## Procedure 3515-P(1): Food Allergy Management - Medical Plans of Care

**Status: ADOPTED**

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There are several written documents individualized for a particular student with a severe or life-threatening food allergy which may be used to address the student's needs throughout the school day. These may be developed with input from a core team, which may include the student (if appropriate), the student's parent/guardian, the principal or their designee, the student's teacher, the school nurse, the cafeteria manager, the counselor, transportation staff, coaches, and other personnel deemed necessary to make decisions about food allergies. Medical plans of care may include the:

**Emergency Care Plan:** A medical plan of care distributed to all school personnel who have responsibilities for the care of the student. This plan specifically describes how to recognize a food allergy emergency and what to do when signs or symptoms of these conditions are observed. In the event the student reports exposure to a food allergen or shows symptoms of anaphylaxis, they may be treated according to the Emergency Care Plan. This plan may be developed from information provided by the student's physician and parent/guardian prior to the student's entry to school, or immediately after the student is diagnosed with a severe allergy. Similar plans may also be developed for staff members with severe allergies.

**Individualized Healthcare Plan:** A medical plan of care that may be developed by the school nurse in collaboration with the student's health care provider and core team to provide written direction for school personnel to follow in accommodating the student's needs throughout the day. It may address student conduct as well as use of allergen-containing products in the classroom, the cafeteria, the library, at recess, on field trips, during extracurricular activities, and in other environments the student will face during the school day or during District-sponsored activities. The plan may describe functional problem areas, set goals for overcoming problems, list tasks or interventions to meet the goals, and identify staff members responsible for implementing the plan. This plan may be developed prior to the student's entry to school or immediately after the student is diagnosed with a severe or life-threatening allergy. Input from the core team may be sought before changes are made to this plan. Similar plans may also be developed for staff members with severe allergies.

If a student's severe or life-threatening allergy is determined to be a disability, it may also be addressed in a Section 504 Service Agreement and/or in the Related Services Component of their Individualized Education Program (IEP).

A complete set of a student's current medical plans of care related to food allergies may be maintained by the school nurse. The Superintendent or building principal may also require that copies of the Emergency Care Plan be kept in other places where they may be needed.

The school nurse may provide information or copies of the different components of a student's

medical plans of care to appropriate personnel, including teachers, cafeteria staff, District staff supervising school-sponsored extracurricular activities, and others who may be involved in the implementation of the medical plans of care. Such information may be provided to substitute teachers along with contact information for the school nurse.

Students with Disabling Special Dietary Needs

When a student's food allergy is identified, evaluated, and determined to be a disabling condition, the District shall make appropriate accommodations, substitutions, or modifications for such students in accordance with the applicable policies relating to students with disabilities.

In such cases, the student may be required to have a written medical statement signed by a licensed physician to be included with the student's Individualized Healthcare Plan. The medical statement may identify:

1. The student's special dietary disability;
2. An explanation of why the disability restricts the student's diet;
3. The major life activity(ies) affected by the disability;
4. The food(s) to be omitted from the student's diet; and
5. The food or choice of foods that must be provided as the substitute.

Students with Non-Disabling Special Dietary Needs

The District may, at its discretion, make appropriate accommodations, substitutions, or modifications for students who have a special dietary need but whose needs do not meet the definition of disability, such as a food intolerance or allergy that does not cause a reaction that meets the definition of a disability. The decision to accommodate such a student shall be made on a case-by-case basis.

Students who fall under this provision may be required to have a written medical statement signed by a physician, physician assistant, or certified registered nurse practitioner identifying the following:

1. The medical or other special dietary condition which restricts the student's diet;
2. The food(s) to be omitted from the student's diet; and
3. The food or choice of foods to be substituted.

