

Atlanta ISD Food Allergy Management Plan

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

PURPOSE

To provide guidance in managing students with food allergies at-risk for anaphylaxis at school

BACKGROUND

In accordance with Chapter 38 of Texas Education Code, Section 38.0151, the Board of Trustees of each school district shall adopt and administer a policy for the care of students with diagnosed food allergies at risk for anaphylaxis. This policy requires each school district to develop and implement a student food allergy management plan which includes:

- training for employees on allergies and anaphylaxis,
- general strategies to reduce the risk of exposure to common food allergies
- methods for requesting specific food allergy information from parents of students with diagnosed food allergies
- implementation of food allergy action plans, and
- annual review of the district's management plan.

INTRODUCTION

A food allergy is an abnormal response to a food, triggered by the body's immune system. Symptoms of food induced allergic reaction may range from mild to severe and may become life-threatening. Reactions vary with each person. The severity of an allergic reaction to each exposure is not predictable. Eight foods account for over 90% of allergic reactions affected individuals: milk, eggs, peanuts, tree nuts, fish, shellfish, soy and wheat (Sampson, 2004 & Sicherer, 2002). Although most allergic reactions are attributed to these eight foods, any food has the potential of causing a reaction. There is no cure for food

allergy. Strict avoidance of allergens and early recognition and management of allergic reactions are important to the safety of children with food allergies, at risk for anaphylaxis.

Children spend up to 50% of their waking hours in school and foods contain allergens are commonly found in schools. Thus, the likelihood of allergic reaction occurring in school is high (Sheetz, 2004). Students show that 18-18% of children with food allergies have had allergic reactions in accidental ingestion of food allergens while in school. Food induced anaphylaxis data reveals that 25% of anaphylactic reactions in schools occur among students without a previous food allergy diagnosis (Sicherer, 2010 & Nowak-Wegrzyn, 2001).

Anaphylaxis is defined as “serious allergic reaction that is rapid in onset and may cause death” (Simons, 2008). Anaphylaxis includes a wide range of symptoms that can occur in many combinations and is highly unpredictable. The signs and symptoms of an allergic reaction (anaphylaxis) usually involves more than one system of the body. The mouth, throat, nose, eyes, ears, lung, stomach, skin, heart, and brain can all be affected. The most dangerous symptoms include breathing difficulties and a drop in blood pressure or shock, which is potentially fatal.

Treatment of anaphylaxis—Epinephrine (Adrenaline) is the first-line treatment in cases of anaphylaxis. Other medications have a delayed onset of action. Epinephrine is a quick-acting hormone that helps to reverse symptoms of an allergic reaction by opening the airways improving blood pressure, and accelerating the heart rate. In approximately one third of anaphylactic reactions, the initial symptoms are followed by a delayed wave of symptoms two to four hours later. Therefore, it is imperative that following the administration of epinephrine, the student be transported to the hospital even if the symptoms appear to have resolved.

PLAN

Notification

In accordance with TEC, Chap. 25, Sec. 25.0022, Atlanta ISD requests annual disclosure of all food allergies by the parent or guardian on the *Food Allergy Disclosure Form*. This form is included in all new student enrollment packets and from the school nurse.

When a student's severe food allergy, risk of anaphylaxis, and/or prescription epinephrine auto-injector is disclosed by the parent or guardian on the *Food Allergy Disclosure Form* or *Student Emergency Card*, then a *Food Allergy Action Plan* should be completed by the parent and student's physician and be submitted to the school nurse. Parents and guardians are directed to the school nurse or to the online Health Services link on the District website for the *Food allergy Action Plan* form.

A *Statement Regarding Meal Substitutions or Modifications* form must be completed by the parent and physician for any modifications or substitution of meals purchased through AISD cafeterias, due to diagnosed disabling food allergies. This form is available online or from the school nurse. Completed forms must be submitted to the school nurse. The nurse will then contact the food services department to initiate prescribed meal modifications. Request for meal modifications must be renewed annually.

Upon receipt of the completed *Food Allergy Action Plan*, the school nurse will:

- Develop an IHP for management of the student's food allergy
- Enter the disclosed allergy as "Special Problem" in the district's electronic health record system
- Initiate the 504 process, if appropriate
- Notify the campus cafeteria manager and District food services department of disclosed food allergies or completed *Food Allergy Action Plan* forms

- Notify campus administration, custodial staff and district custodial service supervisor of specific food allergy

Creating Allergen-Safer School Environment Procedures

1) Training:

- a) All staff will complete “*Level I-Awareness Training for Food Allergies*” that includes the following information:
 - i) Most common food allergens
 - ii) Importance of environmental controls
 - iii) Signs and symptoms of an anaphylactic reaction
 - iv) How to administer an epi-pen
 - v) How to use a *Severe Allergy Action Plan*
- b) Designated* staff will complete “*Level II—Specialized Training for Food Allergies*” that includes the following information:
 - i) More comprehensive Level I information
 - ii) Identifying students at risk for anaphylaxis
 - iii) How to administer and epi-pen
 - iv) Planning for students who do not have epinephrine at school
 - v) Implementation of Server Allergy Action Plan
 - vi) Environmental control factors including hand washing
 - vii) Working with EMS

Designated staff includes any staff members 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.*

- 2) District Food Services Department will make every attempt to ensure that no products containing peanuts are purchased or served on campuses.

