

# *Guidelines & Practices*

## Managing Life Threatening Food Allergies In Elementary School Children



Ann Arbor Public Schools

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We also recognize the excellent work done by the Massachusetts Department of Education and the Food Allergy Network on behalf of students and families coping with severe food allergies. The manual developed by the Massachusetts Department of Education provided an excellent model as we developed the Ann Arbor Public Schools Handbook.

## **Overview and Goal of this Manual**

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The Ann Arbor Public Schools recognizes the growing number of students enrolling in our schools with potentially life-threatening food allergies. As public educators we recognize our responsibility to develop appropriate health plans for students with food allergies which detail emergency treatment while proactively addressing conditions to prevent exposure to specific allergens. We believe a collaborative partnership between school and family is the best way to achieve this goal while thoughtfully increasing the student's independence to care for him/herself.

While the medical and health-related needs are unique for each child, the intention of this manual is to establish a set of consistent, systemic practices within the district as a starting point. Principals and school personnel do not need to "re-invent" the wheel each time a student with serious food allergies enrolls nor do students and their families need to fear experiencing variable levels of familiarity with regard to food allergens and welcome-ness.

As an educational environment we believe in our capacity to *educate* our families, teachers, and students to better understand life-threatening food allergies. This will create school communities that differentiate strategies for food allergies with the same generous spirit and understanding demonstrated for differentiated learning styles and other health-related student needs.

A collaborative partnership between school, families and medical personnel can provide a safe and healthy learning environment, which will help parents/guardians and their children with food allergies make the transition between the safety of their home environment into the expanding world of a school. When done well, this is one of the greatest lessons a child with food allergies can learn. Similarly, classmates who do not have life-threatening allergies develop a greater understanding for individual differences, a capacity for flexibility, and increased compassion.

### **What is Food Allergy?**

Students with food allergies have over-reactive immune systems that target otherwise harmless elements of our diet and environment. During an allergic reaction to the food, the immune system recognizes a specific food protein as a target. This initiates a sequence of events in the cells of the immune system resulting in the release of chemical mediators such as histamine. These chemical mediators trigger inflammatory reactions in the tissues of the skin (itching, hives, rash) and the respiratory system (coughing, difficulty breathing, wheezing), the gastrointestinal tract (vomiting, diarrhea, abdominal pain) and the cardiovascular system (decreasing blood pressure, heartbeat irregularities, shock). When the symptoms are wide spread and systemic, the reaction is termed "anaphylaxis" a potentially life-threatening event.

*The prevalence of food allergies has increased over the past several years, with current estimates of approximately 2 million school-aged children with food allergies.*

*Most common food allergens for children include:*

*Eggs  
Fish  
Milk  
Peanuts  
Shellfish  
Soy  
Tree nuts  
Wheat*

*In 1998, the American Academy of Allergy, Asthma and Immunology issued a position statement on the management of anaphylaxis in schools, recommending epinephrine as the first drug to be used in the treatment of children with life-threatening allergic reactions.*

## What is Anaphylaxis?

Anaphylaxis is a potentially life-threatening medical condition occurring in allergic individuals after exposure to their specific allergens. Anaphylaxis refers to a collection of symptoms affecting multiple systems in the body. These symptoms may include one or more of the following:

Hives	Difficulty swallowing
Vomiting	Wheezing
Itching	Difficulty breathing, shortness of breath
Diarrhea	Throat tightness or closing
Swelling	Sense of doom
Stomach cramps	Itchy scratching lips, tongue, mouth or throat
Red, watery eyes	Fainting or loss of consciousness
Change of voice	Dizziness, change in mental status
Runny nose	Flushed, pale skin cyanotic (bluish) lips and mouth
Coughing	

The most dangerous symptoms include breathing difficulties and a drop in blood pressure or shock, which are potentially fatal. Common examples of potentially life-threatening allergies are those to foods and stinging insects. Life-threatening allergic reactions may also occur to medications or latex rubber and in association with exercise. Approximately 50 deaths per year are caused by insect sting anaphylaxis and 150-200 deaths per year from food anaphylaxis, mostly from peanut and tree nut allergies (The Food Allergy Network, 2003)

Anaphylaxis can occur immediately or up to two hours following allergen exposure. In about a third of the anaphylactic reactions the initial symptoms are followed by a delayed wave of symptoms 2-4 hours later. This combination of an early phase of symptoms followed by a late phase of symptoms is defined as biphasic reaction. While the initial symptoms respond to epinephrine the delayed biphasic response may not respond at all to epinephrine and may not be prevented by steroids. **Therefore it is imperative that following the administration of epinephrine, 911 is called and trained emergency personnel examine the student.**

**When in doubt, it is better to give the Epi-Pen/TwinJect Auto-Injector (epinephrine) and seek medical attention. Fatalities occur when epinephrine is withheld or delayed.**

**For those students at risk for food induced anaphylaxis the most important aspect of the management in the school setting should be prevention and prompt response to a possible reaction.**

**Children with severe food allergies have a higher rate of other allergic diseases including asthma and eczema. Anaphylaxis is more common in children whose food reactions have had respiratory features such as difficulty breathing and throat tightness. Anaphylaxis appears to be much more probable in children who have already experienced an anaphylactic reaction. Anaphylaxis does not require the presence of any skin symptoms such as itching and hives.**

## Children with Food Allergies and Their Families

Not only is raising a child with food allergies challenging, it is scary. Parents/Guardians must rely on people they do not know to ensure that their child(ren) are safe and that appropriate medical treatment is provided during an emergency. Parents/Guardians must ensure strict food avoidance, understand food labeling and be on constant alert to implement an emergency medical plan at any moment. These are just some of the challenges parents/guardians of children with food allergies deal with every day. With time, support and education parents/guardians become skilled and are well prepared to keep their children safe. Perhaps the greatest challenge parents/guardians face is finding the balance between what is safe and what is normal when meeting the needs of their children. The balance works well until it is time to share the care of that child with others. It is at this time that the balance often shifts and parents/guardians must work to reestablish it. The challenge to this precarious balance is never greater than when a child begins school. What often worked so well in their own home is now being given to unfamiliar people, with varying degrees of knowledge and experience in working with children impacted by food allergies.

A collaborative partnership between school and families can provide a safe and healthy learning environment, which will help parents/guardians and their children make the transition between the safety of their home environment into the expanding world of a school. When done well, this is one of the greatest lessons a child with food allergies can learn; they can be safe in a world outside their own home.

A thoughtful, well implemented Food Allergy Assistance plan will help students learn to:

- Ask for help,
- Develop healthy and strong friendships
- Acquire developmentally appropriate social skills
- Be more confident
- Become more independent
- Self-monitor that his/her medication is readily available
- Challenge situations that may feel unsafe or unnecessarily risky

Similarly, classmates who do not have life-threatening allergies develop a greater capacity for generosity, flexibility, and compassion. Teachers and other parents/guardians come to address modifications necessary to keep students with food allergies safe and socially included as just another form of instructional “differentiation”.

In some cases, a student’s allergies may rise to the level of a disability under Section 504 of the Rehabilitation Act of 1973 (“Section 504”). In such circumstances, please refer to the Ann Arbor Public Schools’ Section 504 Procedural Manual for information about formal accommodations available under Section 504.

*Peanut and tree nuts are responsible for the vast majority of fatalities due to food-induced anaphylaxis. Therefore we must improve the education of subjects with a history of allergic reactions to these foods and the education of manufacturers producing products containing peanut and tree nuts.*

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

- \_\_\_\_\_ Take as much age-appropriate responsibility as possible for avoiding allergens.
- \_\_\_\_\_ Do not trade or share food.
- \_\_\_\_\_ Wash hands before and after eating.
- \_\_\_\_\_ Learn to recognize symptoms of an allergic reaction.
- \_\_\_\_\_ Promptly inform an adult as soon as accidental exposure occurs or symptoms appear.
- \_\_\_\_\_ Take more responsibility for your allergies as you get older (refer to Parent/Guardian responsibilities outline).
- \_\_\_\_\_ Develop a relationship with the school nurse, your principal, and classroom teacher(s) to assist in identifying issues related to the management of the allergy in school.
- \_\_\_\_\_ Do not share Epi-Pen/TwinJect with other students.
- \_\_\_\_\_ When riding a school bus, sit in the seat designated by the bus driver when transporting to/from school and/or during field trips.
- \_\_\_\_\_ Learn where medication is kept and that it (the medication) travels with the student at all times. This is particularly important as the student enters adolescence and interacts within environments with less oversight.
- \_\_\_\_\_ Assume greater, developmentally appropriate responsibility to notify “new people” of his/her allergen.
- \_\_\_\_\_ Say “No thank you” when offered food that did not come from home.
- \_\_\_\_\_ Assume greater responsibility for checking that the Epi-Pen/TwinJect is present in backpack.

***Shared goal:*** Students with life-threatening food allergies will over time develop greater independence to keep themselves safe from anaphylactic reactions. School communities will differentiate Assistance Plan Strategies for children with food allergies reflecting the same generous spirit and understanding as is demonstrated for students with differentiated learning styles and other health-related student needs.

## **Responsibilities of the Parents/Guardians/Family members of a Student with Food Allergies**

- \_\_\_\_\_ Inform the school nurse and/or principal of your child’s allergies prior to the beginning of the school year –or as soon as possible after a diagnosis –refer to “*To Parents/Guardians of Students with Life Threatening Food Allergies*” and Food Allergy Assistance Plan.
- \_\_\_\_\_ Work with the school nurse to complete a Food Allergy Assistance Plan.
- \_\_\_\_\_ Review “*If You Wish Your Child to Take Medications at School*” (highlights from the AAPS policy for administering medications to students).
- \_\_\_\_\_ Complete the Food Allergy Action Plan with student’s medical doctor.
- \_\_\_\_\_ Provide the school nurse with 20 small face pictures of your student.
- \_\_\_\_\_ Provide the school with a way to reach you (cell phone, beeper etc) and maintain updated emergency contact numbers and medical information.
- \_\_\_\_\_ Provide a list of foods and ingredients to avoid.
- \_\_\_\_\_ Strongly consider providing a medical alert bracelet or necklace for your child.
- \_\_\_\_\_ Provide the school nurse with at least (2) up-to-date epinephrine auto injectors.
- \_\_\_\_\_ Provide the school nurse with annual updates on your student’s allergy status.
- \_\_\_\_\_ Consider signing a release of information so the school can exchange information and consultation with the student’s primarily health care provider.
- \_\_\_\_\_ Work collaboratively with the school to implement the Food Allergy Assistance Plan.
- \_\_\_\_\_ Work collaboratively with school personnel to educate the school community with respect to food allergies and the potentially life threatening nature of such allergies. This may include co-writing a letter with the classroom teacher to classroom families.
- \_\_\_\_\_ Work collaboratively with the school to develop a proactive prevention plan that promotes increasing age-appropriate independence as the student grows and matures.
- \_\_\_\_\_ Be willing to provide “safe snacks” for your student to keep in the classroom so there is always something your child can choose from during an unplanned special event.
- \_\_\_\_\_ Be willing to go on your student’s field trips if possible and if requested.
- \_\_\_\_\_ Work with school nurse to ensure an appropriate number of emergency kits are supplied with up to date medications. One Epi-Pen/TwinJect must be provided for the main office/clinic.

### **Periodically teach your child to:**

- \_\_\_\_\_ Recognize the first symptoms of an allergic/anaphylactic reaction.
- \_\_\_\_\_ Identify where the Epi-Pen/TwinJect auto injector is kept while at school and who has access to the epinephrine while at school.



- \_\_\_\_\_ Communicate clearly as soon as s/he feels a reaction is starting.
- \_\_\_\_\_ Do not share snacks, lunches, or drinks.
- \_\_\_\_\_ Understand the importance of hand-washing before and after eating with greater personal responsibility.
- \_\_\_\_\_ Report teasing, bullying and threats to an adult authority.
- \_\_\_\_\_ Do not show or share Epi-Pen/TwinJect with other students.
- \_\_\_\_\_ Take as much personal age-appropriate responsibility for his/ her own safety as possible.
- \_\_\_\_\_ Communicate “No thank you” when offered food that does not come from home.

It is important that children/ students take on more responsibility for their own food allergies as they grow older and are developmentally ready. Recognize this is a collaborative interest shared by parents/guardians, school personnel and student. Consider reinforcing the following with the student:

- \_\_\_\_\_ Communicate the seriousness of the allergic response.
- \_\_\_\_\_ Communicate symptoms as they appear-reinforce how important it is for a student to get **immediate attention** from those around him/her for a medically urgent situation.
- \_\_\_\_\_ Read labels as is developmentally appropriate.
- \_\_\_\_\_ Carry own epinephrine auto-injector as agreed upon in the Food Allergy Assistance Plan.

