



## Rochester Community Schools Guidelines and Protocols for Students with Food Allergies

Rochester Community Schools recognizes the large number of students in our schools with potentially life-threatening food allergies. It is the District's responsibility to develop appropriate health plans for students with food allergies that detail emergency treatment while proactively addressing conditions to prevent exposure to specific allergens. While the medical and health-related needs are unique for each child, the intention of this regulation is to establish a set of consistent, systematic practices within the district.

A collaborative partnership between school, families, and medical personnel can provide a safe and healthy learning environment, which will help students with food allergies make the transition from the safety of their home environment into the expanding world of a school. Although there are other life-threatening allergy conditions that exist, these guidelines and protocols recognize that food allergies are the most common cause of life-threatening allergic reactions at school. The most common food allergens include peanut, tree nut, dairy, eggs, fish, shellfish, wheat, and soy.

The Rochester Community Schools "Managing Life-Threatening Allergies in School Children: Guidelines and Practices" handbook is referenced in the regulation and serves as a more thorough guide. It contains the complete/full staff responsibilities lists, educational components, forms, suggested resources, and signage to aid in the overall food allergy management program.

### General

1. Each student with an *epinephrine auto-injector* **MUST** have a severe allergy **Medical Action Plan (MAP)** specific to them and signed by their physician and parent/guardian, giving instructions on what to do if the student has an allergic reaction.
2. RCS Staff will keep student information private unless permission was given by the parent/guardian in writing to share names or allergies.
3. Classroom rewards, academic or behavioral incentives will consist of non-food items only.
4. Unscheduled/unplanned food distribution is not permitted.
5. Whenever food is served, before or after school, thorough cleaning processes of all hard surfaces, tables, utensils, serving platters, etc. must be followed.
6. RCS Staff will inform parents/guardians in advance of any classroom activity or school events where food will be served (at least 48 hours is preferred.).
7. Never question or hesitate to act if a student reports signs of an allergic reaction.
8. RCS staff will enforce a zero-tolerance approach, in accordance with the RCS Code of Conduct, regarding bullying and threats toward any students with food allergy conditions. When appropriate, conduct classroom education for students regarding food allergies.
9. During school hours, food should not be eaten/served in common areas outside of the cafeteria, such as the school office, computer lab, and multi-purpose rooms, while those areas are in use by students.

10. All classrooms that cook or use foods for activities/instruction will contain ingredients suitable for those students in that room with food allergies. RCS staff will inform parents/guardians of planned food usage, in any classroom, ahead of time. Ingredient lists must be made available (48 hours is preferred).
11. All elementary school staff and students will wash their hands after eating or touching any foods in classrooms where anaphylactic food allergies exist and prior to resuming classroom activity following the lunch/recess period.
12. Elementary classroom-provided birthday celebrations will be limited to **non-edible items and/or activities**. Refer to *Alternatives to Food-Based Celebrations and Rewards* in Appendix of “*Managing Life-Threatening Allergies in School Children: Guidelines and Practices*” for activity ideas.
13. Snacks should be free from food allergens specific to students in the classroom. No student will provide or share a snack with another student.
14. All before-and after-hours, school sponsored events that serve food must:
  - Provide an area in which foods are clearly labeled and free from allergens.
  - Serve other foods that are not guaranteed allergen safe (cut-up vegetables, sliced meats, cheese, etc.) in a separate location/table area.
  - Avoid serving food with known allergens from restaurants. Ingredient labels must be provided.
15. For all student events during school hours when food is served:
  - Provide only manufactured, pre-packaged, labeled foods in classrooms where anaphylactic food allergies exist. No homemade foods items will be permitted.
  - Consult with principals and/or teachers when planning events.
  - Consider food restrictions of members as appropriate of individual groups or clubs (i.e., Robotics club, swim team, etc.).
  - Avoid serving food with known allergens from restaurants. Ingredient labels must be provided.
16. For elementary school classroom party celebrations that occur for Halloween, the winter holidays, Valentine’s Day or end of year, only pre-packaged, labeled, and manufactured foods should be brought to school for the celebrations. Cut-up fruits and vegetables are allowable for classrooms that do not have students with life-threatening allergies. Classrooms with food allergen situations may have further restrictions. Additionally, if students are participating in the exchange of valentines, only non-edible valentines (no candy or food) should be brought to school for distribution to other students.

