ResponsiveEd Severe Food Allergy Management Plan

Purpose:
ResponsiveEd Severe Food Allergy Management Plan will enable all staff to participate and collaborate with students, family members and primary care providers to provide best practice standards for the care of students with severe food allergies. This document will be subject to change to remain current as new information is provided, treatments change and new management plans are developed. This ResponsiveEd Health Services Food Allergy Management Plan shall be reviewed on an annual basis by the Director of Health Services.

Goal:
To manage students with severe food allergies while allowing the student to participate in academic, non-academic and extracurricular school activities. Although the school cannot guarantee a food allergen-free environment, all attempts as outlined in this document will be made to allow for safety throughout the school day.

Objectives:

1. Safe Environment - To share district-wide, a set of practices, to ensure a safe learning environment for students with anaphylaxis.
2. Staff Awareness - To ensure that all staff is made aware of severe food allergies, recognize signs and symptoms in a timely manner, and respond appropriately.
3. Student Identification - To identify students with severe food allergies during the new student enrollment process in School Mint.
4. Planning Initiation - To initiate planning and awareness after identification of a student with severe food allergies: school nurse/health staffer/campus director/headmaster will initiate the process of coordinating the development of a plan by communication with parent, 504/SPED staff, CNP and the Director of Health Services (for campuses without a nurse).
5. Safe Learning Environment Planning - To ensure a safe learning environment and, in consultation with the parents and student. Possible recommendations would include a designated table in the cafeteria that would allow students to eat the allergic foods away from the student or allow the student to eat with others that are not eating the allergic food: **Although the district cannot guarantee an allergen free area, it is our goal to provide a clean and allergen safe area.** Tables will be cleaned between lunch periods with a designated solution provided by the facility staff.
6. Student Independence - To ensure independence as determined by the health care professional, parent, student and school nurse: The student may carry and self-administer epinephrine, provided that the student is able to show proper technique and maturity to carry and self-administer the medication. All parties must be in agreement, and the health care provider must sign a release allowing the student to carry and self-administer the EpiPen The student must provide the assigned EpiPen to the school.
7. Procedure Review - To provide ongoing development of the best standard practice by conducting a review of all procedures in the case that anaphylaxis occurs: A post anaphylaxis report will be made and reviewed by school nurse/health staffer/campus director/headmaster, any staff involved and the Director of Health Services. Report will be given to the state as mandated for any administration of an EpiPen. Recommendations will be made, if applicable.
8. Positive Learning Environment - To ensure a positive learning environment, free of interruption or ridicule due to severe food allergy diagnosis: Bullying issues will be addressed by the campus director/headmaster.

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Definitions:
In accordance with state guidelines, and for the purpose of these procedures, the following definitions will apply.

1. FOOD INTOLERANCE - An unpleasant reaction to a food that, unlike a food allergy, does not involve an immune system response or the release of histamine.
2. ALLERGIC REACTION - An immune-mediated reaction to a protein.
3. SEVERE FOOD ALLERGY - An allergy that might cause an anaphylactic reaction.
4. ANAPHYLACTIC REACTION - A serious allergic reaction that is rapid in onset and may cause death.
5. FOOD ALLERGY ACTION PLAN (FAAP) - A personalized emergency plan signed by a health-care provider that specifies the delivery of accommodations and services needed by a student in the event of a food allergy reaction.
6. EMERGENCY ACTION PLAN (EAP) - A personalized plan written by a Texas health-care provider that specifies the delivery of accommodations and services needed by a student with a food allergy and actions to be taken in the event of an allergic reaction.

General Campus Guidelines for the Care of Students with Severe Food Allergies

1. Identification of students with severe allergies that require use of an EpiPen:
    - Upon enrollment or as soon as possible after the diagnosis, a parent or legal guardian will provide disclosure of severe food allergy through the enrollment process. The process includes name, allergen and nature of reaction. The parent will also provide the student's emergency action plan/food allergy action plan (FAAP).
    - The school nurse/health staffer/campus director/headmaster will review the information, put an alert in skyward and upload the Food Allergy Action Plan (FAAP) into Skyward.
    - The CNP for the building is notified.
    - The United States Department of Agriculture regulations (Texas Department of Agriculture, 2011) requires substitutions or modifications in school meals for children whose disabilities restrict their diets.
    - The CNP must receive a signed statement by a licensed health care provider that identifies:
        i. The child’s disability.
        ii. An explanation of why disability restricts the child’s diet.
        iii. The major life activity affected by disability.
        iv. The food or foods to be omitted from the child’s diet and the food or choice of foods that must be substituted.