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## Responsibilities of School Administrator

- \_\_\_\_\_ Support a proactive “parent/guardian interview process” between school nurse and student’s family in order to complete the Food Allergy Assistance Plan.
- \_\_\_\_\_ Provide and monitor annual training and education for faculty and staff regarding.
  - \_\_\_\_\_ Foods, insect stings, medications, latex
  - \_\_\_\_\_ Risk reduction procedures
  - \_\_\_\_\_ Emergency procedures
  - \_\_\_\_\_ How to administer an epinephrine auto-injector in an emergency
- \_\_\_\_\_ Develop and implement a school wide plan for promoting an inclusive, sensitive, and responsive school climate when responding to students with life threatening food allergies.
- \_\_\_\_\_ Review the publication “Composing a Letter to Classmates and Families”.
- \_\_\_\_\_ Systematically educate the school community on issues having to do with life-threatening food allergies e.g. PAL program materials, parent/guardian information letters, school newsletters.
- \_\_\_\_\_ Include the PTO in the educational process and when scheduling all-school events and fundraisers.
- \_\_\_\_\_ Provide special training for food service personnel.
- \_\_\_\_\_ Provide accessible emergency communication between classroom-office, playground-office, field trips-office (e.g. walkie talkies, cell phones).
- \_\_\_\_\_ Inform parent/guardian/family if the student experiences an allergic reaction at school.
- \_\_\_\_\_ Make sure a contingency plan is in place in case of a substitute teacher, nurse, food service personnel, secretary and/or administrator occurs e.g. When a substitute reports to the office to check in, a note should be attached to the time sheet alerting the substitute that a child with a potentially life threatening food allergy attends the class.
- \_\_\_\_\_ Every effort should be made to follow up with a face to face meeting between the building administrator and the substitute to introduce the child to the substitute. If the building principal is unavailable, another office staff person or nurse should do so.
- \_\_\_\_\_ Verify that the substitute has completed Epi-Pen/TwinJect training.
- \_\_\_\_\_ Reinforce /monitor that teaching staff should record as part of their “sub finder” recorded message that a student with life-threatening food allergies is a member of the classroom. Only substitutes who have been fully trained and have no reservations about administering emergency medical procedures should be assigned to fill the vacancy. This must include all teaching assistants assigned to the classroom.

- \_\_\_\_\_ Have an emergency communication plan for contacting a nurse when a nurse is not on-site (e.g. beeper, phone numbers of other assigned buildings).
- \_\_\_\_\_ Ensure that the student is placed in a classroom where the teacher is trained to administer an Epi-Pen/TwinJect (this includes all special area classrooms, before and after child care and lunch staff).
- \_\_\_\_\_ Post common signage around the building as indicated in the Food Allergy Assistance Plan.
- \_\_\_\_\_ Monitor that NO food is intentionally taken to common areas such as the media centers, multi-purpose rooms, and /or playground UNLESS the foodstuff and location is clearly communicated and specifically located (contained) in advance to the student and his/her family to prevent a possibility of incidental contact. Every attempt to encourage sensitivity and consideration for the purposes of promoting a safe, inclusive climate should be made.
- \_\_\_\_\_ Completely and carefully complete all overnight field trip permission requests to reflect food allergy concerns.
- \_\_\_\_\_ Strongly discourage all parents/guardians and staff from bringing family pets into the building.
- \_\_\_\_\_ Eliminate unscheduled/unplanned classroom celebrations and/or food rewards.
- \_\_\_\_\_ Enlist the help of parents/guardians of children with food allergies when determining what foods are “safe” for classroom consumption.

***Shared goal:*** Students with life-threatening food allergies will over time develop greater independence to keep themselves safe from anaphylactic reactions. School communities will differentiate Assistance Plan Strategies for students with food allergies with the same generous spirit and understanding as is demonstrated for students with differentiated learning styles and other health-related student needs.

## Responsibility of the School Nurse

- \_\_\_\_\_ Prior to entry into the school (or, for a student who is already in school, soon after the diagnosis of a life-threatening allergic condition) meet with the student's parent/guardian/ family to complete the "*Parent/Guardian Interview*" and develop a Food Allergy Assistance Plan.
- \_\_\_\_\_ By November 1, enter data on each student with a life-threatening allergy into the AAPS allergy database. Update as needed throughout the school year.
- \_\_\_\_\_ Review the publication *To: Parents/Guardians of Students with Life Threatening Food Allergies and Information From the School* with parents/guardians during interview.
- \_\_\_\_\_ Provide each parent/guardian with a copy of the completed Food Allergy Assistance Plan to review.
- \_\_\_\_\_ Ensure all portions of the Action Plan are completed and the parent/guardian and primary health care provider signs the form
- \_\_\_\_\_ Complete the Quick Food Allergy Action Plan template and distribute to transportation supervisor, childcare, noon hour workers, food service personnel, substitute folder and playground staff.
- \_\_\_\_\_ Distribute the Food Allergy Assistance Plan to all staff who supervise the student with allergies to include principal, teachers, special area staff, childcare, transportation supervisor and noon hour staff prior to the school year or as close to start up as possible.
- \_\_\_\_\_ Meet with staff as necessary to understand and implement Food Allergy Assistance Plan.
- \_\_\_\_\_ Work with principal/teacher/parent/guardian to communicate with other parent/guardian about the nature of the student's food allergies and classroom/building strategies; review the publication "*Composing a Letter to Classmates and Families*".
- \_\_\_\_\_ Help principal and teachers monitor the fruit and veggie snack guideline for the first 2 weeks of each school year.
- \_\_\_\_\_ Work in coordination with parent/guardian to maintain up to date Food Allergy Assistance Plan with each new school year and as needed.
- \_\_\_\_\_ Ensure all school staff has received Epi-Pen/TwinJect training and other guidance having to do with life-threatening food allergens, symptoms, risk reduction procedures and emergency procedures. Documentation is to be kept in school's medication log.
- \_\_\_\_\_ Maintain a list of "trained school staff" in the main office.
- \_\_\_\_\_ Educate new personnel when notified.
- \_\_\_\_\_ Introduce yourself to the student, show him/her how to get to the office and how to attract attention should symptoms occur.

- \_\_\_\_\_ Periodically work with the student to foster increasing independent skills as is age-appropriate and reflected in the Assistance Plan.
- \_\_\_\_\_ Communicate with parent/guardian their need to supply emergency medications and track expiration dates.
- \_\_\_\_\_ Communicate with the parent/guardian to ensure that a minimum of one Epi-Pen/TwinJect be stored in the main office or clinic.
- \_\_\_\_\_ Make sure the office staff have access to contact information for alternate nurse coverage.
- \_\_\_\_\_ Work with building secretary to ensure health concerns are entered into student database.
- \_\_\_\_\_ Enter incidents of allergic student responses (to include anaphylactic responses) into new nursing database system for purposes of monitoring district medical needs.
- \_\_\_\_\_ Monitor that epinephrine and all necessary medications and completed paperwork are received from each family. Place each emergency kit as indicated in the Individual Assistance Plan.
- \_\_\_\_\_ Have copies available/ready of the student's Action Plan if a 911 call is placed and the student is subsequently transported to a medical care facility following an allergic/anaphylactic response. Copies should be maintained in a predetermined location in the school infirmary/office with each Epi-Pen/TwinJect.

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## **Responsibilities of the Classroom /Special area Teacher:**

- \_\_\_\_\_ Review the publication “*To: Teachers with Students Who Have Life-Threatening Allergies*”.
- \_\_\_\_\_ Review the Action Plan and Assistance Plan for any student(s) in your classroom with life-threatening allergies.
- \_\_\_\_\_ Participate in all team meetings related to the implementation of the Assistance Plan and Action Plan.
- \_\_\_\_\_ Participate in Epi-Pen/TwinJect training to include:
  - \_\_\_\_\_ Allergens that cause life-threatening allergies (foods, insect stings, medications, latex, etc)
  - \_\_\_\_\_ Steps to take to prevent life-threatening reactions and accidental exposures to allergens
  - \_\_\_\_\_ How to recognize symptoms of the student’s life-threatening allergic reaction
  - \_\_\_\_\_ Steps to manage an emergency
  - \_\_\_\_\_ How to administer emergency medications
- \_\_\_\_\_ Work with principal to ensure accessible communication between classroom-office while on field trips, the playground, special area classrooms and child care (e.g. cell phones, walkie talkies, beeper).
- \_\_\_\_\_ Keep students with life-threatening allergies under direct supervision on field trips, outdoor activities or during assemblies unless the student’s own parent/guardian is present to supervise them.
- \_\_\_\_\_ Keep the student’s Action Plan with photo accessible at all times.
- \_\_\_\_\_ Keep Action Plan with photo in a well-organized, accessible format for substitutes.
- \_\_\_\_\_ When calling in a personal absence, record with the sub-finder a message that a student with life-threatening food allergies is a member of your class. Only substitutes that have been fully trained and have no reservations about providing emergency medical assistance should fill the vacancy.
- \_\_\_\_\_ Be sure all volunteers, student teachers, TA’s, and substitute teachers are informed of the student’s food allergies and preventative safeguards.
- \_\_\_\_\_ Work with principal and nurse to educate classmates, parents/guardians of classmates, colleagues and other school staff regarding proactive risk prevention and the nature of the student’s food sensitivities/anaphylactic response. These efforts should be consistent with the spirit of differentiating instruction and maintaining a safe climate for all students.

- \_\_\_\_\_ Collaborate with the parent/guardian/family of the student with life threatening allergies on providing a lesson plan about food allergies for the class and discuss anaphylaxis in age-appropriate terms, with student's permission. Use PAL materials.
- \_\_\_\_\_ Work with parent/guardian to develop a relationship that is mutually supportive and beneficial.
- \_\_\_\_\_ Educate classmates to avoid endangering, isolating, stigmatizing or harassing students with food allergies. Be aware of how the student with food allergies is being treated; enforce school rules about bullying and threats.
- \_\_\_\_\_ Enlist the help of all classroom parents/guardians in keeping foods out of the classroom that will cause anaphylaxis to include soap and lotion products that may have nut derivatives.
- \_\_\_\_\_ Avoid all classroom snacks with the exception of fruits and vegetables for the first 2 weeks of school or until the nurse has reviewed all school based health plans.
- \_\_\_\_\_ Inform parents/guardians of any school events where food will be served.
- \_\_\_\_\_ Never question or hesitate to act if a student reports signs of an allergic reaction.
- \_\_\_\_\_ Eliminate unscheduled/unplanned classroom celebrations and/or food rewards.
- \_\_\_\_\_ Enlist the help of parents/guardians of children with food allergies when determining what foods are "safe" for classroom consumption.
- \_\_\_\_\_ If necessary, designate and maintain computer equipment for food allergic student according to accommodations outlined.

### **Regarding Snacks and Lunchtime**

- \_\_\_\_\_ Determine whether student's lunchbox needs to be isolated from other students' lunchboxes.
- \_\_\_\_\_ In the classroom, establish procedures to ensure that the student with life-threatening food allergies eats only what s/he brings from home.
- \_\_\_\_\_ Prohibit students from sharing or trading snacks and/or lunches.
- \_\_\_\_\_ Encourage parents/guardians/families to send in a supply of "safe snacks" for their student with allergies.
- \_\_\_\_\_ If indicated in a student's plan, only "safe snacks" should be served as daily classroom snacks.
- \_\_\_\_\_ Work with principal to establish an eating area in the lunchroom if necessary, that is restricted from food to which the student is allergic.
- \_\_\_\_\_ Reinforce general practice of hand washing before and after eating.

## Regarding Classroom Activities

- \_\_\_\_\_ Avoid the use of food for classroom activities (i.e. art projects, counting, science projects, parties, holidays, cooking etc.).
- \_\_\_\_\_ Welcome parental involvement in organizing the class parties and special events. Encourage non-food treats for all classroom celebrations.
- \_\_\_\_\_ Monitor that food pellets and bedding for classroom pets do not contain products that make cause food allergen response (e.g. nut products or byproducts).
- \_\_\_\_\_ Check all ingredients of soap and lotion products used in the classroom.

## Regarding Field Trips

- \_\_\_\_\_ Review the publication “*When Taking a Student with Medications on a Field Trip*”.
- \_\_\_\_\_ Ensure a trained staff person is assigned to chaperone student with allergies.
- \_\_\_\_\_ Emergency medications and Action Plans are taken on field trips and kept with the supervising trained staff member.
- \_\_\_\_\_ Ensure communication between teacher-office/emergency responders is accessible.
- \_\_\_\_\_ Proactive planning should avoid high-risk places. Make sure to consider where and what students will eat for lunch.
- \_\_\_\_\_ Completely fill out field trip permission forms.
- \_\_\_\_\_ When leaving Ann Arbor, identify the closest medical facility.
- \_\_\_\_\_ Invite parents/guardians of a student at risk for anaphylaxis to accompany their child on school trips, in addition to the chaperone. **However, the student’s safety or attendance must not be conditioned on the parent/guardian’s presence.**
- \_\_\_\_\_ Consider ways to wash hands before and after eating (e.g. hand wipes).

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## ***Responsibility of Room Parent/Guardian***

- \_\_\_\_\_ Work with principal, school nurse and parent/guardian of student with food allergies when communicating to other classroom parents/guardians.
- \_\_\_\_\_ Work with principal, school nurse and parent/guardian of student with food allergies when arranging class parties and other special events.



\_\_\_\_\_ Work with principal, school nurse and parent/guardian of student with food allergies to ensure an inclusive and supportive classroom environment.