### **Responsibilities of Students with Food Allergies**

1. Be firm and say "No, thank you" when offered food that did not come from home (unless reading food labels or other safety measures are in place).
2. Take as much age-appropriate responsibility as possible for avoiding allergens.
3. Know where medication is kept and assume responsibility when self-carrying to check that the epinephrine auto-injector is present.
4. Do not trade or share any food, drink, utensils, or food containers.
5. Wash hands with soap and water or use a hand wipe (not hand sanitizers) before and after eating.
6. Learn to recognize the symptoms of an allergic reaction.
7. Promptly and insistently inform an adult as soon as accidental exposure occurs or if symptoms appear with no known exposure.
8. Do not share epinephrine auto-injector with other students.
9. When eating in the cafeteria, sit at the assigned table if it is part of the ***Risk Reduction Strategy***.
10. When riding a school bus, sit in the seat designated by the bus driver if this is part of the ***Risk Reduction Strategy***.
11. Promptly report any teasing or bullying to an adult.
12. Learn how to read food labels when developmentally appropriate.
13. To prevent cross-contamination, stow lunches or snacks with individual belongings (i.e. backpack, cubby, locker, etc.) instead of in classroom-wide lunch or snack storage bins.

### **Responsibilities of Parents/Guardians of Students with Food Allergies**

1. Bring the severe allergy ***Medical Action Plan (MAP)*** with picture, epinephrine auto-injectors, and other prescribed medications to the school office prior to the start of the school year. ***MAPs*** must be updated prior to the start of each school year. Note the expiration date for medications and remember to replace them when necessary. If your child's ***MAP*** includes liquid antihistamine, provide the medication-measuring cup.
2. Be willing to provide safe snacks for the student to keep in the classroom, as needed.
3. Teachers will not be responsible for making decisions regarding food/snacks unless pre-approved by parents/guardians in writing.
4. Consider attending field trips when possible.
5. Consider participating in planning for special events, parties, and celebrations that occur in the classroom or school and for teams, clubs, etc.
6. Strongly consider providing a medical alert bracelet or ID for student to wear.

7. Refer to “*Managing Life Threatening Allergies in School Children: Guidelines and Practices*” for complete list of responsibilities and documents.

### **Responsibilities of Superintendent and/or Designee**

1. Lead the District’s coordinated approach to managing food allergies.
2. Prepare for food allergy emergencies.
3. Support professional development on food allergies for staff.
4. Educate students and family members about food allergies.
5. Create and maintain a healthy and safe school environment.
6. Refer to “*Managing Life Threatening Allergies in School Children: Guidelines and Practices*” for the detail of each of the points above.

### **Responsibilities of School Principal/Administrator**

1. Meet with the family to gather necessary information as appropriate.
2. Assist teacher in crafting a letter that is sent to all students’ parents/guardians alerting them to food allergen restrictions in the classroom (see ***Letter From the Teacher*** letter template in “*Managing Life-Threatening Allergies in School Children: Guidelines and Practices*”).
3. Ensure annual training for appropriate staff regarding: anaphylaxis, allergens that cause anaphylaxis, risk-reduction procedures, emergency procedures, and administration of epinephrine auto-injectors. Keep updated documentation of trained staff.
4. Work with the secretary to ensure that severe allergy **MAPs** and the prescribed emergency medications have been delivered to the office by the parent/guardian.
5. Work with the secretary to ensure that the severe allergy **MAP** is copied and sent to those with a need to know:
  - Classroom teacher
  - Specials teachers (such as Art, PE, Music, Literacy Information Specialists)
  - Sub folders
  - Transportation department
  - Rotation teachers (middle school)
  - Semester teachers (secondary school)
  - School-age care (SAC, TEAMS)
  - Paraprofessionals involved with student (e.g., in the classroom)
  - Staff supervising lunch and recess
  - Cafeteria/Kitchen Manager/District Food Service Director
6. Ensure accessible emergency communication between the office and all other areas, such as the classrooms, playground, lunchroom, gym, and during field trips (e.g., walkie talkies and cell phones).

