

Food Allergy Management Plan

Training

The District will provide specialized training to employees who are responsible for the development, implementation, and monitoring of the FAMP. In addition, the District will provide general food allergy awareness training addressing:

1. The FAMP and applicable District policies and procedures;
2. General strategies to reduce the risk of exposure to common food allergens;
3. Signs and symptoms of food allergies;
4. Emergency response in the event of an anaphylactic reaction at school or at a school-related activity; and
5. Bullying awareness and response.

Environmental Controls

The District's general procedures to reduce the risk of exposure to common food allergens will include:

1. Limiting, reducing, and/or eliminating food from classroom(s) and other learning environments used by students diagnosed with food allergies who are at risk for anaphylaxis.
2. Implementing appropriate cleaning protocols in the school, with special attention to identified high-risk areas.
3. Educating students about not trading or sharing food, snacks, drinks, or utensils.
4. Implementing hand washing protocols that emphasize the use of soap and water before and after meals.
5. Assigning staff members who are trained in the administration of epinephrine auto-injectors as monitors in the food service area, as appropriate.

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6. Implementing appropriate risk reduction strategies for high-risk areas in the school, including, but not limited to, the cafeteria, classroom(s), and common areas; the school bus; extracurricular activities; field trips; school-sponsored activities; and before- and after-school activities.

Information Requests

The District will use the Emergency Information Card for requesting specific allergy information from the parent of a student with a diagnosed food allergy. When a student is identified as having a severe food allergy, the school nurse will request that the parent provide the following documents completed by a physician or other licensed health-care provider:

1. The FAAP and EAP.
2. If the parent is requesting meal substitutions or modifications, the Statement Regarding Meal Substitutions or Modifications.
3. The Authorization for Self-Administration of Asthma and/or Anaphylaxis Medication form, if applicable
4. The Request for the Administration of Medication at School form, if applicable.
5. Additional information regarding the signs and symptoms of an anaphylactic reaction that the student might experience.
6. The campus nurse will use documents completed by the physician or other licensed health-care provider to develop an IHP for the student, if necessary.

Post Identification

The nurse will meet with the student and parent to review the documentation and to develop:

1. Specific strategies to reduce the student's risk of exposure to the diagnosed allergen

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2. Procedures related to the student's self-administration of his or her prescribed epinephrine auto-injector, if applicable;
3. Procedures for when the student is not able to self-administer anaphylaxis medication; and
4. Emergency procedures that will be implemented in the event of an anaphylactic reaction at school or at a school-related activity.
5. As necessary and in compliance with the Family Educational Rights and Privacy Act (FERPA) and District policy notification will be provided to staff, classmates, parents, volunteers, and substitutes of a student with a diagnosed severe food allergy and the nurse will provide training addressing:
 - General and specific strategies to reduce the student's risk of exposure to the diagnosed allergen;
 - Signs and symptoms of the food allergy; and
 - Emergency response in the event of the student's anaphylactic reaction at school or at a school-related activity.

Special Services

Upon receipt of the identification information above, a student with a disability who is thought to be in need of special education and related services will be referred for formal evaluation in accordance with law.

A Section 504 committee will convene to determine if accommodations, including substitutions and other school support services, are necessary for the student to receive a free appropriate public education (FAPE) under Section 504 of the Rehabilitation Act. If the committee determines that the student needs these accommodations to participate

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successfully and safely in the learning environment, the committee will develop a Section 504 plan. [Also see FB]

To the extent the use of epinephrine for a food allergy is not a required service or support addressed in a student's Section 504 plan or individualized education program (IEP), a FAAP, EAP, or IHP does not constitute a service or accommodation under Section 504 or the Individuals with Disabilities Education Act (IDEA).

After a Reaction

After a student's anaphylactic reaction at school or at a school-related activity, the nurse should submit an incident report to the superintendent or designee identifying:

1. If known, the source of allergen exposure;
2. Emergency action taken, including whether an epinephrine auto-injector was used and whether the student or a staff member administered the epinephrine; and
3. Any recommended changes to procedures.

After a student's anaphylactic reaction, the District food allergy coordinator will:

1. Provide to parents of other classroom students factual information that complies with FERPA and District policy and does not identify the individual student.
2. If the allergic reaction is thought to be from food provided by the school food service, work with the school food service department to ascertain what potential food item was served/consumed and how to reduce risk in the cafeteria by reviewing food labels, minimizing cross-contamination, and other strategies.

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3. Review the student's Food Allergy Action and Emergency Action Plan, and Individualized Health Care Plan as applicable, and any other elements of the care plan to address any changes needed or made by the student's health-care provider.
4. If an epinephrine auto-injector was used during the reaction, ensure that the parent/guardian replaces it with a new one.

Review

Individual care plans and procedures will be reviewed periodically and after a student's anaphylactic reaction at school or at a school-related activity.

The Food Allergy Management Plan and related District policies will be reviewed at least annually.