

# FOOD ALLERGY POLICY & GUIDELINES

Riverside District 96 Public Schools

## Allergy Management Policy

Riverside District 96 Public Schools is committed to providing a safe and nurturing environment for students. The Riverside Board of Education understands the increasing prevalence of life threatening allergies among school populations. Recognizing that the risk of accidental exposure to allergens can be reduced in the school setting, Riverside Public Schools is committed to working in cooperation with parents, students, and physicians, to minimize risks and provide a safe educational environment for all students. The focus of allergy management shall be on prevention, education, awareness, communication and emergency response.

The goals for allergy management include:

1. To define a formal process for identifying, managing, and ensuring continuity of care for students with life-threatening allergies across all transitions (ECE-8 grade). This process shall be outlined in detail in the district's administrative procedures manual.
2. To maintain the health and protect the safety of children who have life-threatening allergies in ways that are developmentally appropriate, promote self-advocacy and competence in self-care and provide appropriate educational opportunities.
3. To ensure that interventions and individual health care plans for students with life-threatening allergies are based on medically accurate information and evidence-based practices.

In accordance with applicable law, it is the policy of the district to provide all students, through necessary accommodations where required, the opportunity to participate in all school programs and activities. Accordingly, the superintendent shall direct executive directors, district building administrators and staff, to act affirmatively and work closely with parents to assure that the needs of children with documented allergies are taken into consideration in planning for district programs. The district health services coordinator and/or other appointed designee shall ensure the district's management plan is reviewed and updated annually.

## Life-Threatening Allergy Guidelines

### BACKGROUND

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. When a physician assesses that a child's food allergy will result in anaphylaxis, the child's condition meets the definition

of “disability” and is covered under the Federal Americans with Disability Act (ADA), Section 504 of the Rehabilitation Act of 1973, if the allergy management affects the student’s ability to make educational progress.

The Riverside School District has stock epinephrine at each school. The epinephrine will be used in emergencies for students with unknown allergies who develop an anaphylactic response and for those students with known allergies when on rare occasions when their personal emergency medication is found to be flawed.

Anaphylaxis refers to a collection of symptoms affecting multiple systems in the body, the most dangerous of which are breathing difficulties and a drop in blood pressure. Foods that most commonly cause anaphylaxis, a life threatening allergic reaction, are peanuts, tree nuts, shellfish, milk, wheat, soy, fish, and eggs. These severe allergic reactions can occur within minutes of ingestion or a reaction can be delayed for up to two hours. Some reactions are “biphasic” in nature with an initial period of symptoms, a symptom free period of 2-3 hours followed by severe shock-like symptoms. At present there is no cure for food allergies and strict avoidance is the key to preventing reactions. Exposure may occur by eating the food or food contact.

## **MEDICATIONS**

The most commonly prescribed medications for the treatment of anaphylaxis are: **Epinephrine** – Brand names include, but are not limited to EpiPen®, EpiPen Jr® ,Twinject® autoinjectors. Parents usually bring epinephrine to school in the form of an EpiPen® (0.3 mg), EpiPen Jr® (0.15 mg) or Twinject® (0.3 mg or 0.15 mg) auto injectors.

**Auvi-Q** (epinephrine injection, USP). In the form of (epinephrine injection, USP) 0.3 mg, 0.15 mg Auto-Injector.

## **CARE PLAN CONSIDERATIONS/OPTIONS**

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:

**Allergy Action Plan** – a plan completed by the student’s licensed physician or physician’s designated licensed extender, i.e., a Nurse Practitioner or Physician’s Assistant that is designed for use by both nursing and school personnel. It outlines the care that a student could need in an emergency situation and used as a guide to respond to a student who is experiencing a potentially critical situation.

**Individual Healthcare Plan for Accommodations** – A document developed by the nursing staff in collaboration with parents and the school team to identify reasonable accommodations for the child’s needs throughout the school day.

**Section 504 Plan-** The intent of Section 504 of the Rehabilitation Act of 1973 is to provide students with disabilities equal access to educational programs, services, and activities. Students with disabilities may not be denied participation in school programs and activities solely on the basis of disability.

There are substantial differences across the country in legal interpretations and school district practices regarding Section 504, its definition of a qualified person with a disability, and the eligibility of students with life-threatening food allergies. Since the law provides that a team of knowledgeable persons must make eligibility determinations on a case-by-case basis, these guidelines cannot provide specific guidance on the eligibility question. Nevertheless, school districts have an obligation to provide reasonably safe environments for all students. Whether students with life-threatening food allergies are identified under Section 504 as disabled individuals or not, Riverside Public School will provide these students with individualized health care plans to address their health and safety needs.