7. Post laminated allergy signs alerting staff, students, and community to allergy safe zones where needed (e.g., on classroom doors, tables, lunchroom, etc.) (see ***Common Signage for Doors and Other Areas*** section in the Appendix of “*Managing Life Threatening Allergies in School Children: Guidelines and Practices*”).
8. Review field trip requests for conflicts with ***MAP*** and ***Risk Reduction Strategies***.
9. Advise the PTA on precautions needed when scheduling student events and fundraisers. Ensure PTA leaders have a copy of the document ***Responsibilities of the Parent Teacher Association (PTA)*** from “*Managing Life Threatening Allergies in School Children: Guidelines and Practices*.”
10. Notify the district school nurse coordinator and Superintendent/designee of any incidences of exposure or related allergic reactions using the ***Allergy Incident Report*** form (in Appendix of *Managing Life Threatening Allergies in School Children: Guidelines and Practices*”).
11. Principals should reference “*Managing Life Threatening Allergies in School Children: Guidelines and Practices*” for complete list of responsibilities, documents, and signage.

**Responsibilities of Classroom Teachers & Special Area Teachers (i.e. LC, Specials, Resource, etc.)**

1. Review all general guidelines (above) as they provide an overview.
2. Review the severe allergy ***Medical Action Plan (MAP)*** for all of your students having this plan.
3. The ***MAP*** specifies if a student self-carries the epinephrine auto-injector. When stored in the classroom, keep the medication and the allergy ***Medical Action Plan (MAP)*** together in a secure, easy-to-see, **unlocked** place (areas to consider might be in the classroom emergency bag or thumb-tacked high on a bulletin board close to the teacher’s desk). Be sure the ***MAP*** is not posted for casual viewing. The location and expiration date of the medication should be written on the ***MAP*** in the space provided.
4. Be familiar with the ***How to Read a Food Label*** document as it pertains to your student’s specific food allergy (see Appendix of “*Managing Life Threatening Allergies in School Children: Guidelines and Practices*”).
5. Ensure the ***911 Emergency Protocol*** and ***Epinephrine Auto-Injector Instructions*** documents are posted (See Appendix of “*Managing Life Threatening Allergies in School Children: Guidelines and Practices*”).
6. Be sure all substitute and student teachers and paraprofessionals are informed of the student’s allergies and risk reduction safeguards, including classroom food policies and restrictions (see ***Responsibilities of Substitutes and Student Teachers*** and ***Responsibilities of Classroom Paraprofessional(s) and Classroom Volunteers*** in “*Managing Life Threatening Allergies in School Children: Guidelines and Practices*”).
7. Establish a procedure for regular hand washing to prevent contamination from adults and students alike after students consume any food as well as prior to beginning instruction after the lunch/recess period.
8. Elementary school - Wash the food allergic student’s desk each morning with disinfectant and paper towels or sanitization wipes. As appropriate, this routine may be assigned to students.