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2. Individual Health Plan development with 504 or SPED team, as deemed necessary - Development, implementation, communication and monitoring of Food Allergy Action Plan and/or Individual Health Care Plans:
    - Once a diagnosis is made by the health care provider, an action plan is made by the health care provider and parent/guardian.
    - An IHP may be developed from the Action Plan if additional instructions are needed in order to provide a daily safe learning environment.
    - Notification of all staff members who have a need to know will occur as soon as possible after diagnosis is disclosed to school.

    - A planning meeting should occur with the parent, school nurse/health staffer and any school employee who may need to participate in the student's IHP and/or Food Allergy Action Plan. It is preferable that this meeting occur prior to the first day of class. The purpose of this meeting is to provide an opportunity to clarify the measures that will occur on the campus to promote safety, minimize exposure, recognize signs and symptoms, and provide emergency treatment as outlined in the IHP and/or Food Allergy Action Plan.
    - The school may also develop a 504 plan to address the health and learning needs of a student. Students at risk for anaphylaxis may be considered to have a disability and require services and program modifications so that the student with food allergies at-risk for anaphylaxis can safely participate in the learning environment.
    - Notify the custodial staff of appropriate cleaning protocols with special attention to high-risk areas. Periodic review throughout the year may be necessary to continue to provide a safe and least restrictive learning environment.

3. Risk Reduction - Children at risk for anaphylaxis should not be excluded from classroom-based activities based on their food allergies, therefore it is important to identify areas in the school and implement strategies to limit exposure to food allergens. Reducing the risk of exposure through environmental controls which may include:

    - Limit, reduce or eliminate allergy food from the classroom or other areas.
    - Notify and educate school staff and parents of the need to limit foods as needed on campus, in the classroom or at school sponsored events.
    - Notification of identified student's food allergy and any measures for emergency care included in the teacher/nurses substitute folder.
    - Notify parents of the severe food allergy in reference to parent provided snacks and school related events/parties where food will be served.
    - If deemed appropriate by parents, school nurse/health staffer/campus director/headmaster and other involved staff, place identification of "food allergy" in high risk areas.
    - CNP with food services to review cross-contamination possibilities during food preparation and food service.
    - Educate students about not sharing food, snacks, drinks or utensils.
    - Reinforce proper hand washing techniques before and after eating using soap and water.
    - CPR First aid certified people available in cafeterias and eating areas as appropriate.
    - Epinephrine will be stored in an accessible, secure but unlocked area.

- Reinforce rules and expectations about bullying.

4. Training - Training for school staff on food allergies, anaphylaxis and emergency response:
    - Every 2 years training will be completed through CPR First Aid for all health staffers or personnel responsible for medical emergencies.
    - The general awareness training may provide an overview of food allergies and anaphylaxis, signs and symptoms of an allergic reaction, the hazards related to the use of food for instructional purposes and the importance of environmental controls in protecting the health of students at risk for food allergy related anaphylaxis.
    - Identification of students at risk for anaphylaxis, signs and symptoms of anaphylaxis, training in the administration and storage of epinephrine, emergency protocol, environmental controls and post anaphylaxis debriefing.

5. Post anaphylaxis reaction review of policy and procedures:
    - The school nurse/health staffer/campus director/headmaster in coordination with the parent and involved campus employees will review each severe allergy plan and any incident.
    - Identification of the allergen exposure and take steps to prevent in future.
    - Review updated information that may be received from the health care professional.
    - Identify and interview those who may have been involved with any anaphylaxis incident.
    - Provide information to parents of other classroom students that comply with FERPA law and do not identify the individual student.
    - Report any incident to the Director of Health Services. They are required to report and use an EpiPen in school to the State Department of Health.
    - If the allergic reaction is thought to be from the food provided by the school, work with the CNP to ascertain what potential food item served, how to reduce risk in the cafeteria by reviewing food labels, minimizing cross contamination and other strategies.
    - Review Allergy Action Plan, IHP and/or 504/IEP Plan and amend to address any changes that are needed at minimum annually.
    - If epinephrine auto-injector was utilized during the reaction, ensure that the parent/guardian replaces it with a new one.
    - In the rare instance that a fatal reaction occurred, the school's crisis plan for dealing with the death of a student should be implemented.