### **Responsibilities of the Parent/Guardian of an Anaphylactic Student**

Each parent/guardian of their child with a Life-Threatening Allergy shall have the following expectations:

1. Teach your child to:
  1. Recognize the first symptoms of a food allergic/anaphylactic reaction.
  2. Communicate with school staff as soon as he/she feels a reaction is starting.
  3. Carry his/her own epinephrine auto-injector when appropriate.
  4. Not share snacks, lunches, drinks or utensils.
  5. Understand the importance of hand washing before and after eating.
  6. Report teasing and/or bullying that may relate to the child's disability.
2. Take responsibility for his/her own safety. As children get older, teach them to:
  1. Encourage self-advocacy of the seriousness of the allergy to adults and peers.
  2. Communicate symptoms as soon as they appear to the school nurse and teacher.
  3. Encourage education on label reading and ingredient safety.
  4. Administer his/her own epinephrine auto-injector and be able to train others in its use.
  5. Develop awareness of their environments, including allergy-controlled zones and to practice age appropriate behavior regarding health and safety.
3. Inform the school nurse of your child's allergies prior to the opening of school (or as soon as possible after diagnosis). **All food allergies must be verified by documentation from physician or physician's designated licensed extender (Nurse Practitioner (NP) or Physician Assistant (PA)).**
4. Work with the school team collaboratively to develop the Individual Health Plan for Accommodations, in the classroom, in the cafeteria, programs, during school-sponsored activities, and provide an **Allergy Action Plan**. Medical information from the child's treating physician must be provided as needed to write the Plans. (A licensed physician is defined as a doctor of medicine (MD) or a doctor of osteopathy (DO) is recognized.)

5. The Plan should also promote increasing age-appropriate independence (ages 8 -13) as the student grows and matures. In determining age-appropriate independence the student's level of autonomy and their ability to function autonomously is considered.
6. Complete and submit all required medication and health forms.
7. A physician signature is required on district allergy action plans and self-administration plan. Sign release for school personnel to consult with family physician/allergist and all medical providers as needed.
8. Provide the school with current cell phone, pager, etc and maintain updated emergency contact numbers and medical information.
9. Provide the school nurse with up-to-date emergency medications (including Epinephrine) so 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.
10. To consider providing a medical alert bracelet for your child. Nationally accepted bracelets may be found at: Medic Alert, 1-800-432-5378; 2323 Colorado Avenue, Turlock, CA 95382; [www.medicalalert.org](http://www.medicalalert.org)
11. To complete appropriate forms requested by Transportation or other appropriate departments and/or programs.
12. Provide Epinephrine on field trips.
13. To go on your student's field trips if possible and if requested.
14. To provide "safe snacks for your student's classroom so there is always something your child can choose from during an unplanned special event.
15. Encourage child to wash hands before and after handling food. Encourage child to identify the allergy controlled zone when eating and to utilize easy access to soap in or near classrooms.
16. Inform the school of any changes in the child's Life-threatening Food Allergy status.
17. Provide the school with the physician's statement if the student no longer has food allergies.

## **EXPECTATIONS OF STUDENT**

1. Each student with a Life-Threatening Allergy shall be expected for the following:
2. To develop a relationship with the school nurse and/or another trusted adult in the school to assist in identifying issues related to the management of the food allergy in the school. (Trusted adults are people who respect your feelings will listen and help work out a solution to any problem you may have. Trusted adults will provide guidance and support).
3. Use proper hand washing before and after eating and throughout the school day.
4. To avoid sharing or trading of foods or eating utensils with others. Take responsibility for avoiding food allergens.
5. To not eat anything with unknown ingredients or known to contain any allergen.
6. To avoid putting anything in mouth such as writing utensils, fingers, or other foreign object.
7. To be proactive in the care and management of their food allergies and reactions based on their developmental level. Learn to recognize personal symptoms.
8. To notify an adult immediately if they eat something they believe may contain the food to which they are allergic.
9. To notify an adult if they are being picked on or threatened by other students as it relates to their food allergy.

10. To keep emergency epinephrine with the student, in the school's office or in the classroom. If the student is authorized to carry the emergency medication with them at all times, he/she will demonstrate responsibility of this practice by reviewing with the nurse proper handling and storage of epinephrine injector.
11. To develop an awareness of their environment and their allergy-controlled zones.
12. To develop greater independence to keep themselves safe from anaphylactic reactions.

