

Lake Orion Community Schools

Guidelines and Protocols for Students with Food Allergies

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

General

1. Each student with an *epinephrine auto-injector* **MUST** have a severe allergy **Medical Action Plan (MAP)** specific to them and signed by their physician and parent/guardian, giving instructions on what to do if the student has an allergic reaction.
2. Classroom rewards, academic or behavioral incentives should consist of non-food items only, when possible.
3. Unscheduled/unplanned food distribution is not permitted.
4. Never question or hesitate to act if a student reports signs of an allergic reaction.
5. LOCS staff, in accordance with the LOCS Code of Conduct, will address bullying and threats toward any students with food allergy conditions. When appropriate, conduct classroom education for students regarding food allergies.
6. During school hours, food should not be eaten/served in common areas outside of the cafeteria, such as the school office, computer lab, and multi-purpose rooms, playground while those areas are in use by students.
7. All classrooms that cook or use foods for activities/instruction will contain ingredients suitable for those students in that room with food allergies. LOCS staff will inform parents/guardians of planned food usage, in any classroom, ahead of time. Ingredient lists can be made available upon request (48 hours is preferred).
8. Elementary classroom-provided birthday celebrations prefer **non-edible items and/or activities**. If an edible treat is provided, it must be pre-packaged, and store purchased with ingredient list. Edible treat will be sent home rather than eaten in the classroom.
9. Snacks should be free from peanut products in all elementary classrooms. Additional food allergens may need to be restricted from specific classrooms and will be decided on an individual basis. Students should not share a snack with another student.
10. All before-and after-hours, school sponsored events that serve food should:
 - Provide an area in which foods are clearly labeled.

11. For ALL student events during school hours when food is served:
 - ALL food to be served must be pre-approved by the building principal.
 - Provide only manufactured, pre-packaged, labeled foods in classrooms where anaphylactic food allergies exist.
 - No homemade foods items will be permitted (with the exception of middle and high school class projects/cooking classes).
 - Consult with principals and/or teachers when planning events.
 - Avoid serving food with known allergens from restaurants. Ingredient labels must be provided.
12. For elementary school classroom party celebrations that occur for Halloween, the winter holidays, Valentine's Day or end of year, only pre-packaged, labeled, and manufactured foods should be brought to school for the celebrations. Cut-up fruits and vegetables are allowable for classrooms that do not have students with life-threatening allergies. All classrooms will be peanut aware, and items brought to school should not contain peanut products as an ingredient. Classrooms with additional food allergen situations may have further restrictions. Additionally, if students are participating in the exchange of Valentines, only pre-packaged, store-bought Valentines should be brought to school for distribution to other students.
13. Adult attitudes can have significant impact on how children with food allergies are treated.

Responsibilities of Students with Food Allergies

1. Be firm and say "No, thank you" when offered food that did not come from home (unless reading food labels or other safety measures are in place).
2. Take as much age-appropriate responsibility as possible for avoiding allergens.
3. Know where medication is kept and assume responsibility when self-carrying to check that the epinephrine auto-injector is present.
4. Do not trade or share any food, drink, utensils, or food containers.
5. Wash hands with soap and water or use a hand wipe (not hand sanitizers) before and after eating.
6. Learn to recognize the symptoms of an allergic reaction.
7. Promptly and insistently inform an adult as soon as accidental exposure occurs or if symptoms appear with no known exposure.
8. Do not share epinephrine auto-injector with other students.
9. When eating in the cafeteria, sit at the assigned table if it is part of the student's plan.
10. When riding a school bus, sit in the seat designated by the bus driver if this is part of the student's plan.
11. Promptly report any teasing or bullying to an adult. Student code of conduct will be followed.

12. Learn how to read food labels when developmentally appropriate.
13. To prevent cross-contamination, stow lunches or snacks with individual belongings (i.e., backpack, cubby, locker, etc.) instead of in classroom-wide lunch or snack storage bins.
14. Assume developmentally appropriate responsibility to tell new or substitute staff about allergies.
15. Adult attitudes can have significant impact on how children with food allergies are treated.

