

Loudonville-Perrysville Exempted Village School District

Food Allergy Regulations and Procedures



Board Adopted: March 9, 2015

John E. Miller, Superintendent/CEO
Christine Butts, Director of Pupil Personnel Services
Janine Maglott, RN, School Nurse
Terri Blanchard, Supervisor of Food & Nutrition Services
Tim Ray, Supervisor of Transportation Services

Loudonville-Perrysville Exempted Village School District

Food Allergy Regulations and Procedures

Table of Contents

Table of Contents	Page 1
Introduction	Page 2
Identification and Notification	Page 2
Individualized Allergy Action Plan	Page 2
Prevention and Implementation	Page 3
Family Responsibilities	Page 4 – 5
School Responsibilities	Page 6 – 7
Food and Nutrition Services Responsibilities	Page 8
Transportation Services Responsibilities	Page 9
Student Responsibilities	Page 10
Food Allergy & Anaphylaxis Care Plan	Page 11 -12

Loudonville-Perrysville Exempted Village School District

Food Allergy Regulations and Procedures

Introduction

The Loudonville-Perrysville Board of Education recognizes the increasing prevalence of potentially life-threatening food allergies among children. By working together, school personnel, students, parents, and physicians can effectively reduce the risk of accidental exposure to foods in the school setting, thus providing a safe educational environment for students with food allergies.

Identification and Notification

Identifying students with severe allergies is the first step in the process of developing a plan. Students will be identified through school registration by providing a doctor's note, a completed emergency medical form, and communication from families. Identification aids in proper planning for the school year, and allows school personnel to be educated, trained and prepared in a timely manner.

Individualized Allergy Action Plan

An *Allergy Action Plan* will be written after a student with a life-threatening allergy is identified. The school nurse and other key personnel will meet with parents and develop a plan that is unique to the child and his/her specific allergies. The plan includes the student's name, photograph, specific allergies, warning signs of reactions, treatment, and the location of medications and epinephrine injectors (EpiPen). The *Allergy Action Plan* will take into consideration situations in the school setting such as the cafeteria, recess, field trip, bus rides, and school-sponsored extra-curricular activities. All staff that has responsibility for a student with life-threatening allergies will receive a copy of the *Allergy Action Plan*.

Prevention and Implementation

Preventing exposure to the deadly allergen is very difficult in some cases, but very important. After identifying the student's allergy and writing an *Allergy Action Plan*, prevention measures will be evaluated and implemented. The most important prevention is to strive for an allergen-free classroom. Other allergen-free zones may be required in the cafeteria, bus, libraries, art room, etc. Promoting hand washing is another preventative measure. Children can be taught to wash their hands before and after eating in order to promote healthy choices and keep the child with allergies safe. Other preventative measures include:

- Utilize effective sanitation measures including properly washing cafeteria tables, food preparation areas and classroom areas.
- Provide an identified allergen-free table in the cafeteria which is thoroughly washed prior to the first lunch shift and in between lunch shifts.
- Promote safe practices among students such as no swapping or sharing food and no eating on buses or in common areas.
- Educate classmates to avoid endangering, isolating, stigmatizing or harassing students with food allergies.
- Identify eating pals before class goes to lunch.
- Alert parents whose children are in the same class with the food allergic student for the purpose of instructing them about contamination and allergen-free classrooms.
- Provide advance notice to parents of upcoming classroom celebrations, field trips, class trips, or any other events where food will be present, giving parents the opportunity to provide food or verify the safety of food being served to the food allergic student.
- Advise students and staff in contact with an allergen to wash their hands thoroughly before coming into contact with the allergic student.

Family Responsibilities

Parents of students with life threatening allergies must provide the school with a doctor's note including a diagnosis, the completed *Allergy Action Plan* and a current student photo. All *Allergy Action Plans* must be completed and returned to the school within 14 days of the student start date. A new *Allergy Action Plan* must be submitted annually, and should be updated immediately if any major changes occur. The principal and school nurse shall ensure that all school employees involved in the care of a student diagnosed with severe food allergies are provided with copies of the child's *Allergy Action Plan*.

- Provide the School Nurse (419-994-4101 ext 510) with all necessary documentation from the student's health care provider.
- Provide the Director of Food Services (419-994-3761) with a medical prescription from a medical provider to include the child's diagnosis and diet restrictions if a food substitution is necessary.
- In the event the school district cannot accommodate the severe food allergic student's allergy issue, the parent is responsible for providing all food for their child.
- Medications must be provided in the original container and clearly marked with the student's name. Parents will replace medications upon expiration or after use. Multiple current contact numbers should be kept on file and updated as necessary, in case of emergency.
- Notify coaches, volunteers, and supervisors in charge of before and after school activities including extra-curricular activities involving the food allergic student(s) and provide access to the proper medications.
- Accompany students with severe food allergies, multiple food allergies, or chronic diseases on field trips or out of district events. If parent not available, provide an alternate family member to oversee medical needs.
- Educate their child in self-management of their food allergy including safe and unsafe foods, strategies for avoiding exposure to unsafe

foods, symptoms of an allergic reaction, how and when to tell an adult that they may be having an allergy related problem, and how to read food labels.

