
• Provide in-service to food service employees regarding safe food-handling
  practices to avoid cross contamination with potential food allergens.
• Maintain a list of students with food allergies within the food service area with a
  photo of the student wherever possible. (not for public viewing).
• Introduce students to staff members so they can recognize them and assist with
  menu selections.
• Maintain knowledge of which food products contain allergens and keep copies of
  ingredient labels or fact sheets for all products readily available for review. Follow
  all applicable food service laws.
• Participate in in-service training for students with life-threatening allergies including
  demonstration of epinephrine use.
• With parental approval, set up reasonable procedures for cafeteria regarding
  students with food allergies, including entering student’s allergy into
  computerized database. Information will remain confidential and shared on a
  need-to-know basis in compliance with federal privacy regulations.
• Work together with parent/guardian to determine the safety of the foods offered by
  reviewing ingredient information and labels of all items served in the cafeteria.
• Take all complaints seriously from any student with a life-threatening food allergy
  by immediately contacting clinic staff. Also, remember that undiagnosed food
  allergies may appear for any student at any time after contact with food.
• Make menu accommodations as prescribed by a physician.

**RESPONSIBILITIES OF THE CAFETERIA AIDE AND THE MANAGEMENT OF THE**
**ALLERGEN-FREE TABLE**

At the elementary school level, the cafeteria aide is responsible for monitoring the activities at
the allergen-free table.
The cafeteria aide will participate in in-service training about students with life-threatening allergies, including a demonstration on how to administer epinephrine. The allergen-free table(s) will be available for use during lunch periods. This table should be clearly labeled with appropriate allergen-free status (usually peanut/tree nut), to ensure that the table remains safe and is used only for this purpose.

Proper management of an allergen-free table includes:

- The ability to identify a food-allergic child and what item(s) he/she is allergic to.
- Working with the custodian to verify that the allergen-free tables are cleaned thoroughly BEFORE the first lunch period AND AFTER each subsequent lunch with warm soapy water, using a separate bucket (designated and clearly labeled for Nut-free Table Use Only) and towel.
- Checking the lunches of any children wishing to sit at the allergen-free table for obvious or questionable products containing the allergen.
- Closely monitoring the food-allergic child in order to intervene quickly if help is needed.
- Monitoring that children eating peanut butter or nut products at other tables and not allowing them to approach an allergen-free table in order to minimize cross contamination.
- Preventing children at the table from leaving and returning with an unsafe item from the snack cart.
- Ensuring that no food sharing occurs.

RESPONSIBILITIES OF CUSTODIAL SERVICES

The custodial service department, under the direction of the building principal and in conjunction with the custodial supervisor, shall:

1. Use the following cleaning protocol for allergen-free zones:
   - Use a separate wash bucket and cloth with district-approved cleaning agents solely for the cleaning of allergen-safe zones.
2. Receive training on maintaining allergen-free zones.
3. Clean allergen-free tables thoroughly BEFORE the first lunch period AND AFTER each subsequent lunch with warm soapy water, using a separate bucket (designated and clearly labeled for Nut-free Table Use Only) and towel.
4. Participate in in-service training for students with life-threatening allergies including a demonstration of epinephrine use.
5. Verify that all cleaning chemicals used throughout the school do not contain the allergen as an ingredient.
6. Wash the tables and chairs immediately following any activity that includes food, held in a food-allergic student’s classroom or other allergen-free zones.
7. Wash any areas of the school where contamination is suspected.

RESPONSIBILITIES OF THE TRANSPORTATION DEPARTMENT

Upon enrollment/diagnosis the transportation department will be notified of students with life-threatening food allergies. When an Olentangy student with food allergies is enrolled/diagnosed, the parent will fill out a Transportation Health Alert Form (see appendix). The school nurse will notify the transportation department of the at-risk student. When a non-public student is added to a bus route, a Transportation Health Alert Form is sent to
the parent(s)/guardian(s). It is the responsibility of the parent of a non-public student with life-threatening food allergies to return the form to the transportation department.