Responsibilities of Parents/Guardians of Students with Food Allergies

1. Bring the severe allergy ***Medical Alert Plan (MAP)*** with doctor signature, picture, epinephrine auto-injectors, and other prescribed medications to the school office prior to the start of the school year. **MAPs** must be updated prior to the start of each school year. **Note the expiration date** for medications and remember to replace them when necessary.
2. Be willing to provide safe snacks for the student to keep in the classroom/office, as needed.
3. Teachers will not be responsible for making decisions regarding food/snacks unless pre-approved by parents/guardians in writing.
4. Consider attending field trips when possible.
5. Consider participating in planning for special events, parties, and celebrations that occur in the classroom or school and for teams, clubs, etc.
6. Strongly consider providing a medical alert bracelet or ID for student to wear.
7. Work collaboratively with school staff to promote increasing age-appropriate responsibilities as your child grows and matures.
8. Adult attitudes can have significant impact on how children with food allergies are treated.

Responsibilities of Superintendent and/or Designee

1. Lead the District's coordinated approach to managing food allergies.
2. Support professional development on food allergies for staff.
3. Educate students and family members about food allergies.
4. Create and maintain a healthy and safe school environment.
5. Adult attitudes can have significant impact on how children with food allergies are treated.

Responsibilities of School Principal/Administrator

1. Read and be familiar with all of the documents in this handbook and Appendix.
2. Meet with the family to gather necessary information as appropriate, preferably before school starts each year, particularly new families.

3. Assist teacher in crafting a letter that is sent to all students' parents/guardians alerting them to food allergen restrictions in the classroom (see *Letter from the Teacher, APPENDIX A*).
4. Ensure annual training for appropriate staff regarding; anaphylaxis, allergens that cause anaphylaxis, risk-reduction procedures, emergency procedures, and administration of epinephrine auto-injectors. Keep updated documentation of trained staff.
5. Work with the secretary to ensure that severe allergy **MAPs** and the prescribed emergency medications have been delivered to the office by the parent/guardian.
6. Work with the secretary to ensure the location of epinephrine auto-injectors is written on page 2 of the MAP in the space provided for this purpose. Include how many auto-injectors (i.e., one in office and one in the cafeteria; or two in the office; or one in the classroom; or student to self-carry, etc.).
7. Work with the secretary to ensure that the severe allergy MAP is copied and sent to those with a need to know.
8. Advise the PTA/PTO on food precautions needed when scheduling student events and fundraisers.
 - Approve all food to be served by a PTO/PTA sponsored event.
9. Post allergy alert signage around the building as needed. (See APPENDIX E: *Common Signage for Doors and Other Areas*).
10. Review field trip requests for conflicts with **MAP**.
11. Promote an inclusive, sensitive, and responsive school climate by helping to educate the broader school community on life-threatening allergies.
12. See Letter from the Principal in APPENDIX B; this may be used to alert and educate the community about food allergy restrictions in school.
13. Ensure that each substitute teacher and substitute paraprofessional have access to the sub folder with the following information:
 - a. The location **in the classroom** of emergency medication if epinephrine is to be kept there (see page 2 of the **MAP**).
 - b. Every severe allergy **MAP** submitted for this classroom is in the sub folder
 - c. Classroom restrictions, such as no peanut nuts/tree nuts allowed, or no class-provided snacks
 - d. The documents *Epinephrine Auto-Injector Instructions* and the *911 Emergency Protocol* (see APPENDIX H)
 - e. The document *Responsibilities of Substitutes and Student Teachers*
14. Reinforce/monitor that teaching staff are recording, as part of their "sub finder" message, the presence of student(s) with life-threatening allergies in that classroom.
15. Work with the secretary to ensure that the severe allergy **MAP** is copied and sent to those with a need to know:
 - Classroom teacher
 - Specials teachers (such as Art, PE, Music, Literacy Information Specialists)

- LSS/Interventionists
 - Sub folders
 - Transportation department
 - Rotation teachers (middle school)
 - Semester teachers (secondary school)
 - School-age care (SACC)
 - Paraprofessionals involved with student (e.g., in the classroom)
 - Staff supervising lunch and recess
 - Cafeteria/Kitchen Manager/District Food Service Director
16. Ensure accessible emergency communication between the office and all other areas, such as the classrooms, playground, lunchroom, gym, and during field trips (e.g., walkie talkies and cell phones).
 17. Post laminated allergy signs alerting staff, students, and community to allergy safe zones where needed (e.g., on classroom doors, tables, lunchroom, etc.) (See APPENDIX E)
 18. Review field trip requests for conflicts with **MAP**.
 19. Advise the PTA/PTO on precautions needed when scheduling student events and fundraisers.
 20. Adult attitudes can have significant impact on how children with food allergies are treated.

Responsibilities of Classroom Teachers & Special Area Teachers (i.e., LSS/Interventionists, Specials, LRC, etc.)