### **Responsibilities of School Secretaries**

\_\_\_\_\_ Apply “Medical Alert” sticker to some form of notification each substitute will receive upon entering the building. This could be the “Hourly Employee Time Sheet” of each substitute teacher who will have a student in their class with a serious life-threatening health concern or classlist or daily lesson plans. This decision should be made with the building principal in a way that attracts immediate attention.

\_\_\_\_\_ Provide to each substitute teacher, prior to the start of their day, a printed list of students with serious life-threatening health concerns who will be under their supervision during that day. This list is to include the following information: Name, face picture diagnosis, name and location of emergency medications (orders should be kept with emergency medications), location of the student’s individual health plan. **This list will be available from the school nurse.**

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

\_\_\_\_\_ Maintain a no food eating practice on the bus.

\_\_\_\_\_ Bus drivers should not hand out food treats even on special occasions.

\_\_\_\_\_ With parent/guardian permission, bus drivers should be provided with a copy of the *Quick Check Action Plan*. This document should be kept in a safe place and shared with drivers who may substitute for primary driver and/or shared with team leaders.

\_\_\_\_\_ Provide annual training for all school bus drivers on managing life-threatening allergies.

\_\_\_\_\_ Ensure that each bus is equipped with 2–way communication.

\_\_\_\_\_ Know the closest, local emergency medical facilities when transporting students on a field trip or to/from home.

\_\_\_\_\_ Students with life-threatening food allergies should sit in the seat designated by the bus driver when transporting to/from school and on field trips.

\_\_\_\_\_ Students with life-threatening food allergies should be introduced to the bus driver.

\_\_\_\_\_ Assistance Plan Strategies should reflect “wipe down” guidelines in preparation for all bus runs, including field trips, although such practice will not guarantee that accidental contamination from previous trips and ridership won’t occur.

\_\_\_\_\_ Student and/or responsible adult should carry emergency medications at all times since bus drivers do not.

\_\_\_\_\_ In the absence of accompanying parents/guardian/family members or school nurse, a trained staff member must be assigned the task of watching out for the student’s welfare and for handling any emergency while on a field trip.

\_\_\_\_\_ The trained staff member carrying the emergency medications for young students should be introduced to the bus driver and to the student.

\_\_\_\_\_ Field trips need to be chosen carefully; no student should be excluded from a field trip due to risk of allergen exposure.

\_\_\_\_\_ Bus drivers should not hand out food treats even on special occasions.

These responsibilities should be monitored and maintained while on the Environmental Field Trips as well.

***Shared goal:*** Students with life-threatening food allergies will over time develop greater independence to keep themselves safe from anaphylactic reactions. School communities will differentiate Assistance Plan Strategies for students with food allergies reflecting the same generous spirit and understanding as is demonstrated for students with differentiated learning styles and other health-related student needs.

### **Responsibilities for Staff supervising Recess, Lunch, Child Care and/or After School Activities**

\_\_\_\_\_ Participate in team meetings to determine how to implement Assistance Plan should the student with life threatening food allergies choose to participate in childcare or after school events.

\_\_\_\_\_ Be vigilant in monitoring whereabouts of food allergy students on the playground.

\_\_\_\_\_ Assign a lunch supervisor to monitor “safe table” use.

\_\_\_\_\_ Maintain a copy of the Action Plan and photo of student(s) with life threatening allergies with parent/guardian permission.

\_\_\_\_\_ 1-2 persons should be present who have been trained in the administration of emergency medications.

\_\_\_\_\_ Maintain easy access to the prescribed emergency medications.

\_\_\_\_\_ Have posted all EMS or 911 procedures.

\_\_\_\_\_ After school or before school activities sponsored by the school and/or hosted by school programs such as the Community Recreation and Education Department should follow school practices/procedures.

\_\_\_\_\_ All after hours, school sponsored events that serve food such as PTO evening events must identify a clearly defined area where food will be served and/or consumed. The student with life-threatening allergies and his/her family must be notified well in advance to accommodate scheduling and self-directed activities. As a function of sponsoring and promoting such events, the school should communicate to all parents/guardians attending the event the importance of avoiding food and ingredients which could cause the student to experience an anaphylactic response.

- \_\_\_\_\_ Child Care providers should review “*Teacher and Principal Responsibilities*” checklist to ensure these same considerations and protocols are followed during the childcare program.
- \_\_\_\_\_ Child care providers will utilize their protocols for medications to ensure the availability of appropriate medications while students are under their care.
- \_\_\_\_\_ Communicate with all groups having access to general room use (i.e. snacks, room rental, the “food allergy” guidelines).

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### **Responsibilities of Custodians**

- \_\_\_\_\_ Review Cafeteria Cleaning Protocol memo dated 10/18/05 from Ann Anglim to Building Administrators, Head Custodians and Noon Hour Staff. The standard daily cleaning schedule will include:
  - \_\_\_\_\_ Floors will be swept, spot mopped or vacuumed daily
  - \_\_\_\_\_ Restrooms, sinks and dispenser will be disinfected and filled
- \_\_\_\_\_ Maintain fresh 4.5 disinfecting solution and PH7 all-purpose soap as effective cleaning solutions. This solution is generally found to be effective for removing peanut allergen from surfaces.
- \_\_\_\_\_ Individual Assistance Plans may require more frequent cleaning of tabletops, chairs, desks, which should be specified in the plan and specific to the student’s sensitivity (e.g. before assemblies, emergency response to littering or spills).
- \_\_\_\_\_ Provide hand wipes for classroom with affected student and if necessary for lunchroom protocol. These dispensers are mounted on the exterior of the rooms. Liquid soap, bar soap and commercial wipes are considered effective when removing peanut allergens from hands.
- \_\_\_\_\_ Provide hand wipes to the Transportation Department for wiping down the bus seat/ handrails.
- \_\_\_\_\_ Provide hand wipes to teachers to wipe down student seating prior to an assembly or off-site performance.
- \_\_\_\_\_ Provide hand wipes for field trips taken by the classrooms with affected students if running water will not be readily available.

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## **Responsibilities of the Food Service Director and Building Lunchroom Supervisor**

### **Food Service Directors should be prepared to:**

- \_\_\_\_\_ Be prepared to discuss menus (breakfast and lunch) a la carte items, food products and ingredients; food handling procedures; cleaning and sanitation practices; and job responsibilities of staff involved in the food preparation, distribution, and serving process.
- \_\_\_\_\_ Establish communications and training consistent with the building protocol for all food service staff and related personnel at the student's school.
- \_\_\_\_\_ Ensure all food service servers participate in building training; maintain a list of trained staff.
- \_\_\_\_\_ Be prepared to make food ingredient lists used in the food preparation and service available; this should include contact information of vendors and purveyors from which bulk food products are purchased in order to access food content information.
- \_\_\_\_\_ Maintain contact information for manufactures of food products (Consumer Hotline).
- \_\_\_\_\_ Understand the laws protecting student with food allergies as they relate to food services
- \_\_\_\_\_ Publish advance copies of the weekly hot lunch menu.
- \_\_\_\_\_ Provide a statement having to do with nut or nut products in the preparation and/or purchase of food products when providing hot lunch for Ann Arbor Public School students.

### **Lunchroom Supervisors should be prepared to:**

- \_\_\_\_\_ Attend food allergy training and become familiar with the students' Food Allergy Assistance Plans.
- \_\_\_\_\_ Thoroughly clean all tables and chairs **before** lunch and between each lunch session; coordinate with daily custodial cleaning of the entire lunch room area.
- \_\_\_\_\_ Post the student's Action Plan in the eating/serving area with parent/guardian's permission; know where the emergency medication is located and ensure easy accessibility during the lunch period.
- \_\_\_\_\_ Review and follow sound food handling practices to avoid cross contamination with potential food allergens.
- \_\_\_\_\_ Strictly follow cleaning and sanitation protocol to avoid cross-contamination.
- \_\_\_\_\_ Work closely with building principal to establish a no nut/no allergen table for food allergic students; establish that this area will be allergen safe. If this table is only restricted to "no nuts allowed", students with lunches brought from cafeteria food service will be permitted to sit at this table.

- \_\_\_\_\_ Assign a person responsible for monitoring the food allergy table for reactions, food sharing, students permitted to sit at the table.
- \_\_\_\_\_ Work with building principal to enforce hand-washing practices.
- \_\_\_\_\_ Ensure at least (2) people in the eating area are trained to administer epinephrine by auto-injector.
- \_\_\_\_\_ Reinforce no food sharing, no food trading rule.
- \_\_\_\_\_ Reinforce no food in the playground rule.
- \_\_\_\_\_ Ensure a trained supervisor is **present** on the playground at all times.

***Shared goal:*** Students with life-threatening food allergies will over time develop greater independence to keep themselves safe from anaphylactic reactions. School communities will differentiate Assistance Plan Strategies for students with food allergies reflecting the same generous spirit and understanding as is demonstrated for students with differentiated learning styles and other health-related student needs.

**TEMPLATES**

**AND**

**COMMUNICATION**

## **Process for Planning for a Student with Life-Threatening Allergies for Building Staff and Nursing Personnel**

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### **Early** (as time allows):

- \_\_\_\_\_ Make signs and laminate (signs are on the server)
- \_\_\_\_\_ Make parent/guardian packets for later distribution to include:
  - a. “To Parent/Guardians of Students with Life-Threatening Food Allergies”
  - b. “If You Want Your Child to Take Medication at School”
  - c. Emergency Action Plan

### **At Kindergarten Roundup (or upon enrollment of any new student):**

Collect information from parent/guardian reflecting health concerns of incoming kindergartners. This can be done using enrollment paperwork or another “Student Health Concerns” form.

### **Between Kindergarten Roundup and End of School Year:**

- \_\_\_\_\_ Nurse meets with each parent/guardian who has a child with a life-threatening allergy. This meeting is to gather information, complete the Food Allergy Assistance Plan. Give parent/guardian the parent/guardian packet referred to above.
- \_\_\_\_\_ Give copy of Assistance Plan to parent/guardian and principal.
- \_\_\_\_\_ Create Quick Check Action Plan to be given to bus driver, sub folders, childcare, K-Care, noon hour staff, and with each Epi-Pen/TwinJect.
- \_\_\_\_\_ As new students enroll, school secretary will give a copy of the Health Information Survey from the Notice of Entry” to the nurse so s/he is aware of “Student Health Issues”.
- \_\_\_\_\_ Secretary or nurse enters health information concerning new students into student database as reflected in the “Notice of Entry” and Kindergarten Roundup.
- \_\_\_\_\_ Create a database grid for each school reflecting strategies for all severe allergy students in that building.

### **Two Weeks Prior to Start of School:**

- \_\_\_\_\_ Parent/guardian should return:
  - Emergency Action Plan, signed by physician and parent/guardian
  - Medications ordered in Emergency Action Plan (Epi-Pen/TwinJect, Benadryl, Inhaler, etc.)
  - Picture of student, face only.
- \_\_\_\_\_ Distribute to all building staff the summary database reflecting strategies for all allergy students in that building.
- \_\_\_\_\_ Distribute the following documents to assigned classroom teacher and specials teachers:
  - Assistance Plan for student

- “To Teachers of Students Who Have Severe Allergies”
- Sample letter with instructions
- “When taking a student with medications on a field trip”
- Information on how to reach you if they have questions.

Send email notice to assigned teacher and special area teachers that an Assistance Plan has been left in their mailbox in case they choose to not be present in the school prior to contract requirements.

\_\_\_\_\_ Distribute to transportation the bus plan (Quick Check Action Plan) along with student address and bus route if known.

\_\_\_\_\_ Place ordered medications (Epi-Pen/TwinJect, Benadryl, inhaler, etc), Emergency Action Plan (EAP) and Quick Check Action Plan (QCAP) where needed:

- Clinic (bag containing medications, EAP with picture, QCAP with picture)
- In student clinic file (EAP)
- Medication book (original EAP with picture)
- Sub folder of class teacher and all specials teachers (EAP with picture and QCAP with picture)
- In bag with each Epi-Pen/TwinJect at locations around school as determined in the Food Allergy Assistance Plan (EAP with picture, QCAP with picture)
- Student CUM folder (EAP)

\_\_\_\_\_ Post signs (doors, tables, etc.)

\_\_\_\_\_ Schedule Epi-Pen/TwinJect trainings for:

- Teaching staff
- Noon hour staff
- Office staff
- K-Care
- Childcare
- Bus drivers

\_\_\_\_\_ Notify noon hour staff if specific food allergy strategies should be implemented (end of table with sign, separate table, etc.)

\_\_\_\_\_ Notify all elementary staff to not serve any foods containing nuts for two weeks until health concerns lists are distributed. During this time, classroom snacks should be limited to fruits and vegetables.

### **At the Beginning of the School Year**

\_\_\_\_\_ Schedule PAL training in classrooms

\_\_\_\_\_ Record expiration dates of Epi-Pen/TwinJect, if possible

\_\_\_\_\_ Make sure all plans have been implemented

\_\_\_\_\_ Distribute building set of PAL materials and/or establish a checkout system with help from the media center in order to share these materials.

\_\_\_\_\_ Introduce the food allergy student to all office staff, special area and support staff.