The transportation department shall:

• Inform all bus drivers when a child with a life-threatening food allergy is assigned to their routine bus route.
• Maintain health concerns files separately from those maintained at each school.
• Install functioning emergency communication devices (e.g. two-way radios) on each bus.
• Provide in-service training for students with life-threatening allergies including a demonstration of how to administer epinephrine.

The school bus drivers shall:

• Maintain a list of students with identified health concerns, including anaphylactic risk.
• Maintain and reinforce policy of no-food-eating on the bus, except for those with medically documented needs, i.e., diabetics. In cases of medically documented needs, those students must bring allergen-safe foods for eating on the bus.
• Seat students with life-threatening allergies in an area that is easily accessible to the bus driver when being transported to/from school.
• Not hand out food treats, even on special occasions.
• Participate in in-service training for students with life-threatening allergies, including demonstration of how to administer epinephrine.

*For guidelines on transporting students with life-threatening food allergies during field trips see section entitled Responsibilities on Field Trips.

RESPONSIBILITIES OF PERSONS IN CHARGE OF CONDUCTING SCHOOL-SPONSORED AFTER-SCHOOL ACTIVITIES

Clubs, programs, or sports will maintain a list of students with severe life-threatening allergies. These individual programs will be responsible for obtaining this information from the parent(s)/guardian(s) of children with life-threatening food allergies.

FIELD TRIP GUIDELINES

Consider the food-allergic student when planning a field trip due to risk of allergen exposure. If possible, try to make choices that will allow the student to actively participate in the field trip.

These items will be considered to avoid a food-allergen exposure on a field trip:

• Encourage attendance on field trips by the parents of students with life-threatening food allergies.
• Storing the meals of food allergic students separately.
• Make sure that a district employee who has been in-serviced on the use of epinephrine, such as the classroom teacher, will accompany the class on the field trip. This employee will maintain each applicable student's epinephrine and will follow the child’s IHP.
• Carry copies of the student’s Food Allergy Action Plan on all field trips.
• Staff will call 911 in all instances of epinephrine use. Parent(s)/Guardian(s) will be notified.
• Ensure that access to emergency services is available from field trip site.
• Review plans for eating to prevent exposure to allergen. All in-school procedures should still apply (hand washing, nut-free table, bus, etc.).
• School nurse or his/her designee will update teachers before each field trip with refresher training on epinephrine auto-injector administration.
• Ensure that all adult chaperones supervising a food-allergic student on the field trip know about the food-allergic student and his/her health needs. They also must be educated in age-appropriate signs and symptoms of an allergic reaction and be trained in the use of emergency medications.

RESOURCES

The Food Allergy and Anaphylaxis Network (FAAN). FAAN is a great resource for current research, informational newsletter, support groups, and information on food products. Their phone number is 800-929-4040, and the Web address is: www.foodallergy.org

American Academy of Allergy, Asthma and Immunology. (AAAAI). http://www.aaaai.org


Asthma & Allergy Foundation of America. http://www.aafa.org

• Food & Drug Administration's Website. http://fda.org

• Food Anaphylaxis Education’s Website. http://peanutallergy.com

• Asthma and Allergy Foundation of America Back to School Basics 2006
• Food Allergy and Anaphylactic Network Back-to-School
• Olentangy Administrator Handbook: Operations: File: 6080- Food Services Management/Free and Reduced-price Food Services
• School Guidelines for Managing Students with Food Allergies (American School Food Service Association, National Association of Elementary School Principals, National Association of School Nurses, National School Boards Association and the Food Allergy & Anaphylaxis Network.)
• FAAN School Food Allergy Program
• Managing Life-threatening Food Allergies in Schools-Massachusetts Department of Education
• Spokane Public Schools Nutrition Services Website and Documentation on Managing Life-threatening FA in School.
FORMS:

Epinephrine Fact Sheet
Sample Parent Letter
Food Allergy and Epinephrine Training In-service Sheet
Epinephrine Self-administration Authorization Packet for Anaphylaxis
Food Allergy Action Plan
Epinephrine/Twinject Medication Self-administration Form
Epinephrine/Twinject Student Skills Checklist
Transportation/Food Services Letter to Parents
Substitute Notice
Allergen-safe zone sign
No Food or Utensil Sharing sign

(on building letterhead)
DATE

Dear Parents,

This year at name of school we have many students with food allergies and a few students who have a life-threatening peanut allergy. Students have been provided with a pamphlet entitled “Be a PAL” that provides information on food allergies and ways they can keep their friends safe at school. Classroom teachers and staff have been provided a foods-to-avoid list.

