GUIDELINES FOR THE MANAGEMENT OF STUDENTS WITH SEVERE FOOD ALLERGIES

DEFINITION AND BACKGROUND

Students with severe, sometimes life threatening, food allergies attend Howard County Public Schools. Two to five percent of the student population may be affected. Foods that most commonly cause anaphylaxis, a life threatening allergic reaction, are peanuts, tree nuts, shellfish, milk, wheat, soy, and eggs. These severe allergic reactions can occur within minutes of ingestion or a reaction can be delayed for up to two hours. Some reactions are “biphasic” in nature with an initial period of symptoms, a symptom free period of 2-3 hours followed by severe shock-like symptoms. At present there is no cure for food allergies and strict avoidance is the key to preventing reactions. Once accidental exposure occurs, prompt administration of emergency epinephrine (EpiPen) is critical in the management of the reaction. Accidental exposure may occur by eating the food, inhalation of food vapors, or contact with the skin, mouth or eyes.

Goal two of the Howard County Public School System is to provide a safe and nurturing school environment for students. It is important that staff and parents work in collaboration to address the nurturing and safety needs of students with a severe food allergy. Some students with food allergies may be protected under Section 504 of the Rehabilitation Act of 1973. Food products containing allergens are prevalent in the school setting, in the classroom as well as in the cafeteria. Some individuals are highly sensitive to contact with even trace amounts of the offending food. Peanuts, in particular, are a common allergen and are often a hidden ingredient in foods.

POSSIBLE OBSERVATIONS / SYMPTOMS OF ANAPHYLAXIS

- Hives
- Swelling of lips, face, throat
- Abdominal pain
- Sense of impending doom
- Drop in blood pressure
- Wheezing
- Coughing
- Vomiting
- Shortness of breath
- Collapse

GOALS

- To assure staff awareness of students with severe food allergy in the school
- To assure staff awareness of the seriousness of food allergy
- To minimize the potential for exposure of food allergic students to the food allergen
- To assure staff awareness of the signs and symptoms of a severe allergic reaction
- To provide prompt and effective intervention in the event of an allergic reaction
- To minimize the adverse educational effects of food allergy on the affected students and their classmates

GUIDELINES

HCPSS/OSS/HS food allergy guidelines/dph/7/09
HOWARD COUNTY PUBLIC SCHOOLS RESPONSIBILITIES

• The Howard County Public School System (HCPSS) will support the efforts of individual schools and parents to provide a safe and nurturing educational environment for the student with a severe food allergy.
• Eating in the classroom should be avoided. However, the HCPSS must recognize the rights of students with diabetes and certain other health conditions. These students may need to eat during class and should not be required to leave the classroom. Parents of students who need to snack in the classroom should be encouraged by school staff to provide foods that do not pose a potential risk for food allergic students in the same classroom. Additionally, the HCPSS recognizes scheduling concerns including numerous lunch shifts and the need to provide snack in the classroom for students on late lunch shifts, returning from field trips, and other school sponsored trips.
• Schools should allow the storage of an EpiPen in a safe location in the classroom and other student areas, as appropriate, to facilitate prompt access if needed. At least one EpiPen must be stored in the health room.
• The HCPSS will provide training for teachers, assistants, or others in the school building in the recognition of a severe allergic reaction, the use of the EpiPen, and proper follow-up emergency procedures when a student with a recognized life-threatening allergy is enrolled in the school.
• School staff should avoid the use of foods in curricular activities if possible. For example, the use of food is integral to the Family and Consumer Science and Academic Life Skills (ALS) curriculum.
• Schools are encouraged to consider student allergies when planning incentive and promotional activities.
• Schools are encouraged to develop alternatives to the use of food for celebrations or as rewards.
• Maryland Law, Education Article § 7-426, requires schools to designate a table in the cafeteria as peanut and tree-nut free. For a student with a physician-documented anaphylactic allergy (e.g., physician’s order for EpiPen) to peanuts or tree nuts, or a physician-documented anaphylactic allergy to another food, provisions for an allergen-free table will be made on a case-by-case basis, based on student need, physician-input, and parent request.
• For the student with a physician-documented anaphylactic allergy, and the parent has not provided auto-injector epinephrine at school, at the first report of ingestion/or first experience of symptom(s), 911 will be activated.