## Student Health Concerns

School Year: \_\_\_\_\_

From: \_\_\_\_\_  
(Parent/Guardian) (Daytime Phone)

\_\_\_\_\_  
(Evening Phone)

To: \_\_\_\_\_, School Nurse Building: \_\_\_\_\_

Re: \_\_\_\_\_  
(Student Name) (Birthdate) (Grade)

My child **does not** have any current medical concerns \_\_\_\_\_

Please call me so I may inform you of my child's medical situation which includes:

- Asthma
- Diabetes
- Medications
- Seizures
- Severe food or bee allergy
- Other, explain: \_\_\_\_\_

If your child **does** have a medical concern, the nurse will contact you to obtain more information and to plan for the upcoming school year.

Please return to the school nurse. Thank you!

## Food Allergy Assistance Plan – Parent/Guardian Interview Worksheet

Student:		
Birthdate:		Age:
School:		
Teacher:		
Grade:		
Does Student Ride Bus?	YES <input type="checkbox"/> NO <input type="checkbox"/>	
What programs is your child enrolled in:		
Parent/Guardian:		
Address:		
Telephone:		Email:
Parent/Guardian:		
Address:		
Telephone:		Email:
Source of Information:		
Today's Date:		
Review Date for Plan:		
Is Student Changing Schools This Year?	YES <input type="checkbox"/> NO <input type="checkbox"/>	
Person taking information:		

Allergens	
1.	Ingestion/Touch/Airborne
2.	Ingestion/Touch/Airborne
3.	Ingestion/Touch/Airborne
4.	Ingestion/Touch/Airborne
5.	Ingestion/Touch/Airborne

Asthma      YES                  NO                                  Eczema      YES                  NO

History of hives without allergic reaction      YES                  NO

## History of Allergy(ies) and Anaphylactic Reactions

### Location(s) of Epi-Pen/TwinJect. How many and where?

#### Where?

- Clinic
- Office/Clinic
- Classroom
- Special area classroom
- Cafeteria
- With noon hour worker
- On Student (how carried?)
  - back pack
  - fanny pack
  - waist belt
  - binder
  - pocket
  - purse

### Location(s) of Allergy Emergency Action Plans

- With each Epi-Pen/TwinJect
- Substitute folders
  - Classroom(s)
  - Special area classroom
- Medication notebook
- Nurse's file
- Cumulative (PA 60) folder

### Paperwork Given to Parent/Guardian

- To: Parent/Guardian of Students with Life Threatening Food Allergy
- Food Allergy Action Plan
- AAPS Medication Administration Policy highlights
- AAPS Request for Information Form – Release of Information

## **Lunch/Food Assistance**

### **Student**

All AAPS preschool/elementary schools will prohibit sharing or trading of food in the cafeteria. Student/Parent/Guardian(s) will have access to food service ingredient list.

#### ***Options:***

- Student may eat at general cafeteria table with any and all other students.
- Student may eat at a designated area of a general cafeteria table, which is marked with a sign indicating what foods may not be eaten in that area of the table.
- Student will eat at a table designated as a table where none of their food allergen is allowed.
- Student will eat in a designated area apart from the general cafeteria
- If the student with the food allergy is only allergic to nuts, other non-allergy students may eat in the designated non-allergy eating area if the non-allergy students have a hot lunch.
- Student will pick up a “no nuts (or other allergen) allowed” sign in cafeteria and place on table where she/he will eat that day. Student will remove and return sign upon leaving.

### **Food**

The student with a food allergy will only eat food brought home. However, if the student with the food allergy is a preschool or elementary school aged student and if that student is allergic only to peanuts or nuts, that student may also eat meals provided by food service. If a food allergen is not allowed in a particular room for part of a day (e.g. morning kindergarten, 3rd hour high school math, etc.) then that same food will not be allowed in the room for the whole day.

#### ***Options***

- Food allergen is not restricted in school building
- Student is independently capable of determining whether foods are safe for eating. Student will be responsible for reading labels.
- Food allergen not allowed in student’s classroom(s).
- Food allergen is not allowed to be eaten in common areas (art, computer lab, gym, music, media center, office, clinic, atriums used by multiple classes, child care, etc.)
- If an individual student/staff member eats the food allergen outside of the common areas and returns to the common areas, the student/staff member will wash his/her hands before returning to the restricted areas.
- Regardless of what they have eaten, all students/staff members returning to a food- restricted classroom will wash their hands upon entering the classroom.
- Food allergen is restricted in the cafeteria.
- Food allergen is restricted in school building and/or in specific zones throughout the building.

### **Table Cleaning Protocol**

Per district policy, cafeteria tables and benches will be cleaned prior to the first lunch period. Cafeteria tables and benches will be cleaned (between and after each lunch period).

## **Food Service**

To reduce the risk of nut products in the elementary schools, AAPS had decided to remove all obvious nut products from the elementary menu. Food Service management oversees the implementation of this practice.

## **Classroom**

Class projects will not include the use of allergens of the student. Ensure that signs are posted throughout the classroom as needed. The teacher will be provided with a copy of the student's Food Allergy Assistance Plan and Food Allergy Action Plan.

### ***Options***

- Classroom teacher, and/or school nurse and/or parent/guardian will provide teaching opportunities regarding allergies and how to support their classmates who have allergies (i.e. "Alexander the Elephant", PAL program, etc.).
- Teacher will send letter alerting families of classmates that no allergen may enter classroom. Child's name will be used only with written parent/guardian permission.
- Snacks (to be determined with teacher, nurse, and parent/guardian when teacher assignment is known).
  - Only fresh fruits and vegetables will be allowed into the classroom for snacks during the first two weeks of the school year or until the health lists are distributed. Student with food allergy will eat only what is brought from home (in backpack or kept in classroom)
  - After the first two weeks of school:
    - Student with food allergy will continue to eat only what is brought from home (in backpack or kept in classroom) or
    - Snacks for the remainder of the students in the classroom will be unrestricted, or
    - Snacks for the remainder of the students in the classroom will be restricted to an approved list of snacks provided by the parent/guardian of the student with food allergies
- Classroom tables will be cleaned after snack
- All students will wash their hands after snack
- Only the student with a food allergy will wash their hands after snack
- Birthday treats and parties and holiday celebrations:
  - Parent/Guardian will provide supply of allergy free treats to be kept in classroom for their student only.
    - Treats for the remainder of the students in the classroom will be unrestricted
    - Treats for the remainder of the students in the classroom will be restricted to an approved list of snacks provided by the parent/guardian of the student with food allergies
  - Parent/Guardian has chosen to be present for all parties involving food to monitor safety of their child.
  - Special occasion options, which do not involve food, will be implemented (e.g. special book readings, birthday pencils, class made remembrance books).

### **Preparation for all Staff Substituting in the Building**

Substitute folder identifies students and their allergies including child's picture, the Assistance Plan, and emergency action plan.

Substitutes are provided an information sheet by the office secretary with their time sheet outlining the school's general food allergy accommodations and are reminded to check their substitute folder for information specific to that classroom.

### **Building Options**

Outside groups utilizing the building will be provided with that particular school's general food allergy Food Allergy Assistance plan. Groups using the school after school hours will sign a contract which requests that they restrict bringing foods into the school which are not allowed and that they clean all table surfaces after use with disinfectant and disposable wipes.

Bathroom Options:

- Student will only use the bathroom in the classroom
- Student will have unrestricted use of the student bathrooms in the building

Drinking Fountain Options:

- Student will use only classroom drinking fountain or will be able to carry his/her own water bottle throughout the building.
- Student will have unrestricted use of the student drinking fountains in the building.

### **Art Options**

- No art projects or class projects will contain nuts or nut products or any other identified allergen will be allowed.
- Since birdseed often contains some nuts, no birdseed projects will be allowed.
- Recycled containers should be washed in a dishwasher before use. Parents/Guardians have the option of sending in their own container for student's use.
- Containers which previously contained nut products should not be used.

### **Music Options**

- Students will not share mouth instruments or mouth pieces with other students
- Mouth instruments will be kept in individual bags labeled with student's name between uses
- No seed percussion containers will be used

### **Computer Usage Options**

Food allergen will not be allowed in the computer lab.

Recommended Computer Usage Options:

- Unrestricted use of computer lab.
- A computer is designated for use by only students with specified allergies.
- A plastic cover is provided for a keyboard and is cleaned prior to use by a student with a food allergy.
- The student with a food allergy is provided with his/her own keyboard that travels with the student.
- The keyboard keys on all the computers are wiped prior to class use.
- The keyboard keys are wiped on the computer that the student with the allergy will be using. If the student with the allergy wipes the keyboard themselves, gloves will be provided.

### **Field Trips**

On every field trip, including walking field trips, all prescribed medications must accompany the teacher along with a cell phone or other means of communication (to call 911 or school) and emergency action plan.

The student with food allergies will stay under supervision of the teacher or his/her own parent/guardian at all times.

#### **Field Trip Options:**

- The bus driver will remove trash and any discarded food from the bus prior to picking up the class.
- Bus driver will clean the designated seating prior to picking up the class.
- Parent/Guardian will provide transportation.
- If eating on the bus is necessary due to long distance trips, the trash will be cleared from the bus and the seat of the student with the allergy will be re-wiped.

### **Bus/Transportation Options**

Parent/Guardian remains responsible for contacting transportation if there is any question about general bus service.

- Emergency action plan for the bus will be faxed to designated person at Transportation.
- AAPS policy indicates that there should be no eating or open food on the bus.
- No food treats will be given out by the bus drivers.
- Contents of emergency packet will be kept in student's backpack and will include:
  - Epi-Pen/TwinJect, other prescribed medications
  - Emergency action plan with student picture
  - Directions (with illustration) on how to use Epi-Pen/TwinJect
  - List of common signs and symptoms of a reaction
- Parent/Guardian will identify the student to the driver on the first day of school

### **Childcare**

School Action Plan and Food Allergy Assistance Plan will be followed by childcare staff. Parent will supply childcare staff with emergency medications to be used when office area is closed.

Meet with childcare provider to review Action Plan and Food Allergy Assurances Plan.

### **Staff to be Trained**

Office staff	Bus drivers and substitutes
Noon hour staff	Itinerate staff
Principal	Cafeteria worker(s)
Teachers and substitutes	Parapros
Specials teachers and substitutes	ESL staff
Childcare providers	

The nurse, principal and transportation administrator will maintain documentation of who has been trained. Sign in lists will be kept in school medication notebooks.

### **Cumulative File and School Database System**

Current Emergency Action Plan is placed in Cumulative folder  
Food allergy information is entered into school database system

### **Playground Options**

- No food or eating of food is allowed by students or staff on the playground while school is in session.
- Food use or distribution during all school events will be restricted to a clearly identified area. This area will be communicated to all parents/guardians in advance of the event.
- Student with food allergies will be monitored while on the playground by a designated adult.
- The playground will be monitored by at least one adult who has been trained on recognizing the signs of food allergies and how to administer an Epi-Pen/TwinJect.

\*Following completion of this interview worksheet and the distribution of *To: Parents/Guardians of Students with Life Threatening Food Allergies* checklist, a Food Allergy Assistance Plan should be completed.



## To: Parents/Guardians/Family of Students With Life-Threatening Food Allergies

As we work together to prepare for your child's needs for the school year 2006-2007, please keep in mind the following information.

### Parent/Guardian Responsibility Checklist

1. **Bring the Emergency Action Plan, pictures, Epi-Pen/TwinJect and other prescribed medications to the school office 2 weeks prior to the start of school.** The Emergency Action Plan must be reviewed and signed by a physician and parent/guardian annually. The picture(s) which you bring (face only) will be attached to copies of your student's Emergency Action Plan so that your child may be quickly identified by anyone caring for your child during an emergency.
2. If your child's orders include liquid Benadryl, or another antihistamine, provide the Benadryl along with a medication measuring cup if appropriate.
3. Before bringing your child's Epi-Pen/TwinJect to school, please mark their expiration dates on your calendar at home so that you will remember to replace their Epi-Pen/TwinJect at the time of expiration. An EXPIRED EPI-PEN/TWINJECT cannot be used in the event of an emergency.
4. If your child has a Food Allergy Assistance Plan for their allergies from the previous school year (enclosed), please review it. Contact your school nurse, before the end of that school year to let he/she know if you wish the plan to continue as is for the next school year, or if changes need to be made. To reach the school nurse, please call your child's school office and leave a message. The Emergency Action Plan will still need to be rewritten and signed by your health care practitioner annually.
5. Please review the handout, "If You Want Your Child to Take Medication at School" for information about the AAPS Medication Policy.
6. Each student for whom an Epi-Pen/TwinJect is prescribed must provide an Epi-Pen/TwinJect to be kept in the clinic/office. Your child's plan may or may not include carrying an Epi-Pen/TwinJect on their person, or keeping one at other locations in the school. However, each student must have an Epi-Pen/TwinJect in the clinic/office location as a backup.
7. Snacks are to be provided from home. How often your child brings a snack (e.g. daily, occasionally, etc.) will depend on whether your child's class schedules time for snacks and whether your child would like a snack. Teachers will not be responsible for making decisions regarding alternative snacks.
8. If your child's allergen is not allowed in his/her classroom, provide a list of snacks that would be safe for other students to bring into the classroom. Please bring this when you bring Epi-Pen/TwinJect and signed doctor's orders prior to school.
9. If possible, touch base with your child's teacher before school starts, in addition to the first or second day of school, to see if they have any questions or concerns. Once the school year has settled down to a routine, you may ask your child's teacher about ways you can be of help in keeping your child safe at school (e.g. being present during parties, going on field trips, etc.). Maintain good communication with your child's teacher.