## **RESPONSIBILITIES OF SCHOOL ADMINISTRATOR**

Riverside Public Schools shall ensure the following:

1. Follow all applicable federal laws, including ADA, Section 504, and FERPA, as well as all state laws and district policies/guidelines that may apply.
2. To have available the appropriate allergy forms to the parent and explain that the required forms must be returned and approved by the school nurse prior to the child attending school.
3. Meet with parents and listen to their needs and concerns.
4. The HIPAA Compliant Authorization for Exchange of Health & Education Information will be presented to parents for signature to provide needed communication between the supervising physician and school for effective implementation of the plan on an as needed basis.
5. Riverside District 96 can establish a core team comprised of Parent, Principal, Teacher, Student, Nurse, Cafeteria Manager, and other personnel deemed necessary to make decisions about food allergies.
6. Create an emergency action plan for addressing life-threatening food based allergic reactions with consulting the school nurse, student's parent(s)/guardian(s), and physician.
7. Ensure 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. A description/definition of severe allergies and a discussion of the most common foods causing allergic reactions.
  - b. The signs and symptoms of anaphylaxis.
  - c. The correct use of an Epinephrine.
  - d. Specific steps to follow in the event of an emergency. In addition, parent/staff educational meetings may be scheduled as medical personnel are available.
8. Reinforce a no-food and no-utensil trading /sharing best practice will be encouraged.
9. Ensure that the School Nurse in consultation with suggestions from student's parent(s)/guardian(s) and the physician or designated licensed extender will prepare the Individual Health Plan for accommodations. The physician will prepare and sign off on the Allergy Action Plan.
10. Establish life-threatening allergy safe zones as needed in each school cafeteria including allergy safe zones. These zones will be designated by a universal symbol. These zones will be cleaned and sanitized as per district protocol (see Nutrition Services and Custodial Services Section).

11. Ensure the Individual Health Plan for Accommodations available in the nurse's office and a student's homeroom at the elementary levels and in the nurse's office at the secondary schools.
12. Recommend that parents/guardians attach a photograph of their student with a Life- Threatening Food Allergy to their Individual Health Plan for Accommodations. When appropriate; student's photos will be placed in the kitchen only for kitchen staff to view as an extra protective measure. Pictures will be out of view of other students and carried out in accordance with patient confidentiality regulations.
13. When appropriate, enforce students are allowed and encouraged to carry their Epinephrine on them, as allowed by the district's Administration of Medication Policy and Self- Administration Epinephrine Authorization Plan.
14. Ensure that information is in an organized, prominent and accessible format for a substitute teacher is available with ease of access. When appropriate, familiarize teachers with the Individual Health Plan for Accommodations of their students and any other staff member who has contact with student on a need-to-know basis.
15. Instruct and reinforce with facilities personnel to develop cleaning protocol to ensure that the threat of allergens is minimized.
16. Establish procedures to ensure letters to all parents of children assigned to a classroom where one of the students has been identified as having a Life- Threatening Allergy (K-5) and school- wide for secondary students. This will be carried out in accordance with patient confidentiality regulations.
17. Notify staff of the locations of Epinephrine's in the school.
18. A contingency plan will be in place using designated building staff and understood by all staff and students in the event the nurse is not in the office or in the building. Staff will call 911 in all instances of Epinephrine administration.

## **RESPONSIBILITIES OF SCHOOL HEALTH PROFESSIONALS**

The school nurse is the primary coordinator of each student's life-threatening allergy plan. Each school nurse will have the following responsibilities:

1. Meet with parent/guardian(s) of a student with a Life-Threatening Allergy to develop an Individual Health Plan for Accommodations for the student, which may include the use of MEDIC-ALERT bracelets and other methods of identification for students with Life-Threatening Allergies.
2. Maintain updated AAP/Individual Health Plan for Accommodations in the nurse's office, in the classroom when appropriate, and with Epinephrine's that are carried by identified students. The emergency action plans will also travel with the Epinephrine's on school sponsored field trips.
3. Assist the principal in providing information about students with Life-Threatening Allergies to staff where there is a need-to-know basis.
4. In conjunction with the principal, provide yearly in-service training and education for staff regarding Life-Threatening Allergies, symptoms, risk reduction procedures and emergency procedures including demonstration on how to use the Epinephrine. **The school nurse shall retain documentation of those personnel who have received training on a yearly basis.**

5. Familiarize teachers/substitutes with the Individual Health Plan for Accommodations of their students and any other staff member who has contact with student on need-to-know basis.
6. The Department of Health guidelines and The Illinois State Board Nurse Practice Act governing the administration of prescription medications, and school board policy will be followed in emergency situations. Nurses are responsible for following the regulations that permit registration of non-licensed personnel to be trained and to administer emergency medications such as Epinephrine.
7. Educate with parents the appropriate locations for storing the Epinephrine and the possibility of receiving more than one Epinephrine as necessary. Locations for storage will follow the manufacturer's guidelines for avoidance of light and extreme temperatures.
8. Inform the school principal and parent/guardian if any student experiences an allergic reaction that has not been previously diagnosed.
9. Contingency plan will be in place in the event the nurse is not in the building utilizing trained and identified back-up personnel.