Creating Allergen-Safer School Environment Procedures-continued

- 3) Allergen food will be restricted from classroom and other learning environments used by children with food allergies at-risk for anaphylaxis at all campuses
- 4) Pre-packaged food items with readable ingredients lists will be required for projects, activities and celebrations in classrooms of children with food allergies at risk for anaphylaxis so potential food allergens can be identified.
- 5) Appropriate cleaning protocols will be followed on campuses, with special attention to identified high risk food allergy areas (i.e. cafeteria tables)
- 6) A principal-designee staff, plus Level II trained staff, on each campus will be trained in emergency medication administration for anaphylaxis in the nurse' absence
- 7) A post exposure conference will be held if an anaphylactic even occurs
- 8) Information concerning Atlanta ISD's Food Allergy Management Plan will be included in the student handbook and will be available on the AISD district webpage under the Health Services link

Actions for Anaphylaxis

Students with life-threatening allergies may require emergency assistance from any staff member!

POSSIBLE SYMPTOMS OF ALLERGIC REACTION

SEVERE SYMPTOMS

1. LUNG: shortness of breath, wheeze, repetitive cough
2. HEART: Pale, blue, faint, weak pulse, dizzy, confused
3. THROAT: Tight, hoarse, trouble breathing or swallowing, repetitive clearing of throat
4. MOUTH: Obstructive swelling (tongue or lips)

Care of the Student with Food Allergies at Risk for Anaphylaxis: Responsibilities

- District
- Family/Parent
- Student
- Coordinator of School Health Services
- Campus Administration

RESPONSE TO AN ALLERGIC REACTION

1. Any staff member who becomes aware that a student is having an allergic reaction must:
Stay with the student. NEVER LEAVE STUDENT UNATTENDED
2. Administer Epinephrine (call for trained personnel immediately). It is important not to delay the administration of epinephrine.
3. Call 911

- Registered Nurse
- Classroom Teacher/Specialist
- Food Service Director
- Athletic Director/Sponsors, and Other Persons in Charge of School-Sponsored Activities
- Transportation Department
- Custodial Staff

School's Responsibility in Student Food Allergy Management

- 1) To 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) To review the health records submitted by parents and physicians;
- 3) To include food-allergic students in school activities;

Students will not be excluded from school activities solely based on their food allergy.

- 4) To identify a core team of school personnel (may include school nurse, teacher, principal, school food service and nutrition manager/director, counselor, or teacher) to work with parents and the student (age appropriate) to establish a prevention plan;
- 5) To assure that all staff who interact with the student on a regular basis understand food allergy, can recognize symptoms, know what to do 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;

- 6) To designate school personnel who have been properly trained to administer medications in accordance with the State Nursing and Good Samaritan Laws governing the administration of emergency medications,
- 7) To be prepared to handle a reaction and ensure that there is a staff member available who is properly trained to administer medications during the school day regardless of time or location,
- 8) To review policies/prevention plan with the core team members, parents/guardians, student (age appropriate), and physician after a reaction has occurred,
- 9) To work with the district transportation administrator to assure that school bus driver training includes symptom awareness and what to do if a reaction occurs,
- 10) To discuss appropriate management of food allergy with family,
- 11) To discuss field trips with the family of the food-allergic child to decide appropriate strategies for managing the food allergy,

School's Responsibility in Student Food Allergy Management-continued

- 12) To follow federal/state/district laws and regulations regarding sharing medical information about the student, and
- 13) To take threats or harassment against an allergic child seriously