10. Provide a list of grandparents, relatives or other designated people who are available to accompany field trips or parties where there is a higher risk of accidental exposure.
11. If your child rides a bus, personally introduce your child to their bus driver on the first day and identify your child as having a severe allergy with an Epi-Pen/TwinJect in their backpack or fanny pack. The school nurse will also notify the Transportation Department. Your child/student should sit in the seat designated by the bus driver.
12. Keep emergency contact information updated with the school office. Because the school may need to contact you in an emergency, please consider carrying a cell phone or pager so we may get in touch with you immediately.

## **Information From the School**

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1. Students with food allergies will eat only what you provide from home. This includes food for lunches, snacks, birthdays or other celebrations. If a student does not bring food, they will be allowed to call home to request that food be brought. When food is not available from home, the school will not be responsible to provide substitute food.
2. In elementary school, some students' plans will indicate that they need to sit at a lunchroom table designated as not allowing their food allergen. Students who need to eat at such a table due to nut allergies will be able to have other students without allergies sit with them only if the other students are eating a lunch from the cafeteria lunch program. Lunch supervisors will be alerted to monitor the students whereabouts while on the playground.
3. The AAPS has a policy of no eating or open food on school buses. However, AAPS wants to make parent/guardian aware that while the bus driver is driving and keeping his/her eyes on the road, this is difficult to enforce. Students and parents/guardians need to be aware that the buses are an area of higher risk for students with food allergies. The buses are used for many different purposes and events. Buses are periodically cleaned, however cleaning is not scheduled prior to each use. If this will present too high of a risk for your student, please discuss this further with your school nurse or principal.
4. The AAPS understand that school playground equipment is used during non-school hours. Although AAPS will not typically be allowing food taken to playgrounds during school hours, AAPS does not supervise whether food is brought onto school property during non-school hours. On the rare and special occasions that food is prepared, serviced and/ or eaten on the playground as part of a pre-planned school event, efforts will be made to restrict the food to an identified area. Parent/Guardian will be notified well in advance. Because of the nature of such events, AAPS wants to make parents/guardians aware that playgrounds are an area of higher risk for students with food allergies.
5. The AAPS wants parents/guardians of students with life-threatening food allergies to be aware that all students, including their child, are welcome to participate in all school activities. However, please be aware that circumstances may occur which present a risk level, which is difficult to reduce in the school setting. If possible, please provide parent/guardian supervision during these events to keep the risk level as low as possible. These include but are not limited to: bake sales, events with international foods, potluck meals, catered meals, and all-school social events.
6. Out of consideration for students with nut allergies, AAPS eliminated all known nut and nut products in elementary hot food menus and does not use vendors who knowingly prepare nut products.
7. Substitute teachers will be informed of any students with life-threatening food allergies by having a copy of the Emergency Action Plan with student picture in the "Sub Folder". Each building will present each substitute teacher upon arrival with a copy of the "Food Allergy Notice". This will remind them to check the sub folder for information about students with severe food allergies in their classroom. Office staff will also give student teachers, parents/guardians volunteers and other substitute staff the "Food Allergy Notice" when they check in.
8. The AAPS does allow non-school groups to use AAPS facilities on a pre-scheduled basis. AAPS staff is not present to supervise use of the building, including whether specific foods are present, during non-school hours. We cannot ensure that foods containing allergens will not be present in the school

building during non-school hours. To make non-school groups aware of areas where specific foods are not allowed, signs will be posted. In addition, groups will sign a voluntary agreement not to bring nuts or foods containing nuts into the schools.

AAPS wants to make parents/guardians aware that due to the increased age and maturity of students in the middle and high school levels, and due to the fact that entrance to these schools by the public occurs without general restriction, the foods brought into these schools are generally less restricted and less supervised.

9. Common signage will be used in all schools to indicate areas where particular foods are not allowed. This signage will include picture and printed communication.
10. The AAPS are unable to guarantee that your student with life-threatening allergies will not be accidentally exposed to his/her allergens in the school environment. However, AAPS will work to keep his/her risks as minimal as possible. Thank you for sharing information about your student to help us do this. Thank you also for educating your student as best as possible in ways that he can contribute to protecting himself/herself from exposures.
11. Please contact the school nurse or principal of your student's school immediately if you have any questions or concerns about plans to accommodate your child's needs. Thank you.



**Parent/Guardian Acknowledgement  
And Release of Information**

- The information on page 34 & 35 entitled: **Information From the School** has been presented to me and I understand the content.
  
- The staff of \_\_\_\_\_ School has permission to notify the people indicated below of my child's life-threatening allergy.

(Please **initial** to give approval.)

- |                             |   |
|-----------------------------|---|
| ____ All school staff       | ____ the name of my child may be included |
| ____ Classmates             | ____ the name of my child may be included |
| ____ Families of classmates | ____ the name of my child may be included |

\_\_\_\_\_  
Parent/Guardian

\_\_\_\_\_  
Date



Ann Arbor Public Schools  
 STUDENT INTERVENTION & SUPPORT SERVICES  
 2555 South State Street  
 Ann Arbor, Michigan 48104-6145  
 Telephone & TDD (734) 994-2318  
 Voice Mail Boxes 994-8292, Fax 994-1826

**CONSENT FOR DISCLOSURE OF PERSONALLY IDENTIFIABLE INFORMATION**

Name: Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_  
 Birth Date: \_\_\_\_\_ Date: \_\_\_\_\_

I hereby give consent to the persons and/or organizations listed below to release and/or exchange oral and/or written information regarding the person named above to the following Ann Arbor Public Schools staff:

Name/Role: \_\_\_\_\_ Name/Role: \_\_\_\_\_  
 Name/Role: \_\_\_\_\_ Name/Role: \_\_\_\_\_

Name: _____
Agency: _____
Address: _____
Phone: _____ Fax: _____

Name: _____
Agency: _____
Address: _____
Phone: _____ Fax: _____

Name: _____
Agency: _____
Address: _____
Phone: _____ Fax: _____

Name: _____
Agency: _____
Address: _____
Phone: _____ Fax: _____

Name: _____
Agency: _____
Address: _____
Phone: _____ Fax: _____

Name: _____
Agency: _____
Address: _____
Phone: _____ Fax: _____

**INFORMATION TO BE DISCLOSED:**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> CA-60 File                        | <input type="checkbox"/> Medical Reports              | <input type="checkbox"/> Physical Therapy Reports |
| <input type="checkbox"/> IEPT Reports                      | <input type="checkbox"/> Psychological Reports        | <input type="checkbox"/> Speech Therapy Reports   |
| <input type="checkbox"/> MET Reports/Re-Evaluation Reports | <input type="checkbox"/> Occupational Therapy Reports | <input type="checkbox"/> Teacher Reports          |
| <input type="checkbox"/> Other: (Specify) _____            |   |   |

**PURPOSE OF THE DISCLOSURE:**

- Educational Planning  
 Other: (Specify) \_\_\_\_\_

Consent is voluntary and may be withdrawn in writing at any time.  
 I do  do not  request a copy of the records being disclosed.

\_\_\_\_\_  
 Print Name

\_\_\_\_\_  
 Signature  
 Relationship:  Parent  Guardian  Surrogate Parent  Eligible Student

\_\_\_\_\_  
 Date

**This permission is valid for only one school year and must be obtained annually.**

## Food Allergy Action Plan (Page 1 of 2)



Student's Name: \_\_\_\_\_ D.O.B. \_\_\_\_\_ Teacher: \_\_\_\_\_

ALLERGY TO: \_\_\_\_\_

Asthmatic Yes\*  No  \*Higher risk for severe reaction

### STEP 1: TREATMENT

Symptoms		Give Checked Medication (To be determined by physician authorizing treatment)	
		<i>Epinephrine</i>	<i>Antihistamine</i>
If an allergen has been ingested, but <i>no symptoms</i>		<input type="checkbox"/>	<input type="checkbox"/>
Mouth	Itching, tingling, or swelling of lips, tongue, mouth	<input type="checkbox"/>	<input type="checkbox"/>
Skin	Hives, itchy rash, swelling of the face or extremities	<input type="checkbox"/>	<input type="checkbox"/>
Gut	Nausea, abdominal cramps, vomiting, diarrhea	<input type="checkbox"/>	<input type="checkbox"/>
Throat*	Tightening of throat, hoarseness, hacking cough	<input type="checkbox"/>	<input type="checkbox"/>
Lung*	Shortness of breath, repetitive coughing, wheezing	<input type="checkbox"/>	<input type="checkbox"/>
Heart*	Thready pulse, low blood pressure, fainting, pale, blueness	<input type="checkbox"/>	<input type="checkbox"/>
Other*		<input type="checkbox"/>	<input type="checkbox"/>
If reaction is progressing (several of the above areas affected), give		<input type="checkbox"/>	<input type="checkbox"/>
The severity of symptoms can quickly change. *Potentially life-threatening.			

#### **DOSAGE**

**Epinephrine:** inject intramuscularly (check one) EpiPen®  EpiPen® Jr.  Twinject™0.3mg  Twinject™0.15mg   
(see reverse side for instructions)

**Antihistamine:** Give \_\_\_\_\_  
(medication/dose/route)

**Other:** Give \_\_\_\_\_  
(medication/dose/route)

### STEP 2: EMERGENCY CALLS

1. Call 911 (or Rescue Squad: \_\_\_\_\_). State that an allergic reaction has been treated, and additional epinephrine may be needed.
2. Dr. \_\_\_\_\_ at \_\_\_\_\_.
3. Emergency contacts:

Name/Relationship	Phone Number(s)	
a.	1.	2.
b.	1.	2.
c.	1.	2.

**EVEN IF PARENT/GUARDIAN CANNOT BE REACHED, DO NOT HESITATE TO MEDICATE OR TAKE CHILD TO MEDICAL FACILITY:**

Parent/Guardian Signature \_\_\_\_\_ Date: \_\_\_\_\_

Doctor's Signature \_\_\_\_\_ Date: \_\_\_\_\_  
(Required)

**TRAINED STAFF MEMBERS**

1 _____	Room _____
2 _____	Room _____
3 _____	Room _____

**EpiPen® and EpiPen® Jr. Directions**

- Pull off gray activation cap.



- Hold black tip near outer thigh (always apply to thigh).



- Swing and jab firmly into outer thigh until Auto-Injector mechanism functions. Hold in place and count to 10. Remove the EpiPen® unit and massage the injection area for 10 seconds.

**Twinject™ 0.3 mg and Twinject™ 0.15 mg Directions**



- Pull off green end cap, then red end cap.
- Put gray cap against outer thigh, press down firmly until needle penetrates. Hold for 10 seconds, then remove.



**SECOND DOSE ADMINISTRATION:**

If symptoms don't improve after 10 minutes, administer second dose.

- Unscrew gray cap and pull syringe from barrel by holding blue collar at needle base.
- Slide yellow or orange collar off plunger.
- Put needle into thigh through skin, push plunger down all the way, and remove.



Once EpiPen® or Twinject™ is used, call the Rescue Squad. Take the used unit with you to the Emergency Room. Plan to stay for observation at the Emergency Room for at least 4 hours.

For children with multiple food allergies, consider providing separate Action Plans for different foods.



*\*\*Medication checklist adapted from the Authorization of Emergency Treatment form developed by the Mount Sinai School of Medicine. Used with permission.*





# U-M Food Allergy Service

## FOOD ALLERGY ACTION PLAN

Place Child's  
Picture  
Here

Name: \_\_\_\_\_ D.O.B. \_\_\_\_\_ Teacher \_\_\_\_\_

ALLERGY TO: \_\_\_\_\_

Asthmatic Yes \*  No  \*High risk for severe reaction

### ◆ SIGNS OF AN ALLERGIC REACTION ◆

#### Systems:

#### Symptoms:

- MOUTH itching & swelling of the lips, tongue or mouth
- THROAT\* itching and/or sense of tightness in the throat, swelling, hoarseness, and hacking cough
- SKIN hives, itchy rash, redness, and/or swelling about the face or extremities
- GUT nausea, abdominal cramps, vomiting, and/or diarrhea
- LUNG\* shortness of breath, repetitive coughing, and/or wheezing
- HEART\* "thready" pulse, "passing out"

The severity of symptoms can quickly change. \*All above symptoms can potentially progress to a life-threatening situation.

### ◆ ACTION FOR MINOR REACTION ◆

1. If only symptom(s) are: **A few localized hives, give liquid Benadryl** Dose: \_\_\_\_\_
2. Then call parents or emergency contacts.
3. Continue to observe the child and if condition does not improve within 10 minutes, follow steps for Major Reaction below.

### ◆ ACTION FOR MAJOR REACTION ◆

If ingestion is suspected and/or symptoms(s) are: **Diffuse hives, lip, tongue swelling, cough, wheeze, vomiting, or other symptoms as noted above: give EpiPen (Jr.) and Benadryl IMMEDIATELY!** May repeat with 2<sup>nd</sup> EpiPen (Jr.) in 15 minutes if symptoms worsen.