- If the parent is concerned about food allergies in the classroom, the parent may provide their child's teacher with a supply of safe snacks for food related class celebrations, or other food related events, to reduce the likelihood of accidental exposure.
- Parents of students with severe food allergies or multiple food allergies may be required to provide meals or snacks for their children. If parents are uncertain about possible exposure to allergy-causing foods, they should provide meals or treats for their children.
- Parents may provide appropriate, alternative supplies for science projects, arts and craft materials, or other supplies as necessary.

School Responsibilities

Schools are public buildings and cannot be “allergen free”. These regulations and procedures are to be followed to provide a safe learning environment for students with severe food allergies. The school district cannot monitor products sold at athletic events or special student sales, products brought for potlucks or celebrations, or served on off-campus trips. Therefore, students with severe food allergies must carefully monitor their food in these situations.

- The school district will strive to instruct staff and faculty to recognize symptoms of an allergic reaction and to respond as necessary. The school district will provide anaphylaxis training to all faculty and staff. The administrator of each school and department is responsible for coordinating and executing annual training of their department staff.
- A written *Allergy Action Plan* will be established by the school nurse in conjunction with the parent, student, the student’s healthcare provider who has documented the food allergy, and school personnel to be followed in the event that an allergic student ingests, or believes he/she has ingested an offending food. The school nurse shall instruct appropriate school personnel regarding action plan. The plan will be reviewed annually and revised if changes occur.
- The principal will coordinate with the school nurse to be sure medications are appropriately stored and that an emergency kit is available that contains a physician’s standing order for epinephrine. Medications are kept in a easily accessible secure location central to designated school personnel, not locked in cupboards or drawers. Students will be allowed to carry their own epinephrine, after approval from the student’s physician/clinic, parent and school nurse, and in accordance with ORC 3313.718 (Possession and use of epinephrine auto injector to treat anaphylaxis).
- Be knowledgeable about and follow applicable federal laws including American Disabilities Act (ADA), Individuals with Disabilities Education Act (IDEA), Section 504 of the Rehabilitation Act of 1973,

and Family Educational Rights and Privacy Act (FERPA) as well as state laws and district policies.

- School personnel will follow federal/state/district laws and regulations regarding sharing medical information about the student.
- Substitute staff (teachers, bus drivers, cooks, and other necessary personnel) will be provided with substitute folders that are clearly marked identifying the food allergic student, the food allergy, along with a copy of the Allergy Action Plan needed for those students. They will sign a form acknowledging receipt of information.
- Advance notice will be given to parents of upcoming classroom celebrations, field trips, or any other events where food will be present, giving parents the opportunity to provide food or verify the safety of food being served to the food allergic student. Parents will be permitted to attend any school function to monitor their child.
- Include food-allergic students in school activities. Students should not be excluded from school activities solely based on their allergy.
- All staff will take threats or harassment against an allergic student seriously; and will report such incidents to an administrator immediately, so that appropriate disciplinary action may be taken.

Food and Nutrition Services Responsibilities

- Provide appropriate food substitutions to comply with the *Allergy Action Plan* that was agreed upon by the physician, parent and food services.
- Participate in the school's anaphylaxis training on how to recognize the symptoms of an anaphylactic attack, how to respond to life threatening allergic reactions and how to administer emergency medications.
- Provide a food allergy avoidance list for egg, milk, soy, wheat, tree nut, peanut allergies, and any other known food allergens. Train staff to identify possible food allergens on food labels.
- Provide procedures for handling food products with food allergens to reduce opportunity for cross contamination.

Transportation Services Responsibilities

- Attend training for all school bus drivers on recognizing symptoms of and responding to life-threatening allergies.
- Be knowledgeable about the child's *Allergy Action Plan* including medication location for the allergic student and review regularly.
- Maintain and enforce current law regarding no eating on school buses, with exceptions only to accommodate students with special medical needs.
- Have means of communications in an emergency.
- Inform substitutes of the allergy and the location of the *Allergy Action Plan*.

Student Responsibilities

- Students are to follow their *Allergy Action Plan*.
- Students should not trade food with others.
- Students should not eat anything with unknown ingredients or known to contain any allergen.
- Students should wash their hands before and after eating.
- Students should notify an adult immediately if they eat something they believe may contain the food to which they are allergic.



Name: _____ D.O.B.: _____

Allergy to: _____

Weight: _____ lbs.

Asthma: Yes (higher risk for a severe reaction) No

PLACE
STUDENT'S
PICTURE
HERE

For a suspected or active food allergy reaction:

FOR ANY OF THE FOLLOWING
SEVERE SYMPTOMS

If checked, give epinephrine immediately if the allergen was definitely eaten, even if there are no symptoms.



LUNG

Short of breath, wheezing, repetitive cough



HEART

Pale, blue, faint, weak pulse, dizzy



THROAT

Tight, hoarse, trouble breathing/ swallowing



MOUTH

Significant swelling of the tongue and/or lips



SKIN

Many hives over body, widespread redness



GUT

Repetitive vomiting or severe diarrhea



OTHER

Feeling something bad is about to happen, anxiety, confusion

OR A COMBINATION of mild or severe symptoms from different body areas.