### **RESPONSIBILITIES OF TEACHERS**

Each teacher shall have the following responsibilities:

1. Knowledge of the signs and symptoms of severe allergic reaction as provided in the student's health care plan, and be aware of and implement the emergency plan if a reaction is suspected.
2. Review the Individual Health Plan for Accommodations in a setting with the nurse and parent(s)/guardian(s) of any student in your classroom with life-threatening allergies along with relevant staff members.
3. Participate in in-service training about students with life-threatening allergies including demonstration on how to use the Epinephrine.
4. In collaboration with the nurse and parent(s)/guardian(s) of the allergic child, will set a classroom protocol regarding the management of food in the classroom. This protocol will be communicated by the teacher to the students and parent(s)/guardian(s) of the affected class.
5. Participate in the planning of a student's re-entry into school after an anaphylactic reaction.
6. Notify parents by written communication of any school related activity that requires the use of food in advance of the project or activity (ECE-8). (Learning activities will be controlled as much as possible) Limit use of food for instructional lessons.
7. Collaborate with administration, nurse and parents to send out letters to all parent(s)/guardian(s) of students in a class with an individual with a Life-Threatening Allergy announcing potential food use instructionally.
8. Reinforce appropriate classroom hygiene practices/hand washing before and after eating.
9. Respond immediately to reports of students being teased or bullied about their food allergies.
10. Follow Allergy Action Plan and call 911 when life-threatening related symptoms occur.

### **RESPONSIBILITIES OF NUTRITION SERVICES**

The nutrition services department shall:

1. Provide in-service to nutritional service employees regarding safe food handling practices to avoid cross contamination with potential food allergens.
2. Food service employees will wear non-latex gloves. Gloved hands will be washed or changed during extended use to avoid cross contamination with potential food allergens.
3. 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)
4. Maintain knowledge of which food products contain allergens.
5. Provide allergen-safe zones at schools where students with applicable food allergies are identified with universal symbol.
6. Participate in in-service training for students with life-threatening allergies including demonstration of Epinephrine use.
7. With parental approval, set up reasonable procedures for cafeteria regarding food allergic students, 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.
8. Respond appropriately to all complaints/concerns from any student with a life-threatening allergy, including allowing student to see school nurse if complaining of any potential symptoms. A response to complaints/concerns would also include any type of hazing or inappropriate behavior on the part of other students.

### **RESPONSIBILITIES OF CUSTODIAL SERVICES**

The custodial service department shall under the direction of the Building Principal:

1. Use a separate wash bucket and cloth with district-approved cleaning agents solely for the cleaning of allergen-safe zones. This will include disinfecting solution and PH7 all-purpose soap as effective cleaning solutions.
2. Receive training on allergen zone maintenance areas.
3. Participate in in-service training for students with life-threatening allergies including demonstration of Epinephrine use.



### **RESPONSIBILITIES OF THE TRANSPORTATION DEPARTMENT**

All school bus drivers shall be informed when he/she is transporting a child with a Life-Threatening Allergy. The school bus drivers shall:

1. The transportation department maintains health concern files separately from those maintained at each school. When a student is added to a bus route, a transportation health concern form is mailed home to the parent(s)/guardian(s). It is the parent(s)/guardian(s) responsibility to communicate health concerns such as a life-threatening allergy directly to the transportation department by returning the completed form (see Transportation Section).
2. Have functioning emergency communication devices (e.g., cell phones, two-way radios, etc.) on each bus.
3. Maintain and reinforce policy of no food eating on the bus except for those medically documented needs, i.e., diabetics. In cases of medically documented needs, those students must bring allergen safe foods for eating on the bus.
4. Students with life-threatening allergies should sit immediately behind and to the right side of the bus driver when transporting to/from school.
5. Bus drivers will not hand out food treats even on special occasions.
6. Provide all students using district transportation with the transportation health concerns form and maintain a list of students with identified health concerns including anaphylactic risk.
7. Participate in in-service training for students with life-threatening allergies including demonstration of how to use the Epinephrine.