9. With principal's assistance, craft a letter that is sent to all students' parents/guardians at the start of the school year alerting them to food allergen restrictions in the classroom (see **Letter From the Teacher** in Appendix of "*Managing Life-Threatening Allergies in School Children: Guidelines and Practices*").
10. Ensure that a **Medical Alert Label** is on the cover of the sub folder to emphasize severe allergy **MAPs**
11. Ensure that each substitute teacher and substitute paraprofessional has access to the sub folder with the following information:
  - The classroom location of emergency medication
  - Copy of the food allergy **MAP(s)**
  - Classroom allergen restrictions, including no class-provided snacks and distribution of only non-edible birthday items
  - **Epinephrine Auto-Injector Instructions** and the **911 Emergency Protocol**
  - Verify that the substitute has completed epinephrine auto-injector training and is comfortable with his/her knowledge of emergency procedures
  - A copy of document, **Responsibilities of Substitute and Student Teachers** (see the Rochester Community Schools "*Managing Life-Threatening Allergies in School Children: Guidelines and Practices*" handbook)
12. Prohibit students from sharing or trading snacks, lunches, and all other food.
13. Designate a separate computer keyboard or plastic cover and/or mouse for food allergic student(s) when needed or provide sanitation between student usages.
14. When organizing elementary classroom parties, holiday celebrations, and special events: consider using non-food items and activities (See "*General*" guideline section). Involve parents of students with food allergies when possible. Provide communication to parents/guardians of food allergy students in advance if food is involved (see Appendix: **Alternatives to Food-Based Celebration and Rewards** and **Alternatives to Food-Based Fundraisers** in "*Managing Life-Threatening Allergies in School Children: Guidelines and Practices*").
15. Be aware of non-food classroom supplies that may contain peanuts or tree nuts, such as food pellets for classroom pets, bedding for pets, hand soaps, lotions, and arts and craft supplies.
16. Refer to "*Managing Life Threatening Allergies in School Children: Guidelines and Practices*" for complete list of responsibilities, documents, and signage.

### **Responsibilities of School Secretary**

It is acknowledged that school secretaries play a vital role in the administration of **Medical Action Plans**, including those students with food allergies. In addition to training that is available to all staff, school secretaries will need to become familiar with responsibilities as outlined in "*Managing Life Threatening Allergies in School Children: Guidelines and Practices*" or as designated by the building Administrator/Principal.

### **Staff in Charge of Field Trips**

1. Review the document **When Taking a Student with Medications on a Field Trip**. (See "*Managing Life Threatening Allergies in School Children: Guidelines and Practices*").

2. Invite the parent/guardian of the student at risk for anaphylaxis to accompany the child on school trips, in addition to the chaperone(s). **However, the student's safety or attendance must not be conditioned on the parent/guardian's presence.**
3. Emergency medications and the severe allergy *Medical Action Plan (MAP)* are taken on field trips and kept with the staff member charged with supervising and accompanying the allergic student.
4. Consider ways to wash hands before and after eating (e.g., hand wipes if soap and water are not available; **hand sanitizers do not remove allergens**).
5. Ensure accessible communication between teacher, office, and emergency responders (e.g., cell phones, walkie talkies).
6. Proactive planning should avoid high-risk places; make sure to consider where and what students will eat for lunch.

### **Responsibilities of Classroom Paraprofessionals and Classroom Volunteers**

All adults serving in role of authority in classrooms share in the safekeeping of all students, including those with food allergies. Paraprofessionals should become familiar with responsibilities as outlined in “*Managing Life Threatening Allergies in School Children: Guidelines and Practices*” or as designated by the building Administrator/Principal.

### **Responsibilities of Paraprofessionals Supervising Lunch and Recess**

1. Be aware of students who have a severe allergy *Medical Action Plan (MAP)*; be familiar with the severe allergy *Medical Action Plans (MAPs)* for these students as well as any *Risk Reduction Strategy* plans
2. Maintain a copy of all severe allergy *Medical Action Plans (MAPs)* **with photos** in an easily accessed location in the lunchroom that maintains students' privacy, such as a binder. Be aware of how and where to access the emergency medications.
3. Be sure to wash hands (or change gloves) in-between handling any food from the non-allergy zones and the allergy zone tables.
4. Ensure the *911 Emergency Protocol* and *Epinephrine Auto-Injector Instructions* are posted (See Appendix of “*Managing Life Threatening Allergies in School Children: Guidelines and Practices*”).
5. Lunchrooms/cafeteria will have “allergen-restricted” tables for allergic students requiring allergen-avoidance measures; these tables should be prominently labeled according to the restricted allergen. Combining the allergen-restricted table with the table for students buying cafeteria meals is recommended. **All food served at these tables/areas must be purchased at school** (except for students with food allergies).
6. Ensure lunch tables are being cleaned every day and in between each lunch group using efficient and thorough cleaning methods (see *Cafeteria Cleaning Protocol* per “*Managing Life Threatening Allergies in School Children: Guidelines and Practices*”).