1. Review all general guidelines (above) as they provide an overview.
2. Review the severe allergy **Medical Alert Plan (MAP)** for all students having this plan.
3. The **MAP** specifies if a student self-carries the epinephrine auto-injector. When stored in the classroom, keep the medication and the allergy **Medical Action Plan (MAP)** together in a secure, easy-to-see, **unlocked** place (areas to consider might be in the classroom emergency bag or thumb-tacked high on a bulletin board close to the teacher's desk). Be sure the **MAP** is not posted for casual viewing. The location and expiration date of the medication should be written on the **MAP** in the space provided.
4. Be familiar with the **How to Read a Food Label** document as it pertains to your student's specific food allergy (see APPENDIX D).
5. Ensure the **911 Emergency Protocol** and **Epinephrine Auto-Injector Instructions** documents are posted (See APPENDIX G).
6. Be sure all substitute and student teachers and paraprofessionals are informed of the student's allergies including classroom food policies and restrictions (see **Responsibilities of Substitutes and Student Teachers** and **Responsibilities of Classroom Paraprofessional(s) and Classroom Volunteers**).
7. Establish a procedure for regular hand washing to prevent contamination from adults and students alike after students consume any food as well as prior to beginning instruction after the lunch/recess period.

8. With principal's assistance, craft a letter that is sent to all students' parents/guardians at the start of the school year alerting them to food allergen restrictions in the classroom (see ***Letter from the Teacher*** in APPENDIX A).
9. Ensure that a ***Medical Alert Label*** is on the cover of the sub folder to emphasize severe allergy ***MAPs*** (See APPENDIX F for labels).
10. Students should not share or trade snacks, lunches, and all other food.
11. When organizing elementary classroom parties, holiday celebrations, and special events: consider using non-food items and activities (See "***General***" guideline section). Involve parents of students with food allergies when possible. Provide communication to parents/guardians of food allergy students in advance if food is involved.
12. Be aware of non-food classroom supplies that may contain peanuts or tree nuts, such as food pellets for classroom pets, bedding for pets, hand soaps, lotions, empty recycled food containers, and arts and craft supplies.
13. Adult attitudes can have significant impact on how children with food allergies are treated.

Responsibilities of School Secretary

It is acknowledged that school secretaries play a vital role in the administration of ***Medical Action Plans***, including those students with food allergies. In addition to training that is available to all staff, school secretaries will need to become familiar with responsibilities as outlined in this document or as designated by the building Administrator/Principal.

1. At enrollment, collect information from parent/guardian reflecting health concerns of incoming student or from the Emergency Card or other enrollment paperwork.
2. Make parent/guardian packets to include the following documents (see Table of Contents for location of these documents):
 - a. ***Information for Parents/Guardians of Students with Life-Threatening Food Allergies***
 - b. ***Responsibilities of Parents/Guardians of Students with Food Allergies***
 - c. ***Responsibilities of Students with Food Allergies***
 - d. Severe allergy ***Medical Action Plan (MAP)***
 - e. ***Risk Reduction Strategy***
3. Arrange for the appropriate staff (i.e., principal and classroom teacher) to meet with the parent/guardian of a child with a life-threatening allergy; this meeting is to gather information and review the ***Risk Reduction Strategy***, if indicated.
4. A copy of any completed ***Risk Reduction Strategy*** should go to the parent/guardian, principal, teacher, and others as warranted.
5. Enter health information, or corrections as needed, on the electronic student emergency card and the school's hard copy if already printed.

6. Post laminated allergy signs alerting staff, students, and community to allergy restrictions where needed (e.g., on classroom doors, tables, lunchroom, etc.) (see Appendix E: ***Common Signage for Doors and Other Areas***).
7. Adult attitudes can have significant impact on how children with food allergies are treated.

Staff in Charge of Field Trips (See APPENDIX I)

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

Responsibilities of Substitutes, Student Teachers, Classroom Paraprofessionals and Classroom Volunteers

All adults serving in role of authority in classrooms share in the safekeeping of all students, including those with food allergies.

1. Be respectful and non-judgmental about all food restrictions. Work with principal, teacher, and parent/guardian of student with food allergies to ensure an inclusive and supportive classroom environment.
2. Keep student information private unless permission was given by the parent/guardian to share names or allergies.
3. Help promote non-food celebrations by suggesting alternatives. When organizing classroom parties, holiday celebrations, and special events, consider using non-food items and activities. Involve parents of students with food allergies when possible. Provide communication to parents/guardians of food allergy students in advance if food is involved.
4. To help reduce the risk of exposure for students with severe food allergies, please:
 - a. Wash your hands after eating or touching any foods.