Responsibilities for Parent and Family

- 1) Notify the school nurse of the child's allergies
- 2) Provide a completed *Food Allergy Action Plan* to the child's school nurse *each* school year.
 - a) The *Food Allergy Action Plan form* can be obtained from the school nurse or from the Districts website on the Health Services page.
 - b) The *Food Allergy Action Plan* contains written medical documentation of allergy, instructions, and medications as directed by a physician.
 - c) A photo of child should be attached to the Allergy Action Plan.
- 3) Work with the school team to develop a plan that accommodates the child'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) Provide properly labeled medications and replace medications after use or upon expiration.
 - a) All medications must be accompanied by appropriate medication administration authorizations as required by state law and local policy.
 - b) The school nurse can provide the appropriate *Medication Authorization Forms*, or these may be downloaded from the District's website on the Health Services page.
- 5) Educate the child in the self-management of their food allergy including:
 - a) safe and unsafe foods
 - b) strategies for avoiding exposure to unsafe foods
 - c) symptoms of allergic reactions
 - d) how and when to tell an adult they may be having an allergy-related problem
 - e) how to read food labels (age appropriate),
- 6) Review policies/procedures with the school staff, the child's physician, and the child (if age appropriate) after a reaction has occurred, and
- 7) Provide emergency contact information, and keep the contact information updated.

Responsibilities of the Student

- 1) Not trade food with others,
- 2) Not eat anything with unknown ingredients or known to contain any allergen,
- 3) Be proactive in the care and management of their food allergies and reactions based on their developmental level, and
- 4) Notify an adult immediately if they eat something they believe may contain the food to which they are allergic.

Responsibilities of Coordinator of Health Services

- 1) Serve as the point of contact for allergy management for parents, staff and healthcare providers, etc.;
- 2) Coordinate training for administrators, staff and departments on food allergy management;
- 3) Assist and support campus staff with implementing food allergy management strategies;
- 4) Review the Atlanta ISD Food Allergy Management Plan annually and recommend any changes needed to ensure that the most current information is utilized in providing care for food allergic students and align with current statutes, rules, and evidence-based practice, and
- 5) Coordinate post-anaphylaxis event conferences and implement any needed changes to the Atlanta ISD *Food Allergy Management Plan* to increase student safety.

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Responsibilities of Campus Administration

- 1) Ensure timely distribution of *Authorization of Emergency Medical Care Cards* for parent completion;
- 2) Oversee the administration of *AISD Food Allergy Management Plan* on the campus;
- 3) Provide an opportunity for Levels I and II—*Food Allergy Training* staff annually;
- 4) Ensure that designated staff complete Levels I and II—*Food Allergy Training* annually
- 5) Offer professional development for staff regarding confidentiality and compliance with FERPA to prevent open discussion of specific students;
- 6) 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, bee kid, or any other name related to the student's condition;

- 7) Designate staff who will be trained by the school nurse to respond to exposure or allergic reactions, and/or administer epi-pen or medication when a school nurse is not available;
- 8) Ensure that a Level II-trained staff members attends field trips or school outings if parent is not in attendance
- 9) Develop standard procedures to ensure that medication and communication devices are taken on all field trips;
- 10) Ensure the food-allergic student is included in all school activities (student should not be excluded from school activities solely based on their food allergy);
- 11) Ensure teachers have a plan in place and that the plan is adhered to for notifying substitute teachers of a student with food allergies who is at-risk for anaphylaxis is in the classroom;
- 12) Ensure that an area is designated as allergy-free in the cafeteria if needed; and
- 13) Ensure that appropriate cleaning of allergy-free areas in cafeteria is being followed.

Responsibilities of the Registered School Nurse (RN)

- 1) Implement the administration of *Atlanta ISD Food Allergy Management Plan* on the campus in consultation with the campus administrators, Coordinator of Health Services, prescribing physicians, special education staff and 504 coordinators, when appropriate;
- 2) Provide Levels I and II *Food Allergy Training* annually for staff (include instructions on IHP viewing). Maintain documentation of trained staff including the *Epinephrine Administration Training Checklists*;
- 3) Annually review all *Authorization of Emergency Medical Treatment Cards* (Emergency Cards) and *Food Allergy Disclosure* forms for food allergy disclosures;

-Contact parents/guardians who have indicated their student has a food allergy and have not submitted a completed *Food allergy Action Plan* for their student. Request completion of the action plan.

- 4) Review all submitted *Food Allergy Action Plans* and/or completed *Medication Administration Request* forms for those have submitted a completed *Food Allergy Action Plan*;
- 5) Collaborate with the parents/guardians when reviewing *Food Allergy Action Plan/Medication Administration* forms and creating IHPs;
- 6) Notify student's teachers, 504 coordinator, food services and custodial department of a student with a severe food allergy, as needed, and as changes are made. Provide them a copy of the *Food allergy Action Plan* as appropriate.
- 7) Review and Modify IHP's annually, and as needed;
- 8) Train principal designated staff and Level II-trained staff annually in responding to exposure, allergic reaction, and administration of epi-pens and/or medication when a school nurse is not available.
- 9) Ensure the student's emergency lifesaving medication (epi-pen) is properly labeled and stored in an accessible but unlocked area, and dates have not expired.

