

Explanatory Notes

TASB Localized Policy Manual Update 94

District: Brackett ISD
F (LEGAL) STUDENTS

We have revised the F section table of contents to rename FFAF, now subtitled Care Plans.

FFAF (LOCAL) WELLNESS AND HEALTH SERVICES
CARE PLANS

SB 27 from the 82nd Legislative Session required the commissioner of state health services, in consultation with an ad hoc committee, to create guidelines to help districts develop local policy for the care of students with a diagnosed food allergy who are at risk for anaphylaxis. The commissioner's guidelines may not require a district to purchase prescription anaphylaxis medicine or require the administration of anaphylaxis medication to a student unless the medication is prescribed for that student. These legal provisions were added to FFAF(LEGAL) at Update 91.

The law requires districts to adopt local policy by August 1, 2012, and the local policy must be based on the guidelines.

The *Guidelines for the Care of Students with Food Allergies At-Risk for Anaphylaxis* were made available on May 22 at <http://www.dshs.state.tx.us/schoolhealth/default.shtm> and state that the following components should be addressed in policy and administrative regulations:

- Identification of students with food allergies who are at risk for anaphylaxis
- Development, implementation, communication, and monitoring of emergency care plans, individualized health-care plans, and/or Section 504 plans for students with food allergies who are at risk for anaphylaxis
- Reduction of the risk of exposure within the school setting
- Training for school staff on anaphylaxis and emergency response to anaphylactic reactions
- Post-anaphylaxis reaction review of policies and procedures

The *Guidelines* include additional detail on each of the above components.

The enclosed policy, now subtitled Care Plans, incorporates these elements by requiring the district to develop and implement a student FOOD ALLERGY MANAGEMENT PLAN that includes general procedures to limit the risk posed to students by food allergies and specific procedures for when a student is identified with a diagnosed food allergy and is at risk for anaphylaxis.

The policy includes a requirement to develop GENERAL PROCEDURES on the following:

- Specialized training for employees responsible for the development, implementation, and monitoring of the district's food allergy management plan. The *Guidelines* explain that this training is more comprehensive than the general awareness training listed below and should address management of food allergies in the school setting.
- Awareness training for employees on the signs and symptoms of food allergies and emergency procedures employees should follow in the case of a student's anaphylactic reaction. The *Guidelines* include suggested elements of this training and provide information about online training and other training resources.
- General strategies to reduce the risk of exposure to common food allergens. The *Guidelines* include many strategies for the district to consider; the strategies implemented will vary from district to district based on local circumstances.

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- Methods for requesting specific food allergy information from parents. Once a student is identified as having a food allergy and as being at risk for anaphylaxis, the district will need to implement procedures related to the care of that student.
- Annual review of the food allergy management plan.

In addition to these general procedures, the policy requires development of procedures for STUDENTS AT RISK FOR ANAPHYLAXIS, including:

- Development and implementation of food allergy action plans, emergency action plans, individualized health-care plans, and Section 504 plans, as appropriate.
- Training as necessary for employees and others to implement a student's care plan. This training will focus on the roles of various individuals in implementing the specific elements of the care plan and will include strategies to reduce the student's risk of exposure to the diagnosed allergen.
- Review of individual care plans and procedures periodically and after an anaphylactic reaction at school or at a school-related activity. The *Guidelines* emphasize that the review after an anaphylactic reaction would provide an opportunity to adjust the procedures and plans and ensure that any medication used during a reaction is replaced. Periodic review may be necessary, for example, when a student changes grade levels or campuses.

At DISTRIBUTION, the policy also requires the district to provide information about the policy and the food allergy management plan in the student handbook and to make the materials available at each campus.

On June 15, 2012, Policy Service will publish sample administrative procedures and forms in Update 41 to the *Regulations Resource Manual*, available on myTASB. The regulations are aligned with the local policy text and will allow the district to designate a district-wide food allergy coordinator, if any; indicate whether the district will create food allergy management teams at the campus level; and develop procedures to implement the local policy requirements.

Please note: Because the law requires districts to adopt a local policy so quickly, districts in which the local policy adoption process calls for two readings of a proposed policy may wish to implement the process for emergency adoption with one reading. [See BF(LOCAL).]