1. Then call: 911 for assistance (ask for Advanced Life Support) and transport to the nearest Hospital Emergency Department
2. Call parents or emergency contacts.

### DO NOT DELAY TO CALL 911 FOR TRANSPORT TO A HOSPITAL BY AMBULANCE

Parent's Name \_\_\_\_\_ Doctor's Name \_\_\_\_\_

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_ Doctor's Signature \_\_\_\_\_ Date \_\_\_\_\_

Please call the Allergy Division, 734-936-5634, within 24-48 hours to inform your physician of a reaction.

#### EMERGENCY CONTACTS

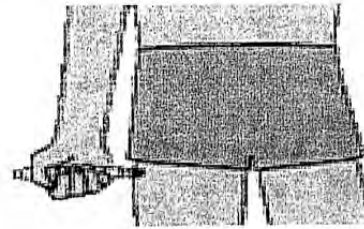
Mother: \_\_\_\_\_ Father: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_ Phone Number(s): \_\_\_\_\_

Other/Relation: \_\_\_\_\_ Other/Relation: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_ Phone Number(s): \_\_\_\_\_

<p>Minor Reaction/ Early signs of allergic reaction may include:</p> <p>The face may be flushed and wheals or hives may erupt on the skin in a localized area. May see itching</p>	<p>GIVE BENADRYL AND OBSERVE</p>
<p>Major Life-Threatening Reaction - Anaphylaxis may include:</p> <p>Swelling of the face; may be accompanied by swelling of the tongue, throat or other parts of the body. May be flushed.</p> <p>Hives over multiple areas of the body.</p> <p>If gut is affected, may see: nausea, vomiting, cramping, diarrhea.</p> <p>Difficulty breathing and wheezing, due to swelling of the air passages.</p> <p>Loss of color; cold and clammy as the blood pressure falls.</p> <p>Collapse / loss of consciousness (the child may appear asleep)</p>	<p>1. FIRST GIVE EPIPEN®</p> <p>2. THEN GIVE LIQUID BENADRYL IF CHILD IS AWAKE AND ABLE TO SWALLOW (HAS NO SWELLING OF MOUTH OR THROAT)</p> <p>3. CALL 911 for AMBULANCE</p> <p>4. FURTHER OBSERVATION AND TREATMENT IN HOSPITAL</p>



**USING THE EPIPEN®**

Give the injection into the middle of the outer/front thigh. The injection can be given through clothing. Each EpiPen® contains one dose.

Remove injector from package

Remove gray safety cap

Hold the injector firmly in your fist with the black tip at a right angle to the outer front thigh.

Press firmly into thigh – should hear click.

**HOLD IN PLACE FOR 10 SECONDS**

Remove EpiPen® and rub the area for 10 seconds

Call 911 for an ambulance even if the child improves. Give the used EpiPen® to the ambulance technicians.

If symptoms persist or worsen may give a second EpiPen® in 15 minutes

Adapted from these resources:  
 Food Allergy Initiative: [www.foodallergyinitiative.org](http://www.foodallergyinitiative.org)  
 Food Allergy & Anaphylaxis Network: [www.foodallergy.org](http://www.foodallergy.org)  
 EpiPen Center for Anaphylactic Support: [www.epipen.com](http://www.epipen.com)  
 UCL Institute of Child Health: [www.ich.ucl.ac.uk](http://www.ich.ucl.ac.uk)

© University of Michigan Food Allergy Service August 2006  
 Website: [www.med.umich.edu/foodallergy](http://www.med.umich.edu/foodallergy)

# Quick Food Allergy Action Plan

School Year: \_\_\_\_\_

Student Name: \_\_\_\_\_

Student Address: \_\_\_\_\_

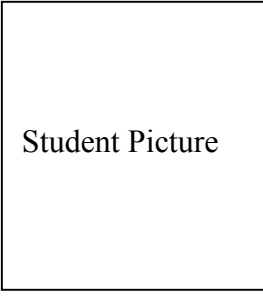
Student Birthdate: \_\_\_\_\_ Date of plan: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

Allergies: \_\_\_\_\_

Location(s) of medication(s): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_



(Please note: If medication is kept in the clinic/office, in the event of an allergic reaction, an adult should escort the student to the office/clinic)

## If above student has ONLY the following symptom(s):

\_\_\_\_\_

\_\_\_\_\_

1. Give \_\_\_\_\_
2. Stay with the student: **MONITOR BREATHING**
3. Contact school nurse, school office, parent/guardian

## If condition does not improve within \_\_\_\_\_ minutes, or if more symptoms develop:

1. **Give Epi-Pen/Epi-Pen Jr/TwinJect.** (Note time given)
2. Have student lay down
3. Call 911

## If above student has the following symptom(s):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

1. **Give Epi-Pen/Epi-Pen Jr/TwinJect.** (Note time given)
2. Give \_\_\_\_\_
3. Have student lay down
4. Call 911
5. Stay with student

## Emergency contacts:

School office: \_\_\_\_\_

School nurse: Cell: \_\_\_\_\_ Pager: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Cell: \_\_\_\_\_ Home: \_\_\_\_\_ Work: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Cell: \_\_\_\_\_ Home: \_\_\_\_\_ Work: \_\_\_\_\_

**If on a bus:** Follow above instructions for medication administration, call dispatch, state emergency, give student name, give bus location, and stay at your location.  
When EMS arrives, give medication pack and food allergy action plan to EMS.

## **If You Wish Your Child to Take Medication at School**

Highlights from the AAPS policy for administering medications to students

1. Any medicine should be taken at home if at all possible.
2. Medications needing to be given at school are to be brought to and from school by a parent/guardian.
3. Medications must be in their original container, labeled with:
  - a. Name of student
  - b. Name of medication
  - c. Time of administration
  - d. Dosage
  - e. Route of administration
  - f. Expiration date
4. Medications (prescription and over-the-counter) must be accompanied by written, signed instructions from a physician and signed authorization by a parent/guardian. Forms to be signed by the parent/guardian and physician may be obtained from your school office. These forms must be renewed at the beginning of each school year.
5. Physician written orders must match prescription instructions on the container's label.
6. Tablets must be sized for proper dosage (e.g. cut in half, etc.) prior to bringing medicine to school.
7. Students must provide their own measuring cup or spoon if needed.
8. Medications will be kept in the clinic/office area for the student to take with supervision or by administration of trained staff. Emergency medications will be kept unlocked in the office area and other locations as necessary.
9. Parents/guardians may request permission for a student to carry and self-administer their own emergency medications if written permission is presented from the physician and parent/guardian, and notification is provided to principal, school nurse and classroom teacher.
10. It is the responsibility of the student to report to the office at the time the medicine is to be taken, unless prevented by a disability or other reason.
11. Refill of the prescription is the responsibility of the Parent/Guardian.
12. Expired medications will not be administered.
13. Medicine will be discarded if not picked up on or before the last day of school.

## **To: Teachers with Students Who Have Severe Allergies**

---

This year you have in your class a student(s) who has such a severe allergy to a food(s) or insect stings that they require some accommodations for the sake of their safety, and must have an Epi-Pen/TwinJect readily available. Thank you for your care and concern for these students. This handout is to answer some of your questions. Please contact your school nurse with any further questions or concerns you have.

1. Each student with an Epi-Pen/TwinJect has a **Food Allergy Assistance Plan** specific to them. It may or may not look like other plans of students with the same allergies, depending on severity of reaction, age of student, etc. The school nurse will give you a copy of the plan for your student. Please read it thoroughly. If you have any questions, please email or call your school's nurse. Please keep this where a substitute teacher would find it (sub folder).
2. Attend the Epi-Pen/TwinJect training provided by your school nurse.
3. Each student with an Epi-Pen/TwinJect will also have a **Emergency Action Plan** specific to them and signed by their physician and parent/guardian, giving instructions on what to do if the student has an allergic reaction. You will be given a copy of this and an additional copy to keep in your sub folder with the student's picture attached. If you need to learn how to recognize an allergic reaction and administer an Epi-Pen/TwinJect, contact your school nurse.
4. If your student's Assistance Plan indicates that an Epi-Pen/TwinJect is to be **kept in your classroom**, keep it in an unlocked, easy to see place (i.e. so a sub teacher may easily spot it). It has often worked for the bag with medication(s) and Emergency Action Plan to be thumb tacked high on a bulletin board close to the teacher's desk. Not all plans for students with allergies will include keeping an Epi-Pen/TwinJect in the class
5. If a particular food(s) will not be allowed in your classroom, please **send a letter home** the first day of school alerting classroom **parents** what they may or may not send for snacks, birthday treats, etc. Attached is the prototype of a letter to use. Please feel free to add to this letter to make it specific and helpful to your class' needs. Any language that you add should maintain consistency with the language of "no nuts allowed". Do not describe an area as "nut free". This same letter should be handed out to any **volunteers or student teachers** for your class. Please contact your room parent/guardian regarding specific allergen issues.
6. Record information on the SubFinder system, which will notify **anyone substituting for you** that a student(s) in your classroom has life-threatening food allergies. The message should remind the substitute to look for further information about this in your sub folder. Ensure your sub folder has precise information regarding student's Assistance Plan.
7. All students with life-threatening food allergies will provide all **food**, which they eat during the school day. This includes lunch, snacks, treats for birthday and other celebrations. Consider having each child bring his/her own snack each day.
8. Establish a procedure for regular hand washing to prevent accidental contamination for adults and students alike.
9. Establish open **communication with parents/guardians** of students with allergies. If a particular food is not allowed in your classroom, the parent/guardian will be the best source to provide you with a list of safe snacks and treats which other non-allergic students may bring into the class. A parent/guardian of a student with allergies will most often be your best source of information. A mutually supportive partnership will be helpful to you and the student.
10. During the first two weeks of the school year, only fruits and vegetables will be allowed in the classroom for snacks, or until the health concerns list for all students is distributed so that the green emergency cards

have been read and each school has more complete information about who has allergies and what the allergens are.

11. Introduce the food allergy student to all special area and support staff as well as office staff and other regular school helpers.
12. On **field trips**: Refer to handout on “*When taking a student with medications on a field trip*”
13. **Classroom education** is available through borrowing materials from your school nurse or inviting your school nurse to teach in your classroom about how to be a friend to someone who has life-threatening food allergies. Monitor closely that bullying or teasing does not occur. Be supportive and inclusive towards students with food allergy.
14. When organizing class parties and special events, consider **non-food treats**. Use stickers, pencils or other non-food items as rewards instead of food.
15. If your class is planning a **bake sale**, please have some non-homemade items to sell. These would be prepackaged store-bought items with labeling which would allow a student to determine, with assistance, if it is safe for them to eat. Notify parents/guardians of students with allergies when your bake sale will be in case they wish to provide items safe for their child to purchase. The bake sale items should be restricted to a clearly identified area.
16. If your school has a **computer** labeled “no nuts allowed”, this computer is for use only by students with allergies to peanuts or nuts. If a student with a severe allergy from your class uses this computer, please see that the keyboard is wiped down after use, and replace any sign designating it as a computer with which contact with nuts is not allowed.
17. If your class goes to a playground, take a cell phone or walkie-talkie with you to seek help in an emergency.
18. If your class has **reading buddies or other visitors** come to the room, please be sure that allergies are kept in mind when snacks are present. If your class is required to wash their hands after lunch before reentering your room, have the reading buddies wash their hands before entering your room.
19. If your student’s plan indicates that they will react to **skin contact/touching** their allergen, please encourage regular hand washing by all students in your class, especially after lunch.
20. If you keep a **classroom pet** and nuts are not allowed in your room, check carefully the contents of the pet’s food to be sure that it does not contain nuts.
21. All elementary classes will be notified that food is not to be taken onto the **playground** during school hours.

Thanks again for all that you do to protect the safety of these students and allow them to participate fully in your class experience.

Nurse Name: \_\_\_\_\_

Pager: \_\_\_\_\_

Email: \_\_\_\_\_

## Composing a Letter to Classmates and Families When Your Class has a Student with Severe Food Allergies

---

**Note to teachers:** Before composing a letter to send to classmate’s families, be sure to read the Food Allergy Assistance Plan for all students in your class with life-threatening food allergies and talk with the nurse.

You may compose your own letter or adapt the one below, however, please keep in mind the following:

1. Use the language of “no nuts allowed”, “no milk allowed”, etc. Do not use language of “nut-free classroom”, or “milk-free lunch table”, etc. We cannot guarantee that an area will be free of an allergen, but we can say that the allergen will not be allowed and do our best to enforce that.
2. Do not use the name of the student with the allergy unless the parent/guardian has given written permission on the “*Parent/Guardian Responsibility Checklist*”.
3. Specifically/explicitly identify in the classroom letter the food(s) which will cause an allergic response and are not permitted in the classroom. If the child moves freely throughout the school building, then a letter to all school families should be considered.
4. If peanuts are not allowed in your classroom, no nuts of any kind will be allowed in your classroom. If tree nuts are not allowed in your classroom, no nuts of any kind will be allowed in your classroom. When Assistance Plan Strategies are made for a student’s allergy to peanuts, tree nuts, or any specific nut(s), the plan will be made to include all nuts.
5. You may allow the parent/guardian of a student with allergies to send a letter to the class if they request to do so; however a letter also needs to be sent from the school (principal, teacher, nurse).
6. See your principal or school nurse with any questions.