NOTE: Do not depend on antihistamines or inhalers (bronchodilators) to treat a severe reaction. Use Epinephrine.

- 1. INJECT EPINEPHRINE IMMEDIATELY.**
- 2. Call 911.** Request ambulance with epinephrine.
 - Consider giving additional medications (following or with the epinephrine):
 - » Antihistamine
 - » Inhaler (bronchodilator) if asthma
 - Lay the student flat and raise legs. If breathing is difficult or they are vomiting, let them sit up or lie on their side.
 - If symptoms do not improve, or symptoms return, more doses of epinephrine can be given about 5 minutes or more after the last dose.
 - Alert emergency contacts.
 - Transport student to ER even if symptoms resolve. Student should remain in ER for 4+ hours because symptoms may return.

NOTE: WHEN IN DOUBT, GIVE EPINEPHRINE.

MILD SYMPTOMS

If checked, give epinephrine immediately for ANY symptoms if the allergen was likely eaten.



NOSE

Itchy/runny nose, sneezing



MOUTH

Itchy mouth



SKIN

A few hives, mild itch



GUT

Mild nausea/discomfort



- 1. GIVE ANTIHISTAMINES, IF ORDERED BY PHYSICIAN**
- Stay with student; alert emergency contacts.
- Watch student closely for changes. If symptoms worsen, **GIVE EPINEPHRINE.**

MEDICATIONS/DOSES

Epinephrine Brand: _____

Epinephrine Dose: 0.15 mg IM 0.3 mg IM

Antihistamine Brand or Generic: _____

Antihistamine Dose: _____

Other (e.g., inhaler-bronchodilator if asthmatic): _____

PARENT/GUARDIAN AUTHORIZATION SIGNATURE

DATE

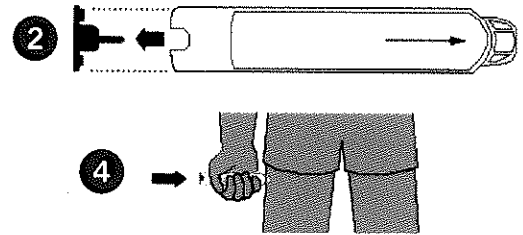
PHYSICIAN/HCP AUTHORIZATION SIGNATURE

DATE



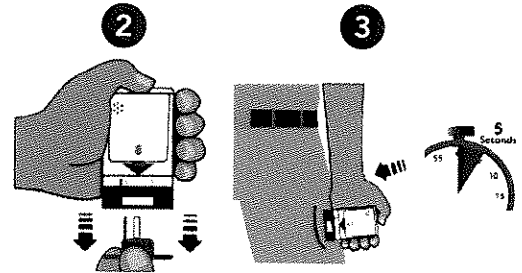
EPIPEN® (EPINEPHRINE) AUTO-INJECTOR DIRECTIONS

1. Remove the EpiPen Auto-Injector from the plastic carrying case.
2. Pull off the blue safety release cap.
3. Swing and firmly push orange tip against mid-outer thigh.
4. Hold for approximately 10 seconds.
5. Remove and massage the area for 10 seconds.



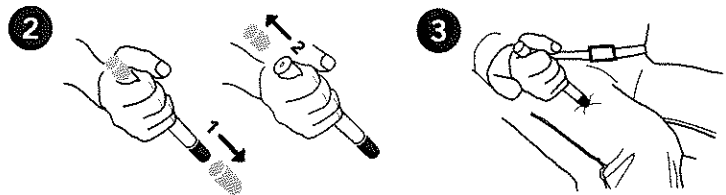
AUVI-Q™ (EPINEPHRINE INJECTION, USP) DIRECTIONS

1. Remove the outer case of Auvi-Q. This will automatically activate the voice instructions.
2. Pull off red safety guard.
3. Place black end against mid-outer thigh.
4. Press firmly and hold for 5 seconds.
5. Remove from thigh.



ADRENALICK®/ADRENALICK® GENERIC DIRECTIONS

1. Remove the outer case.
2. Remove grey caps labeled "1" and "2".
3. Place red rounded tip against mid-outer thigh.
4. Press down hard until needle penetrates.
5. Hold for 10 seconds. Remove from thigh.



OTHER DIRECTIONS/INFORMATION (may self-carry epinephrine, may self-administer epinephrine, etc.):

Treat student before calling Emergency Contacts. The first signs of a reaction can be mild, but symptoms can get worse quickly.

EMERGENCY CONTACTS — CALL 911

RESCUE SQUAD: _____

DOCTOR: _____ PHONE: _____

PARENT/GUARDIAN: _____ PHONE: _____

OTHER EMERGENCY CONTACTS

NAME/RELATIONSHIP: _____

PHONE: _____

NAME/RELATIONSHIP: _____

PHONE: _____

PARENT/GUARDIAN AUTHORIZATION SIGNATURE

DATE