

Mt. Lebanon School District

Food Restriction Management

Guidelines

Rev. 2/09
4/2012
10/2013
8/2016

Mt. Lebanon School District

Food Restriction Management Guidelines

There is an increasing prevalence of life threatening food allergies and food restrictions in school age children. The following guidelines are designed to help maintain a safe and secure environment for students with life threatening food allergies and food restrictions.

Allergic Reaction Characteristics

Allergic reactions vary among students and can range from mild to severe, and potentially life-threatening anaphylactic reactions. Every food allergic reaction has the possibility of developing into a life-threatening reaction. 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 or shock, which are potentially fatal. Anaphylaxis can occur in allergic individuals after exposure to a specific allergen even when prior exposure to the allergen has not resulted in symptoms. Anaphylaxis can occur immediately or up to several hours following allergen exposure. Some students, who are very sensitive, may react to just touching or inhaling the allergen.

The most common causes of anaphylaxis in children include allergies to:

- Food (most commonly: peanuts, tree nuts, milk, eggs, soy, wheat, fish, shellfish)
- Insect stings (most commonly: yellow jackets, bees, wasps, hornets)
- Medications
- Latex

Children have food restrictions for many different medical reasons besides allergies. These may include: Diabetes, Celiac Disease; Food Intolerances not due to allergic reactions, to name a few.

Food Restriction Management Plans

The goal of effective food restriction management is to reduce and/or eliminate potential reactions. The keys to meeting this goal are prevention, education, awareness, communication and emergency response.

Adults responsible for students with food restrictions must be familiar with each student's individual health plan. These plans contain the specific actions necessary to keep the student safe. All concerns from students with a food restriction are to be taken seriously. Students with food allergies and restrictions are more likely to succeed in school when

parents/guardians, school personnel and healthcare providers work collaboratively to ensure effective food restriction management.

A Food Restriction/ Life Threatening Food Allergy Action Plan (form #423-C) will be completed by the parents/guardians of students with allergies or restrictions. A photo of the student will be attached to this health care plan. The school nurse will review the plan:

- The certified school nurse will meet with parents/guardians, teacher, and other appropriate school personnel, as needed, to discuss the plan or will discuss the plan with the parents/guardians via a phone conference.
- The plan will be reviewed annually and/or as needed throughout the school year.
- The plan will be shared with all appropriate school personnel (teacher, principal, coaches, health aide, secretary, cafeteria workers, etc.) and kept in a confidential manner in accordance with district practice.
- The Food Restriction Plan will be located in the health office. The original is kept in the health record with a copy inserted in to the bag that contains the students emergency medication.(if applicable)

Medication form #440 is required to be completed by both a physician and parent for all prescription and non prescription medication given during school hours. The standard medication ordered for potentially life threatening allergic reactions is epinephrine .

- Parent/guardian will provide the medication in the properly FDA labeled container and will replace the medication when it expires.
- If the student's physician and parent sign the medication form permitting self-administration of an epinephrine auto injector, the student may carry his/her epinephrine auto injector after demonstrating to the certified school nurse competency in self-administration/self carry and an adequate knowledge of the disease process in accordance with district policy.
- If the student self carries his/her epinephrine auto injector and uses it due to an allergic reaction, the health office must be notified immediately.

The district maintains an authorization signed by the school district physician to administer Epinephrine to individuals with unknown life threatening allergies, in the event that they exhibit symptoms of anaphylaxis. (refer to the medication policy) Epi-pens are available in each building for use by trained personnel. The Epi-pens are kept in the emergency bag in the health office and in the cafeteria's of all buildings. Parents shall hold harmless the school entity and the school district shall incur no liability, except for willful misconduct, arising from the use of an epinephrine auto injector, regardless of whether authorization was given by the student's parent or physician prior to its usage.

Education

Parent/Guardian/Community Education

- Include information and district guidelines regarding the rise in life threatening food allergies/restrictions annually in the student handbook and PTA newsletters
- Administrators shall inform all groups/organizations using school space during or after school hours that products containing nuts should not be brought into the building.
- Groups/organizations are also expected to clean the area of all food products when the activity is completed.
- Parents of students with allergies, who purchase food products at school, should check with appropriate school personnel for ingredients when necessary.

Faculty and Staff Education

- Provided annually and as needed by the certified school nurse and/or her designee
- Management of students with food restrictions
- Management of student life threatening food allergies including the prevention of exposure to allergens and the types of common allergens
- Recognition of signs of an allergic reaction including anaphylaxis
 - Itching , swelling of lips, tongue or mouth
 - Itching, and/or a sense of tightness in throat; hoarseness, hacking cough
 - Hives, itchy rash and/or swelling around the face or extremities
 - Shortness of breath, repetitive cough and/or wheeze
 - Thready pulse, fainting or “passing out”
 - The severity of the symptoms can quickly change and can potentially progress to life threatening (breathing difficulties, shock)
- Epi-pen training with periodic review as necessary during the school year (i.e., prior to field trip)
- ***IF AN EPIENPHRINE AUTO INJECTOR IS USED, 911 MUST BE CALLED IMMEDIATLEY***

How to administer an Epinephrine Auto Injector:

- Immobilize leg of person so person does not jerk away when the epinephrine auto injector is injected. (If available, assistance from another adult is helpful.)
- Student should be sitting or lying on the floor or cot
- Pull off blue safety cap
- Firmly place orange tip on upper outer thigh (**always apply to upper outer thigh**). Can be administered through clothing.
- Using a quick motion, press hard into thigh until Auto-Injector mechanism clicks. Hold in place and count to 10.
- Massage area for 10 seconds.
- Place the used epinephrine auto injector inside the container it came in or bend exposed needle back on hard area and alert custodian of the need to clean a blood borne pathogen area.