Name of School staff is working hard to control allergen exposure in the classroom as much as possible, so please check with teachers prior to sending in snacks, and always include the packaging.

In addition, our cafeteria will have a designated allergy-controlled zone. Any student may sit at that table, provided they are not eating peanut butter or a nut product. We have many food items available in our cafeteria that are safe for students with peanut allergies. The ala carte food items that have possible allergens such as egg, soy, or peanuts, will have those ingredients posted.

As has always been our district policy, food must be commercially prepared. Please do not send homemade treats to school. If your child has a specific food need you may send snacks that are safe for your child to eat. These snacks, however, must be stored with the classroom teacher or his/her designee, such as a substitute. Your child can access these snacks when treats are eaten in class.

If your child has any special food need and you have not made the school aware please call our school nurse, nurse name and phone number. Thank you in advance for your cooperation, as we work together to keep our school safe for all students.

Sincerely,

LIFE-THREATENING FOOD ALLERGY IHP CHECKLIST

The identification of risk areas and defining protocols for each is the key to avoidance and prevention of allergic reactions.
Food Allergy Action Plan (FAAP)

☐ Where will it be posted and who should have a copy? List.

Individualized Health Plan (IHP)

☐ Who will it be distributed to? List.

Medications

☐ Where will medication be kept?
☐ Are there any special circumstances or exceptions to consider?

Training of Staff

☐ Know who will be trained.

Classroom

☐ Do you need an allergen-free classroom?
  ☐ If yes, do you want Allergen Alert signs posted?
  ☐ If yes, it needs to be cleaned following the protocols listed in the district Life-Threatening Food Allergy Guidelines in the Custodial Services Responsibilities section.
  ☐ If yes, request that the allergen be kept out of all projects and educational materials used in the classroom.
☐ Handwashing procedures:
  ☐ For student with food allergies.
  ☐ For classmates.
☐ How will Snack be handled?
☐ Is shared equipment a concern?
☐ Do you want your child’s classmates be educated? If so, how?
☐ Is there a class pet?
  ☐ If yes, make sure the food is free of your allergen(s).
☐ How will parties be handled?
☐ Have a plan for days when recess is indoors.
☐ Consider a plan for the child traveling to other classrooms.
☐ Have a plan for days when students eat lunch in the classroom.
☐ Where will your child’s lunch be kept, should it be separate from the others?

Field Trips

☐ Have a plan in place for field trips (See district Life-threatenning Food Allergy Guidelines section on Field Trip Guidelines.)
School Sponsored Special Events and Non-Routine Days

- Make sure supervising staff are aware of your child’s medical needs.

Substitutes

- Be familiar with the steps that will be taken to ensure your child’s substitutes are trained and ready. These steps are detailed in the district Life-threatening Food Allergy Guidelines.

Cafeteria

- Does your child require an Allergen-Free Table?
  - If yes, protocols have been established for the table in the district Life-threatening Food Allergy Guidelines sections Responsibilities of the Cafeteria Aide and the Management of the Allergen-free Table section.
- Will your child be buying lunch from the cafeteria?
  - Work with the school food service manager to determine the safety of the foods offered on the menu.
  - If you need special accommodations, you will need to complete the necessary form and provide physician documentation.
- Are there any other special accommodations needed?

Specials

Be cautious of residue on shared resources like furniture and supplies, keyboards, gym equipment, library materials, musical instruments etc.

- Do you need special accommodations for Music?
- Do you need special accommodations for Computer Lab?
- Do you need special accommodations for PE?
- Do you need special accommodations for Art?
- Do you need special accommodations for Library?

Shelter-in-place emergencies or Lockdowns

- Have a plan for your child in place.
Transportation

- Will your child take the bus?
  - If yes, work with the Transportation Department to determine your child’s needs.