Allergy Inservice Training

The District may provide periodic training to teachers, aides, volunteers, substitutes, food service personnel, transportation personnel, and others as needed on any of the following topics:

1. Basic information such as signs, symptoms, and risks associated with food allergy and anaphylaxis;
2. Awareness of food and non-food items that might present risk;
3. Strategies that reduce risk of exposure to identified allergens throughout the school day;
4. Designation and maintenance of allergen-free zones;
5. Basic food handling procedures, including hand washing, avoiding cross-contamination, and cleaning surfaces;

6. District and school level policies, procedures, and plans for managing students with chronic health conditions including allergies;
7. How to respond in the case of a possible severe or life-threatening allergic reaction;
8. Local emergency medical service procedures;
9. Proper storage and administration of epinephrine delivery systems, antihistamines, and other medications;
10. Strategies to manage student privacy and confidentiality while maintaining an inclusive class environment; and
11. How to deal with food allergy-related bullying.

Epinephrine and Other Medications

Students with severe allergies may be permitted to carry an epinephrine delivery system with them, in accordance with Policy 3510. A student's epinephrine may also be kept in other locations where it would be easily accessible for the student, such as in their classroom, with a District employee supervising lunch or recess periods, or on their bus. Locations for storage will follow the manufacturer's guidelines. Staff may be notified of the locations of epinephrine in the school. The Superintendent or building principal may require that whenever students are present at a school, at least one person who has been trained to administer an epinephrine delivery system also be present.

Any student who receives epinephrine at school must be immediately transported to a hospital for evaluation by a licensed healthcare provider and further observation or must be immediately released into the care and custody of their parent(s)/guardian(s).

The Cafeteria

The Superintendent or building principal may require that cafeteria staff take any of the following steps to accommodate students with severe or life-threatening allergies:

1. Prohibit specific foods;
2. Clean and sanitize kitchen surfaces and equipment to avoid cross contamination with potential food allergens;
3. Wear non-latex gloves, and change or wash gloved hands during extended use to avoid cross-contamination with potential food allergens;
4. Have photos of students with severe or life-threatening allergies placed in the kitchen, only for kitchen staff to view;
5. Make appropriate substitutions or modifications to meals served to students with serious allergies;
6. Be prepared to make food ingredient lists used in food production and service available. Maintain food labels from each food served to a child with allergies for at least 24 hours following service in case the student has a reaction from a food eaten in the cafeteria; and
7. With parental approval, set up cafeteria procedures such as entering a student's allergy into database. Such information would remain confidential and be shared on a need-to-know basis in compliance with federal privacy regulations.

Allergies and the Classroom

The school nurse, teacher, and parents/guardians of any children with severe or life-threatening allergies, may collaborate to set a classroom protocol regarding the management of food in the

classroom. This protocol will be communicated by the teacher to the students and parents of the affected class, and may include any of the following accommodations:

1. Parents of students with severe or life-threatening allergies may provide allergen-free snacks to be kept in the classroom and given to the student when treats are served in the classroom;

2. Students, parents, and staff may be prohibited from bringing homemade treats or specified foods for in-class consumption. Only commercially prepared treats with intact ingredient labels may be allowed in class;

3. Teachers may notify parents in writing of any school related activity that requires the use of food in advance of the project or activity;

4. Use of food for instructional lessons may be limited or eliminated;

5. Use of food or candy as part of a school project related to the curriculum may be prohibited; and

6. Allergen-containing foods may be prohibited in classrooms during after-school activities when that classroom will be used by a student with a known food allergy during the school day.

The Superintendent or building principal may require teachers to take any of the following additional steps to accommodate students with severe or life-threatening allergies:

1. Post signs indicating rules for preventing exposure to life-threatening allergens in the classroom and ensure that these rules are enforced;
2. Eliminate the use of food allergens in the allergic student's educational tools, school-provided supplies, and incentives;
3. Participate in planning students' re-entry into school after an anaphylactic reaction; and
4. Send notices to parents of students in the classroom that the classroom is a zone to be kept free of the specified food.