- Document the time epinephrine auto injector was given – can write directly on person’s skin.
 - The used epinephrine auto injector unit should be sent to the emergency room with the person.
 - Keep individual lying flat. If in respiratory distress, allow to sit in a comfortable position.
- Emergency response plan (if specific allergy action plan is unavailable or for those with unknown allergy)
 - Recognize symptoms
 - Inject epinephrine auto injector, if trained and/or contact health office
 - Call 911 (must be called if epinephrine auto injector is used)
 - Call parent/guardian
 - Life Threatening Allergy Action Plan (form 423-C) (contains specific care information for individual student-follow directions)
 - Threats or harassment against the food allergic child will be addressed according to district bullying guidelines (i.e., using a food allergen -- placing peanuts in the lunch bag of a peanut allergic student or similar acts).

Day to day substitute teachers as well as long term substitute teachers also require notification and training on the management of students with potentially life threatening allergies and food restrictions. Administrators are responsible for designing a building plan.

Examples:

- **A brightly colored sticker is placed on the sub folder and the following statement included in the folder:**
 “See the building nurse for review of the Confidential Health List and training in implementing any pertinent Student Emergency Action Plan before first period.”

Student Education

- Information is included in health class and in the family and consumer science curriculum on food allergies.
- Age appropriate review of food allergies may be conducted with classroom students at the beginning of the school year. Collaboration between appropriate teachers and certified school nurse should occur.
- All students are instructed that trading of food in the classroom or lunchroom will not be permitted.
- The importance of hand washing before and after eating is emphasized.
- Students are instructed to notify teachers, nurse, or other school staff members IMMEDIATELY if they have been exposed to an allergen or feel the symptoms.
- Food allergic students may review with the school nurse how to use their epinephrine auto-injector.

Procedures

Lunchroom/Cafeteria Procedure

- An **Allergy Aware** table will be offered and is provided at the elementary level at parent/guardian's request.
- Computer codes indicate allergy information in secondary cafeterias.
- Tables in the cafeterias and lunchrooms are cleaned between lunch periods.
- Students are reminded not to share food and keep their food items within their table space.
- **Students with life threatening food allergies and food restrictions are encouraged to bring their own lunches and snacks to school to reduce the risk of accidental contamination/ingestion.**

Classroom Procedure

- Procedures will address education of classroom parents as needed. For example, with the consent of the food restriction student's parent, a letter will be sent home to all classroom parents sharing information about food restrictions and the procedures to follow to help maintain a safe learning environment for all students.
- The students will receive age appropriate information at the beginning of the school year as needed.
- As per the District's Wellness Policy, food provided in the classroom is only permitted under clear circumstances. Specific protocol regarding management of food in the classroom will be developed per each school's building principal and certified school nurse.
- **Food provided to students in the classroom will be peanut and tree nut free.**
- **Parent/guardian of a food restrictive student should provide a safe snack/treat box for their child's classroom. (in the event that food is served).**
- **Classroom treats should not be sent home with food restrictive students.**
- **ELEMENTARY : When the school is providing food for an event, the school staff will notify parents/guardians of food restrictive students. If a parent of a food restrictive child checks the specific food label and declares, in writing (using the Dietary permission form 423-H)the item to be safe for his/her child, then the student may partake of the school sponsored snack/treat. If written parent/guardian permission is not obtained, then the student must eat from his/her safe snack/treat box, which the parent/guardian provided for the classroom.**
- **School District Personnel are not permitted to declare a food safe for a food allergic/restrictive studentand/or provide a "food safe" list for students to pick from.**

Field Trip Procedure - Teacher

- **Notify the school nurse of all field trips at least two weeks prior to the scheduled date.**

- Collaborate with the school nurse prior to field trip.
- If appropriate, consider inviting the parent/guardian of student with potentially life threatening allergies or food restrictions to attend the field trip. However, the parent/guardian's presence on the field trip is not required.
- Consider eating situations and other environmental situations on field trips and plan for prevention of exposure to the student's life threatening allergies/restrictions.
- Consider ways to wash hands before and after eating.
- Review emergency plan and epinephrine auto injector procedure with the school nurse prior to the field trip.
- Obtain medication (epinephrine auto injector), medication order and copy of Life Threatening Allergy Action Plan or Food Restriction Health Plan from the nurse for the food allergic/restrictive student.
- Food allergic/restrictive student should be with a district teacher's group if the parent is not in attendance.

School Sanctioned Extracurricular/Sports and Activities – Coaches & Advisors

- Coaches/Trainers- Review the health information in Family ID prior to each season to identify the food allergic/restrictive student(s) participating in the sport.
- Advisors- Review the health information in PowerSchool and/or with the school nurse to identify food allergic/ restrictive student(s) participating in the activity.
- Parent/guardian of students with severe allergies should contact the coach/trainer/advisor to develop a plan for emergency medication during activities.

Attachments:

School Wellness Policy (JLJ) and Guidelines
 School Wellness Quick Reference Guide for PTA, Parents, and Staff
 Allergy Action Plan #423-C
 Dietary Permission Form #423-H
 Medication Form #440