- b. Do not eat or bring any food items into classrooms or specials classrooms without first checking with the teacher of that room. Observe the signs posted outside ALL rooms or areas that indicate that no peanuts or tree nuts or other allergens are allowed in those areas.
 - c. **Do not offer food to any student.**
 - d. **For lunch and snack, all students eat their own food brought from home or purchased from the cafeteria.**
 - e. Do not permit students to share or trade food, food utensils or containers.
 - f. Do not let students take food out to the playground or any other area not designated for food, unless medically ordered.
5. Ensure emergency communication with the office while supervising students on the playground (e.g., walkie talkies) as well as quick access into the building if needed.
 6. Adult attitudes can have significant impact on how children with food allergies are treated.

Responsibilities of Staff Associates/Paraprofessionals Supervising Lunch and Recess

1. Be aware of students who have a severe allergy **Medical Action Plan (MAP)**; be familiar with the severe allergy **Medical Action Plans (MAPs)** for these students as well as any **Risk Reduction Strategy** plans
2. Maintain a copy of all severe allergy **Medical Action Plans (MAPs)** with photos in an easily accessed location in the lunchroom that maintains students' privacy, such as a binder. Be aware of how and where to access the emergency medications.
3. Be sure to wash hands (or change gloves) in-between handling any food from the non-allergy zones and the allergy zone tables.
4. Ensure the **911 Emergency Protocol** and **Epinephrine Auto-Injector Instructions** are posted. See APPENDIX G and APPENDIX H.
5. Lunchrooms/cafeteria will have "allergen-restricted" tables for allergic students requiring allergen-avoidance measures; these tables should be prominently labeled according to the restricted allergen. Combining the allergen-restricted table with the table for students buying cafeteria meals is recommended. **All food served at these tables/areas must be purchased at school or checked by a school designee** (except for students with food allergies).
6. Ensure lunch tables are being cleaned every day and in between each lunch group using efficient and thorough cleaning methods (see **Cafeteria Cleaning Protocol ATTACHMENT J**).
7. Lunchroom/cafeteria staff will be trained to give epinephrine and are present to monitor the allergen-restricted lunch table for:
 - a. Allergic reactions
 - b. Food sharing or trading (no sharing of food whatsoever)
 - c. School-purchased food only (except for students with food allergies)
 - d. Checking home lunches to determine if it is allergen free or not

8. Be aware of students with food allergy ***Medical Action Plans (MAPs)*** when on the playground.
9. Adult attitudes can have significant impact on how children with food allergies are treated.

Responsibilities of Food Service Director/Contractor

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

Responsibilities of SACC and Before-School and After-School Activities (GAP)

1. Child Care Supervisor will oversee training and food allergy protocols and prevention strategies of SACC personnel.
2. Be familiar with the students' severe allergy ***Medical Action Plans (MAPs)***
3. Maintain a copy of all severe allergy ***Medical Action Plan (MAPs)*** with photos in an easily accessed location and be aware of how and where to access the emergency medications.
4. Ensure the ***911 Emergency Protocol*** and ***Epinephrine Auto-Injector Instructions*** are posted (See Appendix).
5. All LOCS childcare programs (SACC) must comply with all food allergy guidelines as listed above.
6. GAP programs will not distribute food (unless pre-approved by the GAP supervisor or building principal).
7. Be vigilant in monitoring the whereabouts of allergic students on the playground.
8. Adult attitudes can have significant impact on how children with food allergies are treated.

Responsibilities of School Bus Drivers and Transportation Department

1. Maintain a copy of all severe allergy ***Medical Action Plan (MAPs)*** with photos in an easily accessed location and be aware of how and where to access the emergency medications (**NOTE: epinephrine cannot be stored on the bus**).
2. Have accessible the ***911 Emergency Protocol*** and ***Epinephrine Auto-Injector Instructions*** (See Appendix).

3. Maintain a policy of no eating or open food on the bus, except when medically necessary (e.g., diabetic students need to eat).
4. Bus drivers should **never hand out food treats**, even on special occasions.
5. Ensure that each bus is equipped with 2-way communication.
6. Bus drivers should be aware of where students with food allergies are seated. If necessary, monitor that students are in a designated seat if part of the ***Medical Action Plan (MAPs)*** for transporting the student to/from school and/or on field trips.
7. Adult attitudes can have significant impact on how children with food allergies are treated.