Teachers may be required to develop and implement age-appropriate lessons on allergies for such subjects as health, family and consumer sciences, biology, and physical education. Such lessons may emphasize:

1. Support for, and inclusion of, classmates with chronic health conditions, such as food allergies;
2. Bullying prevention, including reporting harassment, hazing, and bullying to school personnel;
3. Knowledge of potential allergens and the symptoms of a potentially life-threatening reaction;
4. Differences between life-threatening allergies and food intolerances;
5. Appropriate response to emergency situations such as life-threatening allergic reactions;
6. Developmentally-appropriate self-management of food allergies; and
7. The importance of following District health policies and guidelines, such as those regarding handwashing, food-sharing, and allergen safe zones.

<u>Transportation</u>

The school bus drivers may be informed when they are transporting a student with a life-threatening allergy. The Superintendent or building principal may require bus drivers to take any of the following additional steps to accommodate students with severe or life-threatening allergies:

1. Strictly enforce a policy of no eating on the bus. Students with medically documented needs may be permitted to eat allergen-safe foods on the bus;
2. Refrain from handing out food treats; and
3. Assign seats to students, and/or seat students with life-threatening allergies immediately behind and to the right side of the bus driver.

The Superintendent or building principal may require the transportation department to send letters to parents of all students who use District transportation informing them that at least one student at the school has a life-threatening allergy, requesting that their child wash their face and hands after breakfast and before boarding the bus, and informing them of rules prohibiting students from eating on the bus.

Field Trips

The Superintendent or building principal may require that those organizing field trips take any of the following steps to accommodate students with severe or life-threatening allergies:

1. Take into consideration the potential for exposure to the student's food allergens when determining sites for field trips, and consider ways of avoiding allergen exposure during the field trip;
2. Notify parents of students with severe or life-threatening allergies and the school nurse as soon as possible of any upcoming field trip;
3. Allow parents of students with severe or life-threatening allergies to accompany the student on field trips;
4. Store meals for students with food allergies separately to minimize cross-contamination;
5. Ensure that students do not eat on the bus;
6. Prepare ways for participants to wash hands before and after eating, such as with hand wipes;
7. Appoint a District employee attending the field trip to implement any student's Emergency Care Plan if necessary, and bring all supplies necessary to do so; and
8. Note the location of closest medical facility ahead of time.

Other Accommodations

The Superintendent or building principal or the designee may require that any of following steps be implemented to accommodate students with severe or life-threatening allergies:

1. Prohibit food and utensil trading and sharing, and post signs in schools informing students that they are expected to neither trade nor share food or utensils;

2. Designate particular tables in the cafeteria, particular classrooms, areas within classrooms, or other areas as allergen-free zones. These zones may be designated by a universal symbol, and be cleaned with a separate wash bucket and cloth with District-approved cleaning agents;

3. Post signs at points of entry to each school and/or on the school or District website advising that there are students with life-threatening allergies. Such signs may not disclose the identity of the student with the food allergy unless their parent has consented to that disclosure;

4. Have letters sent to all parents of children attending school with at least one student known to have a life-threatening allergy, notifying them of the severity of the health threat, signs and symptoms to be aware of, and a concise list of foods and materials of concern and school policy regarding them. This will be done in a way that protects the confidentiality of the student with the life-threatening allergy. If other students or parents may be able to guess or deduce which student has the life-threatening allergy, approval of the student's parent may be sought before the letter is sent;

5. Hold Emergency Care Plan drills to assure the efficiency and effectiveness of such plans;

6. Ensure that there is at least one functioning emergency communication device, such as a walkie-talkie or cell phone, available at all times in classrooms, on field trips, at recess, during physical education class, at school-sponsored extracurricular activities, and/or on school buses;

7. Develop a cleaning protocol to ensure that the threat of allergens is minimized;

8. Prohibit the sale of particular food items in the school; and

9. Request that students refrain from bringing foods to which a student is known to have a severe or life-threatening allergy to school, and request that parents refrain from sending such foods to school. A Superintendent or building principal may completely prohibit particular food items from the school or school grounds when it is felt that the benefits of doing so would outweigh the difficulty of enforcing such a ban and the controversy such a measure is likely to provoke.