Responsibilities of the Registered School Nurse (RN)-continued

- 10) Request a list of students participating in athletics (secondary campuses). Coordinate with coaches/trainers on plans of care for students with severe allergies and access to any lifesaving medication for student; and
- 11) Participate in any campus post-incident anaphylaxis conferences.

Responsibilities of the Classroom Teacher/Specialist

1. Complete Levels I and II of *Food Allergy Training* annually;
2. View students' *Food Allergy Action Plan* and or IHP with campus nurse;
3. Understand and implement the *Food Allergy Plan* for your student(s). Ask a school nurse for any clarifications needed regarding the plan(s);
4. Ensure that all substitute individuals, pull out teachers (special Education, interventionists, etc.) that work with student are informed of student's food allergy;
5. Eliminate identified allergens in the classroom of student with food allergies at risk for anaphylaxis

6. Send District letter to parents/guardians of all students in the classroom with an at-risk for anaphylaxis classmate
 - a. Letter explains any restricted allergen foods in their child's classroom
 - b. Form letter is obtained from school nurse;
7. Inform parents and campus nurse of any events where food will be served;
8. Enforce district policy on bullying related to food other allergens;
9. Know the campus communication plan with the front office and/or campus nurse as outlined in the IHP.
10. Ensure that student suspected of having an allergic reaction is accompanied by an adult (preferable) or student to the clinic; and
11. Do not put a student on the bus if there are any signs or symptoms of an allergic reaction.
12. CLASSROOM ACTIVITIES
 - a. Ensure that a food-allergic student is included in all school activities. students should not be excluded from school activities bases solely on their food allergy
 - b. 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 the potential food allergens can be identified; and
 - c. Use non-food items such as stickers, pencils, etc., as rewards instead of food.

Responsibilities of the Classroom Teacher/Specialist-continued

13. SNACK TIME/LUNCH TIME
 - a. Assist student with life-threatening food allergies by monitoring that ONLY foods from home or foods purchased in the cafeteria are consumed;
 - b. Promote and monitor good hand washing 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.
 - c. Prohibit students from sharing or trading food

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

14. FIELD TRIPS

a. Give the nurse as least a week notice prior to field trips for necessary preparation

b. Ensure that *the Food Allergy Action Plan* and the student’s prescribed epi-pen are taken on field trips.

c. Call 911 if an allergic reaction occurs and/or epi-pen is administered.

d. Collaborate with parents of students with food allergies when planning field trips

e. Consider eating on field trips and plan for the reduction of exposure to student’s life-threatening food allergy.

f. Enforce no eating/drinking on the bus except for water, except for unique circumstances;

g. Invite parents of those students at risk for anaphylaxis to accompany their child on school trips, and/or to act as a chaperone. However, the student’s safety or attendance must not be a condition of the parent’s presence on the trip; and

h. Collaborate with the school nurse to ensure that 1-2 people on the field trip are trained in recognizing signs and symptoms of life-threatening allergic reactions and are trained to use an epi-pen.

Responsibilities of the Classroom Teacher/Specialist-continued

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

Responsibilities of Food Service Director

1. Require campus food service staff to attend campus Level I-*Food Allergy Training* annually;
2. Review the legal protections for students with life-threatening allergies and ensure that any 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;
3. 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 health care provider/prescribing physician.

4. Maintain contact information of manufactures of food products
5. Review and follow sound food handling practices to avoid cross-contamination with potential food allergens
6. Follow cleaning and sanitation protocol to avoid cross-contamination
7. Maintain current menus via the website with notifications of any menu changes.
8. Provide specific ingredient lists to parents upon request; and
9. Require peanuts or peanut-containing products are not bought, served, or sold through district food services.

Responsibilities of athletic director, sponsors and other persons in charge of school-sponsored activities

- a. Conduct the program or school sponsored activity with AISD policies and procedures regarding students with food allergies who are at-risk for anaphylaxis.
- b. Consult with school nurse to identify students in your care who *Food Allergy Action Plans*.
Obtain a copy of the *Food Allergy Action Plans* of students in your care and ask campus nurse for any clarification needed regarding the plan.
- c. Ensure all coaches/sponsors know if student is self-carrying an epi-pen and/or where the student's epi-pen is located on campus.

- d. Restrict the use of foods that are known allergens to students with food allergies at-risk for anaphylaxis.

Responsibilities of Transportation Department

- a. Provide Level I-Food Allergy Training to all bus drivers annually. Maintain documentation of trained staff.
- b. 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 approved training by campus administration, custodial supervisor, or the school nurse to ensure student safety

Reference Source: The Food Allergy & Anaphylaxis Network's (FAAN) *School Food Allergy Program*.