## Sample Letter

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Date:

Dear Parent/Guardian,

Occasionally a health concern arises in the school setting that requires enlisting the support of Parent/Guardians and classmates to help make the classroom a safe and healthy place for all. This letter is to inform you that a student in your child's classroom has a severe allergy to (nuts). Strict avoidance of (all nut) products is the only way to prevent a life threatening allergic reaction. Even touching a small amount of a product or accidental ingestion containing (nuts) could result in a life-threatening situation. We are asking your assistance in providing the student with a safe learning environment.

If exposed to (nuts) the student may develop a life-threatening allergic reaction that requires emergency medical treatment. To reduce the risk of exposure, no (nuts) will be allowed in your child's classroom this year. **Please do not** send any products containing (nuts) for your child to eat during snack in the classroom. Please read ingredient labels carefully. Any exposure to (nuts) through contact or ingestion can cause a severe reaction. If your child has eaten (peanuts or any nuts) prior to coming to school, please be sure your child's hands have been thoroughly washed prior to entering the school.

Since lunch is eaten in the cafeteria/lunchroom, your child may bring (peanut butter, peanut or nut products for lunch). In the cafeteria there will be a table designated where no (nuts) are allowed. Any classmate with a lunch from the cafeteria lunch program may sit at this table along with students with severe allergies. If your child sits at this table with a (peanut or nut) product, s/he will be asked to move to another table. This plan will help to maintain safety in the classroom while allowing classmates without allergies to enjoy (peanut/nut) products in a controlled environment. Following lunch, the children will wash their hands prior to going to recess or returning to class. The tables will be cleaned after each lunch.

Please remind your child not to share any food, eating utensils, or food containers with other students.

We appreciate your support of these procedures. We believe all families understand a parent/guardian's concern and worry about safety and will join us in ensuring that our environment is conducive to this goal. Please complete and return this form so that we are certain that every family has received this information. If you have any questions regarding ingredient lists or other questions, please contact any one of us.

Signature of Teacher: \_\_\_\_\_

Signature of Principal: \_\_\_\_\_

Signature of School Nurse: \_\_\_\_\_

-----  
I have read and understand the procedures to not allow (nuts) in the classroom. I agree to do my part in keeping (nuts) out of the classroom.

Child's Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## **Bus Policy Letter for Staff and Parents**

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Dear Staff and Parents,

Last year, the Ann Arbor Public Schools took on the charge to ensure our schools and school functions were welcoming and safe for students who live with life threatening food allergies and attend our schools. For the ever increasing number of students and their families who are affected and for whom anaphylactic shock could occur within seconds of ingestion or tactile contact with allergy causing food, this is indeed a very serious issue. A task force was established with representatives from every functional aspect of our district's operation. Local medical experts joined us. A handbook of guidelines and educational strategies was developed and distributed to all our schools. A copy is posted on our district website.

Because cross contamination and incidental contact can be extremely dangerous there should be no eating on our school buses. We recognize that this will require additional consideration when planning for field trips, athletic trips, and longer over night excursions to allow for eating before departure and/or periodic stops for off bus snacks. While some may perceive this as "inconvenient", for many others it is simply a matter of life or death. We believe in the compassionate understanding of our district staff and students and community members as we work together to increase understanding and education about life threatening food allergies. We thank you for your cooperation, compliance, and flexibility.

## When Taking a Student with Medication on a Field Trip

1. Take student's **emergency medications** (Epi-Pen/TwinJects, Benadryl, asthma inhalers, insulin, glucose tablets, etc.) with you on any field trip, including walking field trips. Also take **scheduled medications** with you, which will need to be given during the time period you will be out of the building.
  - a. Take the plastic zip lock bag from the office/clinic that has the student's medication and orders in it. You may need to carry a fanny or back pack to carry multiple medications.
2. The original container with all the medication in it must be taken on the trip. Individual pills may not be removed from the container prior to administration of the medication.
3. Medications should stay with the teacher or designated staff member at all times. Do not leave medications on a bus or in a car.
4. Students with medication or potential health needs must stay under the supervision of the teacher during the field trip. If the parent/guardian of the student with medication comes on the field trip, the student may be under their own parent/guardian's supervision. In this case only, the parent/guardian may carry their own son/daughter's medication and their medication only.
5. Administration of medication will be done by AAPS employees only, unless the parent/guardian of the student administers the medication. Giving medications to students may not be delegated to a non-AAPS employee (e.g. Parent/Guardian of another student). Ask another employee to witness you administering the medication.
6. To administer medication, **CHECK TO MAKE SURE YOU HAVE THE:**
  - a. RIGHT **STUDENT**
  - b. RIGHT **MEDICATION**
  - c. RIGHT **DOSE**
  - d. RIGHT **ROUTE** (e.g., oral, topical cream, injection, etc.)
  - e. RIGHT **TIME**

Follow up by documenting on the student's paperwork that you gave the medication (document: medication, dose, time and initials of person who gave the medication). Ask the witness to also initial the documentation.

7. Carry a cell phone on field trips. If you do not have one, let the office know so we can arrange for one to accompany you.
8. No eating on buses except when a plan has been developed for longer distances and/or in an extreme circumstance..

Questions? Call \_\_\_\_\_, School Nurse (pager: \_\_\_\_\_ )

## **Notice to All Substitutes and Volunteers**

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(Substitute teachers, substitute noon hour workers, substitute secretaries, parents/guardians in building, trailblazers, etc.)

### **\*\*\*Important\*\*\***

Our building has several students who have severe, LIFE-THREATENING food allergies to all nuts and nut products and in some instances, other food products (e.g. dairy).

For these students, eating or touching any nuts or products containing nuts could result in a potentially fatal allergic reaction.

As you begin today, immediately check with the office professionals or person to whom you report to learn about life-threatening allergies or students with other health concerns with whom you will work. If you are a substitute, check the appropriate sub folder for further information. All health information is CONFIDENTIAL.

Our staff is trained in how to respond to students with food allergies in the event of an accidental exposure, but prevention is the most important action we can all take.

To help reduce the risk of exposure for students with severe food allergies, please:

1. Wash your hands after eating or touching any foods
2. Do not eat or bring any food items into classrooms or specials classrooms without first checking with the teacher of that room
3. Observe the signs posted outside ALL rooms or areas that indicate that no nuts or other allergens are allowed in those areas.
4. Do not offer food to any student
5. Do not encourage sharing of food
6. Do not let students take food out to the playground.

Thank you for your cooperation in this important matter.

Questions? Contact the school nurse: \_\_\_\_\_ Pager: \_\_\_\_\_

## MEMORANDUM

TO: Building Administrators  
Head Custodians  
Noon Hour Staff

FROM: Ann Anglim

DATE: October 18, 2005

RE: Cafeteria Cleaning Protocol

The Washtenaw County Health Department has informed us that we need to change our table cleaning methods and forgo the usage of sponges for cleaning. This is due to a change in the law.

Disposable cloths have been ordered for each building. They are to be used to clean the cafeteria tables for one day and then be disposed of at the end of the day. Until the supply order arrives, we are authorized by the Health Department to use our existing sponge supply.

The timing on this also gives us the opportunity to restate our well established responsibilities pertaining to noon hour procedures. These procedures ensure that we provide the same quality and consistent standards across the district so that we continue to meet the health and safety needs of our students and staff.

These standards and procedures are as follows:

### **CUSTODIAL STAFF**

1. Be available during the noon hour (as mutually determined with the building principal) to respond to the following:
  - a. Any spill requiring the use of a mop. Noon hour staff is not required to mop the floors.
  - b. Any disease-causing spill (blood, vomit, urine, etc.) that requires a specialized cleaning agent.
  - c. Sweep between lunch periods.
2. Provide noon hour staff with the following supplies: cleaning chemical (Fresh 4.5 disinfectant and PH 7All Purpose Cleaner), disposable gloves, disposable wiping cloths and safety glasses.
3. Provide access to storage area for the noon hour staff.
4. Engage in ongoing communication with noon hour staff regarding their needs to maintain a good working environment.
5. Milk and liquids are to be thrown in with the remainder of the lunch trash. There is NOT to be any collection of the milk/liquids in buckets for disposal later.
6. Adhere to all safety regulations.

### **NOON HOUR STAFF**

1. Prepare cleaning solution per instructions. Sanitizing solution (Fresh 4.5) is mixed at a dilution ratio of 1 $\frac{3}{4}$  ounces per gallon of water (daily). Cleaning solution (PH 7 All Purpose Cleaner) is mixed at a dilution ratio of 1 ounce per gallon of water (daily).
2. Clean tables prior to the lunch period with the sanitizing solution. Only Noon Hour Staff will carry out this responsibility (no student helpers).
3. Clean tables using disposable wipes.
4. Clean tables between lunch groups with PH 7All Purpose cleaning solution.
5. Clean tables after the lunch period with the sanitizing solution. Only Noon Hour Staff will carry out this responsibility (no student helpers).
6. Dispose of wipes and cleaning solution at the end of the day.
7. Safety glasses are required to be worn. If you do not have safety glasses or if they have been lost, damaged or destroyed, please contact your Head Custodian and they will order them for you. for replacement. Staff are also required to wear disposable gloves when working with any chemicals.
8. Engage in ongoing communication with head custodian regarding your needs to maintain a good working environment.
9. Order supplies as needed (cleaning chemicals, disposable wipes, disposable gloves and safety glasses) through the head custodian.
10. Adhere to all safety regulations.

If you have any questions at all regarding these procedures, please contact me. Thank you in advance for your cooperation.



**SECTION 504 STUDENT ACCOMMODATION PLAN**

Student: \_\_\_\_\_

SST date: \_\_\_\_\_

School: \_\_\_\_\_

Student: \_\_\_\_\_ Gender: M F DOB: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Teacher: \_\_\_\_\_

**TEAM SIGNATURES**

School 504 Chairperson \_\_\_\_\_

Parent \_\_\_\_\_

Teacher \_\_\_\_\_

Other \_\_\_\_\_

Other \_\_\_\_\_

Other \_\_\_\_\_

Other \_\_\_\_\_

**EVALUATORY RESULTS: (describe the basis for suspecting a disability)**

**ELIGIBILITY FOR 504: (describe how the disability substantially limits a major activity)**

**ACCOMMODATIONS:**

Staff Responsibilities:

Parent Responsibilities:

Student Responsibilities:

Review Date: \_\_\_\_\_

Cc: Student's Cumulative File, all current teachers

**SECTION 504 STUDENT ACCOMMODATION PLAN**

Student: \_\_\_\_\_

**Environmental Interventions**

**Parental Involvement / Behavioral Interventions**

**Instructional Interventions**

**Test Taking / Assignment Interventions**

**Administrative Interventions**

The Principal or designee will:

**SECTION 504 STUDENT ACCOMMODATION PLAN**

Student: \_\_\_\_\_

Attachment A: **Emergency Health Plan for** \_\_\_\_\_

**Parents:**

Home:

Work/Cell:

**Signs of \_\_\_\_\_ include:**

- 1.
- 2.
- 3.

**Emergency Intervention for \_\_\_\_\_ :**

- 1.
- 2.
- 3:

**Physician:**





**NO FOOD  
OR  
DRINK**



**ALLERGY ALERT**  
**NO MILK OR EGGS**



**ALLERGY ALERT**  
**NO PEANUTS**  
**OR TREE NUTS**

# LATEX ALLERGY



**No latex rubber  
gloves/products  
No latex balloons**

# Do Not Forget



# Your EpiPen!



**ALLERGY ALERT**  
**NO MILK OR EGGS**

# STOP! LATEX ALLERGY



**No latex gloves**

**No balloons**

**SEE NURSE FOR DETAILS**



**ALLERGY ALERT**

**NO PEANUTS OR TREE NUTS**



Do Not Forget



Your EpiPen!

# Ann Arbor Public Schools

## REGULATION

Smoke-Free Environment		5500.R.01
<i>Issue Date</i> 7/1/05	<i>Effective Date</i> 7/1/05	<i>Approved By</i> Robert Galardi, Deputy Superintendent-Admin Services

### 8 Implementation, Compliance & Assessment

- 8.1 Annual distribution of policy to all groups by Human Resource Services
- 8.2 Annual check of posted signs by Facilities and Systems Department
- 8.3 Ongoing monitoring of reported incidents and follow-up unit supervisors

# Ann Arbor Public Schools

<b>BOARD OF EDUCATION POLICY</b>
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<b>5550 Chronic Health Conditions</b>
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Adopted: March 9, 2005
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Revised:
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Effective: March 9, 2005
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The Superintendent shall insure that every school has a plan in place to address chronic health conditions based on best practices, research and current law.

# Ann Arbor Public Schools

<b>BOARD OF EDUCATION POLICY</b>
<b>5600 Medication</b>
Adopted: September 10, 2003      Revised:      Effective: October 1, 2003

The Superintendent shall ensure that if any pupil must receive medicine during school hours, adequate control and supervision in the administration of the medicine will be provided.