Confidentiality

The District will endeavor to maintain the confidentiality of students with food allergies, to the extent appropriate and as requested by the student's parents/guardians. District staff shall maintain the confidentiality of student records as required by law, regulations, and Board policy.

Expectations of Students with Severe or Life-Threatening Allergies and their Parents

The Board expects students with life-threatening allergies to do the following, as age appropriate:

1. Take as much responsibility as possible for avoiding allergens, including refraining from sharing or trading of foods or eating utensils with others, refraining from eating anything with unknown ingredients or a known allergen; avoid putting anything in mouth such as writing utensils, fingers, or other foreign objects;

2. Use proper hand washing before and after eating and throughout the school day;

3. Learn to recognize personal symptoms;

4. Notify an adult immediately if they eat something they believe may contain a food to which they are allergic;

5. Notify an adult if they are being bullied, harassed, hazed, or threatened by other students as it relates to their food allergy;

6. Carry their epinephrine delivery system with them at all times if they are permitted to do so, or know where the delivery system is kept and who has access to it;

7. Know how to get to the nurse's office;

8. Develop an awareness of their environment and their allergen-free zones; and

9. Know their overall Individual Healthcare Plan and understand the responsibilities of the plan.

The Board encourages parents of students with serious allergies to do the following:

1. As age appropriate, teach their child to:

    A. Not share snacks, lunches, drinks, or utensils;
    B. Know which foods are and are not safe for them to eat, and to read labels, and understand ingredient safety;
    C. Understand the importance of hand washing before and after eating;
    D. Recognize the first symptoms of an allergic or anaphylactic reaction;
    E. Communicate with school staff as soon as they feel a reaction is starting;
    F. Understand rules and expectations about bullying related to food allergies, and report such teasing and/or bullying;
    G. Carry their own epinephrine delivery system when appropriate, or know where the epinephrine delivery system is kept and who has access to it;
    H. Administer their own epinephrine delivery system and be able to train others in its use; and
    I. Develop awareness of their environments, including allergy-controlled zones.

2. Inform the school nurse of their child's allergies prior to the opening of school, or as soon as possible after diagnosis. All food allergies must be verified by documentation from physician, nurse practitioner, or physician assistant;

3. Work with the core team collaboratively to develop the Individualized Healthcare Plan, and provide an Emergency Care Plan completed by the student's physician;

4. Complete and submit all requested and required forms. Provide the school with their current cell phone number and other emergency contact numbers;

5. Allow District health personnel to consult with the student's physician or healthcare provider, and provide current contact information for the healthcare provider;

6. Provide the school nurse with up-to-date emergency medications so they can be placed in all required locations for the current school year. Parents may be requested to provide two or more epinephrine delivery system. Medications must comply with the District medication policy of proper labeling and expiration;

7. Consider providing a medical alert bracelet for their child;

8. If requested, provide "safe snacks" for their student's classroom in case of an unplanned special event. Parents may also be asked to provide a nonperishable safe lunch to be kept at school in case the student forgets to bring lunch;

9. Review policies, procedures, and plans with the core team annually and following any allergic reaction at school; and

10. Provide the school nurse with at least annual updates on their child's allergy status. Inform the school of any changes in the child's life-threatening allergy status and provide a physician's statement if the student no longer has food allergies.

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| Other References | Description |
|---|---|
| ISBA Policy Services | https://www.idsba.org/member-services/policy/ |

**Cross References**

| Code | Description |
|---|---|
| 2400 | Special Education |
| 2410 | Section 504 of the Rehabilitation Act of 1973 |
| 2410 | Section 504 of the Rehabilitation Act of 1973 |
| 3510 | Student Medicines |
| 3510 | Student Medicines |
| 3510 | Student Medicines |
| 3516 | District-Provided Epinephrine |