### **RESPONSIBILITIES OF PERSONS IN CHARGE OF CONDUCTING AFTER-SCHOOL ACTIVITIES:**

Person(s) in charge of extracurricular programs shall have the following responsibilities:

1. The Allergy Action Plan will be available for parents to copy and give to others who assume responsibility for their child. Personnel may include:
  - a. Before or after school activity instructors
  - b. Coaches
  - c. Kids Zone/Child Care
  - d. Overnight tournament sponsors or district chaperones
  - e. 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 parent(s)/guardian(s).

2. District employees will participate in in-service training about students with life-threatening allergies including demonstration of Epinephrine use at least annually. The training will be documented and kept on file.

### **RESPONSIBILITIES DURING RECESS AND PHYSICAL EDUCATION**

**CLASSES:** During recess and physical education classes for a student with a Life-Threatening Allergy, the school shall have the following responsibilities:

1. Children will be under the supervision of at least one adult. Epinephrine Packet will be taken outside if specified in the child's Allergy Action Plan/Individual Health Plan for Accommodations. The epinephrine will be carried by a designated district employee or by the student with a completed Epinephrine Self-Administration Packet for Anaphylaxis.
2. Emergency communication device (walkie-talkie, cell phone) will be accessible and functional.

### **RESPONSIBILITIES ON FIELD TRIPS**

The school shall have the following responsibilities when a student with Life-Threatening Food Allergy attends field trips:

1. On field trips consideration given for avoiding food allergen exposure, and parental attendance is encouraged.
2. Meals of children with food allergies should be stored separately to minimize cross contamination.
3. An in-serviced trained district employee such as the classroom teacher will accompany the class on the field trip and will maintain each applicable student's Epinephrine and will follow the child's Allergy Action Plan/IHCP.
4. Copies of student's Allergy Action Plan will be carried on all field trips.
5. Staff will call 911 in all instances of Epinephrine use. Parent(s)/Legal Guardian(s) will be notified.

## KEY POINTS FOR PARENTS, STUDENTS AND STAFF

- **You are never alone.** It takes a team to ensure the best for our students. Help is usually a phone call away.
- **Educate, Educate, Educate.** This is an ongoing process that changes with the students' needs and as the staff changes. Food bans do not work because it creates a false sense of security. Today, processed foods contain trace amounts of food items that are not always identified on the food label. The best plan is to educate our school community about the issues that face students with life threatening allergies.
- **Special events/Non-routine days.** The greatest risk for a life threatening allergic reaction exists when the normal routine is broken. Examples are classroom parties, field trips, a substitute teacher, and after school events. **Be Prepared.** Always have the Allergy Action Plan (AAP) available and think ahead to prevent possible exposures to a food allergen.
- **Symptoms vary greatly. Call 911** when uncontrolled anaphylactic symptoms occur or if ingestion is strongly suspected. Use emergency medication (i.e. Epinephrine) if needed and follow the AAP
- **Be safe, not sorry!** Take all complaints from children with food allergies very, very seriously. It is important to respect the needs and rights of each student.
- A child with a life threatening food allergy should **NEVER eat unexamined food.**
- In the event a student has an allergic reaction at school, **call 911 and administer emergency medication** (i.e. antihistamine and Epinephrine) as ordered by the student's physician. Key staff members should be trained to use emergency medications and know the location of those medications at school and on any special function. **If epinephrine (Epinephrine) is used, the student should be taken to the hospital for evaluation even if the allergic reaction symptoms subside.** The school principal, nurse and parent/guardian should be notified as soon as feasible. 911 should be called for all suspected food allergy reactions. No one can predict how a reaction will progress. A mild reaction can blossom into a full blown anaphylactic reaction very quickly or over several hours. A reaction can also appear to subside or even appear to be under control and can blossom again into a more severe reaction.
- **Cross contamination.** It only takes a trace amount of the food protein to cause an allergic reaction. To prevent exposure to an allergen, **hand washing and washing of surfaces** (tables, chairs, mixing bowls, etc.) where an allergen has been used is necessary. Soap and warm water are most effective for cleaning surfaces.

## RESOURCES

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

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

National Association of School Nurses. <http://www.nasn.org>

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

- The Food Allergy & Anaphylaxis Network (FAAN)
- Allergy, Asthma Information Association of Canada (AAIA)
- American Academy of Allergy, Asthma & Immunology (AAAAI)
- National Association of School Nurses (NASN)
- Asthma & Allergy Foundation of America (AAFA)
- Food & Drug Administration's Website
- Food Anaphylaxis Education's Website