In developing regulations for the administration of medicine to students by district staff, the Superintendent shall ensure that:

- Student safety is paramount;
- Medicine will be given in the schools only as ordered by a physician;
- Medicines kept in the schools for administration to students will be kept locked except for emergency medications;
- The circumstances under which a nurse or other employee may/must administer medicine are clear and unambiguous;
- The circumstances under which a student may self-administer medication are clear and unambiguous;
- Parent/guardian obligations regarding student medications are clear and unambiguous;
- The circumstances under which emergency medical services (e.g., 911) are to be called immediately are clear and unambiguous; and
- Disposal procedures for any and all "biohazards" generated are clear and unambiguous.

# Ann Arbor Public Schools

REGULATION		
Medication		5600.R.01
<i>Issue Date</i> 7/1/05	<i>Effective Date</i> 7/1/05	<i>Approved By</i> Geraldine Middleton, Deputy Superintendent-Instruction

## 1 Purpose

- 1.1 To provide procedures for adequate control and supervision in the administration of medication to a student

## 2 Organizational Units Affected

- 2.1 Pre-school, elementary, middle and high school staff

## 3 Definitions

- 3.1 Medication: includes prescription, non-prescription, and herbal medications, including those taken by mouth, by inhaler, those that are injected, those applied as drops to eyes, nose, and medications applied to the skin
- 3.2 Nurse: a licensed registered nurse (RN)
- 3.3 Parent: any parent or legal guardian of a student, if the student is a minor. If the student is the legal age of majority (18), then "parent" shall refer to the student.
- 3.4 SISS: Student Intervention and Support Services
- 3.5 Student: all students in attendance in the Ann Arbor Public Schools, including all students with disabilities who have Individual Educational Plans (IEP) or Section 504 Plans
- 3.6 Trained employee: employees who are not nurses but who have been trained in administering or witnessing the administration of medications

## 4 Background Information

- 4.1 This policy pertains to all medications and shall be interpreted to regard its primary objectives as preservation of student health and safety, and compliance with State law.
- 4.2 Cross-reference:
  - 4.2.1 State of Michigan PA 51 of 2002
  - 4.2.2 Michigan Revised School Code, Section 380.1179
  - 4.2.3 Michigan Medical Waste Regulatory Act, 1978 PA368, R 325.1545 (1)

# Ann Arbor Public Schools

## REGULATION

Medication		5600.R.01
<i>Issue Date</i> 7/1/05	<i>Effective Date</i> 7/1/05	<i>Approved By</i> Geraldine Middleton, Deputy Superintendent-Instruction

### 5 Procedures

- 5.1 Any medication should be taken at home, if at all possible.
- 5.2 Medication will be administered in the schools only as ordered by a physician and only if accompanied by written parent/guardian permission.
  - 5.2.1 The medication must be brought to the school in its original container and must be accompanied by written and signed instructions of the physician who ordered the specific medication; instructions on the label of the prescription or non-prescription drugs are not adequate.
    - 5.2.1.1 The physician's written authorization must be renewed at the beginning of each school year.
    - 5.2.1.2 Instructions must include the name of the medication, method of administration, time of administration, and dosage.
    - 5.2.1.3 Preparation of tablets that must be sized for proper dosage must be done prior to sending medication to school.
    - 5.2.1.4 Refill of the prescription is the responsibility of the parent/guardian .
    - 5.2.1.5 Medication will be discarded if not picked up on or before the last day of school.
  - 5.2.2 Medications kept in the schools for administration to students will be kept in a locked place not accessible to students, unless otherwise authorized by the physician, parent/guardian, principal, and school nurse.
    - 5.2.2.1 Emergency medications, e.g.: inhalers, epi-pen and glucagon, may be kept in a secure area, to be used in case of an emergency.
- 5.3 The school nurse should administer medication to a student whenever possible. Otherwise, the services of a building administrator or designee may be used. Medications that may be administered to a student by employees, under directions of the child's physician and with written parent/guardian permission, include tablets, capsules, inhalers, eye drops, ear drops, insulin, glucagon, nebulizers, liquids with a calibrated dispensing device, oxygen, topical creams and ointments, and auto-injectable medication such as epi-pen. No other kinds of medication may be administered except by nurses or other licensed medical personnel.
  - 5.3.1 Students may wear insulin pumps, with proper documentation as previously described.

# Ann Arbor Public Schools

<b>REGULATION</b>		
<b>Medication</b>		<b>5600.R.01</b>
<i>Issue Date</i> 7/1/05	<i>Effective Date</i> 7/1/05	<i>Approved By</i> Geraldine Middleton, Deputy Superintendent-Instruction

- 5.3.2 Students are responsible for reporting to the office to receive medication, unless prevented by a disability or other reason.
- 5.3.3 Unless a nurse administers medication, medication must be administered in the presence of another adult, except in an emergency that threatens the life or health of the student.
  - 5.3.3.1 Witnesses may include all trained employees. The primary person who administers the medication and the witness must be noted in the medication distribution log.
- 5.3.4 Medications that are prescribed to be administered once or twice daily should be given at home.
  - 5.3.4.1 The administration of attentional medications is exempted from 5.3.4.
- 5.4 Employees who are not nurses may be requested to administer medication, witness the administration of medication, or participate in required training.
  - 5.4.1 Employees may decline such requests, provided that the following conditions exist, and/or that the described requirements, procedures, and safeguards are strictly followed:
    - 5.4.1.1 religious objections
    - 5.4.1.2 having a disability which prevents such action
    - 5.4.1.3 where there are significant complex medication procedures
    - 5.4.1.4 not having the required training
    - 5.4.1.5 not having the supports (physician authorization, original container, witness, log-in sheet) required for such action
    - 5.4.1.6 other good faith objection as articulated by the employee
  - 5.4.2 Employees declining a request shall provide their reasons to their supervising administrator, who may then approve the request.
    - 5.4.2.1 To the extent possible, employees with objections shall communicate their objections in writing to the principal at the beginning of the school year, or otherwise in advance of requests to administer or witness the administration of medication.
    - 5.4.2.2 If the reason for the employee declining is 5.4.1.4 or 5.4.1.5 above, that decision is not subject to further review.
    - 5.4.2.3 If the reason for the employee declining is not 5.4.1.4 or 5.4.1.5 above, the administrator or employee may request a review of the decision by a committee composed of:
      - 5.4.2.3.1 a representative designated by the employee's union

# Ann Arbor Public Schools

<b>REGULATION</b>		
<b>Medication</b>		<b>5600.R.01</b>
<i>Issue Date</i> 7/1/05	<i>Effective Date</i> 7/1/05	<i>Approved By</i> Geraldine Middleton, Deputy Superintendent-Instruction

- 5.4.2.3.2 a personal representative to be selected by the employee, if the employee is not in a position in a bargaining unit
- 5.4.2.3.3 a representative of central administration
- 5.4.2.3.4 a third party chosen by mutual agreement of the employee's union, or employee, and Human Resource Services. Any cost to the individual is to be paid by the Ann Arbor Public Schools
- 5.4.2.4 The decision of the committee to approve or disapprove the employee's appeal to not administer medications will be final and not subject to other procedures by the union, the employee, or the administration.
- 5.5 The administration by school staff of an auto-injectable medication, such as injection of epinephrine for severe allergic reaction, including anaphylactic response to food allergies and/or reaction of the venom of a stinging insect, will be given whenever there is a good-faith belief that it is medically necessary.
  - 5.5.1 Emergency medical services (911) will be called immediately.
  - 5.5.2 As soon as possible, the staff member shall notify the school administration and complete a district Incident Report form following the incident.
    - 5.5.2.1 Parents/guardians should be notified immediately.
- 5.6 Any student may be allowed to carry emergency medication, e.g.: epi-pen, Benadryl, with proper documentation. All students are permitted to carry their own asthma inhalers when the following have been provided to the principal:
  - 5.6.1 written permission and instruction from the physician
  - 5.6.2 written permission from the parent/guardian ; and
    - 5.6.2.1 notification is given to the principal, school nurse, and classroom teacher(s)
    - 5.6.2.2 these documents will be kept in a place designated by the principal in consultation with the school nurse.
- 5.7 For all other medications, except controlled substances, (e.g.: Ritalin, Codeine) students in middle school and above are permitted to carry and administer their own medication(s), when the following have been provided to the principal:
  - 5.7.1 written permission and instructions from the physician
  - 5.7.2 written permission from the parent/guardian
    - 5.7.2.1 These documents will be kept in a place designated by the principal in consultation with the school nurse.



## Ann Arbor Public Schools

<b>REGULATION</b>		
<b>Medication</b>		<b>5600.R.01</b>
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5.7.3 Permission for a student to carry her/his own medication is contingent upon the permission of the principal and nurse, and responsible management of the medicine by the student.

5.7.3.1 Any violation or misuse of self-administered medication that could be construed as "distribution" or in any way harmful to another student will result in withdrawing the permission to self-administer medication and be subject to disciplinary measures as indicated in the Ann Arbor Public Schools Rights and Responsibilities Handbook.

5.8 Administration of over-the-counter (non-prescription) drugs must comply with the medication policy's procedures.

5.8.1 Any non-prescription, non-FDA approved medication, or any medications with directions not written in English used to treat a condition, will be administered at the discretion of the building administrator and/or nurse.

5.9 Any and all "biohazards" generated, including but not limited to sharps, bandages, gauze, novettes, and discarded live or attenuated vaccines, due to the administration of medications by school personnel shall be disposed of in accordance with the Michigan Medical Waste Regulatory Act, 1978 PA 368 R325.1545 (1)

5.9.1 Students who self-administer medications shall be responsible for returning any such wastes to their homes for proper disposal.

## **6 Work Instructions, Templates, & Samples**

6.1 Authorization for Administration of Medication form (Form 5600.R.01B)

6.2 Authorization for Carrying & Self-Administering Medication form (Form 5600.R.01C)

6.2.1 Requires physician and parent/guardian signature

6.3 Building Plans:

6.3.1 Handling Medical Emergencies

6.3.2 Disposal of Biohazards

6.3.3 Individual student medical plans to be shared with appropriate staff

6.3.4 Required permission documentation for students to carry, self-administer, and auto-inject medication

6.3.5 Signed parent/guardian authorization and release of district liability for administration of auto-injectable medication and student self-administration of auto-injectable medication

6.4 Serious Incident Report form (Form 5000.R.01A)

# Ann Arbor Public Schools

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- 6.5 Medication Log (Form 5600.R.01A)
  - 6.5.1 Date and time, dosage, name of medication, administering adult, witness, and signatures of each; any noted effects of or reaction to the medication
- 6.6 Posters, charts, and other visual aids describing basic first aid techniques and procedures to follow in medical emergencies
- 6.7 Posters, charts, and other visual aids to alert staff about potential medical conditions of their students: food and bee sting allergies, use of epi-pen, diabetic emergencies, asthma, etc.
- 6.8 Student Emergency Cards

## 7 Training & Feedback

- 7.1 Training by a licensed registered nurse, physician, or physician assistant for all staff who are designated or authorized to administer medications to students must include all of the following content and skill practice:
  - 7.1.1 a review and discussion of all Michigan and federal laws pertaining to the administration of medications to students in schools, including discussion of confidentiality issues
  - 7.1.2 a review and discussion of all policies and procedures relating to medications in schools, including areas of responsibility of school administrators, employees designated to administer medications, and medical professionals
  - 7.1.3 identification of the forms related to the administration of medications in schools
  - 7.1.4 procedures for the safe storage and handling of medications in school, including procedures for receiving and disposing of medications
  - 7.1.5 the use, effect, and route of administration of the most commonly prescribed medications in schools, including adverse effects
  - 7.1.6 procedures for safely dispensing medications to students in schools and on field trips and other off-site school activities
  - 7.1.7 practice in identifying and administering medications to students
  - 7.1.8 policies and procedures related to student self-administration and self-possession of medication in schools
  - 7.1.9 review and practice recording the administration of medications
  - 7.1.10 review and discussion of procedures for dealing with medication administration errors.
- 7.2 Training opportunities will be announced at the beginning of the school year.

# Ann Arbor Public Schools

## REGULATION

Medication		5600.R.01
<i>Issue Date</i> 7/1/05	<i>Effective Date</i> 7/1/05	<i>Approved By</i> Geraldine Middleton, Deputy Superintendent-Instruction

- 7.2.1 Administration will also announce the opportunity for employees to decline participation in training and opportunities to administer medication or witness the administration of medication.
- 7.2.2 Training for employees shall be scheduled during their contractual year, or otherwise in accordance with their collective bargaining agreements.
- 7.2.3 Verification of training of individual staff members will be housed in each building and at SISS.

## 8 Implementation, Compliance & Assessment

- 8.1 Locked and secure medication storage areas shall be maintained by the building office professional.
- 8.2 Training protocol shall be provided by the school nurse to all individuals designated or authorized to administer medication.
- 8.3 Ongoing reviews of procedures are to be followed in each building.
  - 8.3.1 Accuracy of record keeping: medication log, storage of required parent/guardian permission forms, etc.
  - 8.3.2 Posted visual aids as needed throughout building
  - 8.3.3 Dissemination of all medical plans and emergency procedures to staff
- 8.4 Survey of staff regarding training needs and the effectiveness of training received shall be conducted by the school nurse.
- 8.5 Annual review of policy to ensure compliance with State of Michigan and federal laws shall be conducted by the school nurse.