Responsibilities of Parent Teacher Association (PTA/PTO)

1. Avoid using food when possible. Consider putting each event/activity through a 3-point checklist:
 - a. What is the goal of the event?
 - b. Can this goal be achieved without food? (If so, eliminate it.)
 - c. If not, how can we choose foods that allows everyone in our school community to participate fully and safely?
2. If not possible to eliminate all food, choose activities and foods that allow all children to safely participate.
3. All food to be served at any PTA/PTO sponsored event must be pre-approved by the building principal.
4. Engage parents of children with food allergies in PTA/PTO event planning process; they are a valuable resource.
5. Use individually wrapped and labeled foods at events. This helps prevent cross contamination and allows students and parents to read labels to ensure safety.
6. Do not serve food to any child without parent knowledge and consent.
7. If food is served, try to keep it isolated to one area and encourage hand washing afterward.
8. Provide means for children to wash their hands as necessary (commercial wipes are okay, hand sanitizer is not sufficient).
9. Invite parents of children with food allergies to attend events and monitor their child.
10. Be aware that some non-food items, such as craft supplies, may contain allergens.
11. Adult attitudes can have significant impact on how children with food allergies are treated.
12. For all student events during school hours (classroom or school-wide), only manufactured foods with ingredient labels (no homemade foods) may be served; individually packaged foods are best. If food is not individually wrapped, ingredient labels should be available

and/or posted for students or family members to review. Principals must be consulted by event planners (including staff, students, parents/guardians) before food is served, as foods should not be offered that contain known food allergens listed in the MAPs on file for that building. (Individual groups or clubs [i.e., Robotics club, swim team, etc.] should consider food restrictions of members as appropriate.)

13. All student events during non-school hours in which food is served must have manufactured food items with ingredient labels available. Thorough cleaning processes must be followed: tables and/or surfaces with which food has come into contact should be cleaned with warm, soapy water (or wipes).
14. All before- and after-hours school-sponsored events that serve food must identify a clearly defined area where food will be served and/or consumed. The student with life-threatening allergies and his/her family should be notified well in advance of these events. Thorough cleaning processes must be followed: tables and/or surfaces with which food has come into contact should be cleaned with warm, soapy water (or wipes).
15. Adult attitudes can have significant impact on how children with food allergies are treated.

Source for #1-10: National PTA. One Voice. Food Allergy Tips for PTA Leaders.

Information for Parents/Guardians of Students with Life-Threatening Food Allergies

1. LOCS has a practice of no eating or open food on school buses (except when medically ordered.) However, LOCS wants to make parents/guardians aware that the bus driver is keeping his/her eyes on the road, making this difficult to enforce. Buses are an area of higher risk for students with food allergies.
2. LOCS understands that school playground equipment is used during non-school hours. Although LOCS will not typically allow food on the playgrounds during school hours, LOCS does not supervise food use on school property during non-school hours. LOCS wants to make parents/guardians aware that playgrounds are an area of higher risk for students with food allergies.
3. LOCS 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 certain events may present increased risk for students with food allergies. If possible, please supervise your child during these events to keep the risk level as low as possible.
4. For the safety of students with peanut/tree nut allergies, LOCS eliminated all known peanut and tree nut products in the school cafeteria menus and does not use vendors who knowingly prepare peanut/tree nut products.
5. Substitute teachers will be informed of any students with life-threatening food allergies and will have a copy of the severe allergy **Medical Alert Plan (MAP)** in the sub folder. Office staff will attach a **Medical Alert Label** on the sub folder that reads: **Medically-at-Risk Student **READ SUB PLAN**.**

6. LOCS allows non-school groups to use our facilities on a pre-scheduled basis. LOCS 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. To make non-school groups aware of areas where specific foods are not allowed, signs will be posted.
7. LOCS wants to make parents/guardians aware that due to the increased age and maturity of students at 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 than elementary buildings.
8. Common signage will be used in all schools to indicate areas where particular foods are not allowed.
9. LOCS is unable to guarantee that your student with life-threatening allergies will not be accidentally exposed to an allergen in the school environment. **Therefore, the term allergy “FREE” is not used as a descriptor.** We do not want to provide a false sense of security that might lead to less vigilance but rather to remain ever aware of possible food allergens and their avoidance.
10. Adult attitudes can have significant impact on how children with food allergies are treated.