7. Lunchroom/cafeteria staff will be trained to give epinephrine and are present to monitor the allergen-restricted lunch table for:
  - a. Allergic reactions
  - b. Food sharing or trading (no sharing of food whatsoever)
  - c. School-purchased food only (except for students with food allergies)
8. Be aware of students with food allergy *Medical Action Plans (MAPs)* when on the playground.

#### **Responsibilities of Food Service Director/Contractor**

1. Understand the laws protecting student with food allergies as they relate to food services.
2. To the extent available, make public menus, lists of à la carte items, food products, and ingredient lists on the District food service website.
3. Establish safe food handling procedures to eliminate allergen cross contamination; cleaning and sanitation practices; and job responsibilities of staff involved in the food preparation, distribution, and serving process.
4. Provide contact information of vendors, suppliers, etc. upon request.

#### **Responsibilities of District School Nurse Coordinator**

1. Provide **annual** allergy training and education for faculty, staff, substitute employees, and students when needed.
2. Serve as resource for staff and parents as needed.
3. Participate in District-wide planning for allergy-safe schools.
4. Review MAP's for appropriate information and medications.
9. See "*Managing Life Threatening Allergies in School Children: Guidelines and Practices*" for complete list of responsibilities.

#### **Responsibilities of SAC and TEAMS Caregivers and Before-School and After-School Enrichment Programs (BASES)**

1. Child Care Supervisor will oversee training and food allergy protocols and prevention strategies of SAC/TEAMS personnel.
2. Be familiar with the students' severe allergy *Medical Action Plans (MAPs)* and any *Risk Reduction Strategy* plans.
3. Maintain a copy of all severe allergy *Medical Action Plan (MAPs)* with photos in an easily accessed location and be aware of how and where to access the emergency medications.
4. Ensure the *911 Emergency Protocol* and *Epinephrine Auto-Injector Instructions* are posted (See Appendix).
5. All RCS child care programs (SAC/TEAMS) must comply with all food allergy guidelines as listed above.



6. BASES programs will not distribute food (unless pre-approved by the BASES supervisor and parents are aware).
7. Be vigilant in monitoring the whereabouts of allergic students on the playground.

### **Responsibilities of School Bus Drivers and Transportation Department**

1. Maintain a copy of all severe allergy *Medical Action Plan (MAPs)* with photos in an easily accessed location and be aware of how and where to access the emergency medications (**NOTE: epinephrine cannot be stored on the bus**).
2. Have accessible the *911 Emergency Protocol* and *Epinephrine Auto-Injector Instructions* (See Appendix).
3. Maintain a policy of no eating or open food on the bus, except when medically necessary (e.g., diabetic students need to eat).
4. Bus drivers should never hand out food treats, even on special occasions.
5. Ensure that each bus is equipped with 2-way communication.
6. Bus drivers should be aware of where students with food allergies are seated. If necessary, monitor that students are in a designated seat if part of the *Risk Reduction Strategy* plan for transporting the student to/from school and/or on field trips.

### **Responsibilities of Custodians**

All adults serving in roles of authority in schools share in the safekeeping of all students, including those with food allergies. Custodians should become familiar with additional responsibilities as outlined in “*Managing Life-Threatening Allergies in School Children: Guidelines and Practices*” or as designated by the building Administrator/Principal.

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