PARENTAL RESPONSIBILITIES

• Parents of students with severe food allergy are expected to notify the school administration and health room staff each year of the student’s allergy. This is to be done in writing prior to the beginning of each school year.
• Parents of students with severe food allergies must provide at least one EpiPen or similar automatic injection device with medication in the appropriate dose along with a complete physician’s order to the school each year prior to the student attending. School medication orders must be renewed each year by the physician, nurse practitioner, or physician assistant.
and the order must be signed on or after July 1. If students are to carry the EpiPen with them, the physician’s order must state this requirement.

- Parents must sign permission for school personnel to administer any form of medication including EpiPen.
- Parents will reinforce safe and healthy eating habits with the student.
- Parents will assess risk factors for any trip outside the school building and discuss these factors with their child and with staff.
- Parents are encouraged to meet with the student’s teachers, the health assistant or school nurse, and the cluster nurse to discuss the student’s special needs. This meeting should take place at the end of the school year for the next year, but may take place before students return in the fall. Parents should take the initiative to set up these meetings.
- Parents are expected to provide their food allergic children with an appropriate Medic Alert bracelet or necklace indicating their allergy.
- Parents are expected to assure that their child knows how to self-administer the EpiPen when age and developmentally appropriate.
- Parents are expected to educate their child in self management of their food allergy including:
  - The early signs of anaphylaxis
  - How and when to tell an adult that they may be having a reaction
  - Strategies for avoidance of exposure to the offending food products
  - Safe and unsafe foods for that child
  - The risks of unauthorized food sharing
  - The need for good hand washing when handling foods
  - The need to report teasing by other children to parents and school staff.
- Parents are encouraged to provide the school with safe snacks for their child in the event of school parties or special events involving food.
- Parents must recognize that risk of accidental exposure to foods can be reduced, in the school setting, but not eliminated.
- Parents will assure that current emergency procedure cards are completed with alternate telephone numbers and alternate emergency contacts listed.
- Parents will notify the school administrator and health and teaching staff of changes in their child’s needs during the school year.
- Parents will review any ingredients lists provided by school staff.

**HEALTH SERVICES RESPONSIBILITIES (HEALTH ASSISTANT, SCHOOL NURSE, CLUSTER NURSE, HEALTH SERVICES SPECIALISTS and COORDINATOR)**

- School nurses/cluster nurses and health assistants will review records and emergency cards each year to identify students who have food allergies. A determination of the seriousness of the allergy for that student should then be made by the health assistant/school nurse/cluster nurse to identify students who are at risk for severe life threatening reactions.
- School nurses/cluster nurses and health assistants will document the allergy on the Individual Health Problems Record form in the student record and on the Health Problems List/Special Health Needs List in the substitute folder.
- School nurses/cluster nurses in collaboration with the parent, classroom teacher(s), and school administrator/designee will develop an individual health care plan for the student
which outlines the student’s needs and the specific interventions appropriate to meet those needs. This plan should address classroom modifications, lunchroom modifications, possible transportation issues, and an emergency plan.

- **School nurses/cluster nurses, in the development of the individual health care plan, may discuss the need and benefits of the allergen-free table with the parent, considering the following:**
  - While most students do not experience severe reactions with skin-only contact with their allergen, some students need more protection in the cafeteria. An allergen-free table should be considered when:
    - The student experiences severe, frequent and/or disruptive symptoms after skin exposure to their allergen
    - There is concern that other students’ food may be ingested
    - The student experiences symptoms from inhalation of food odors/dust (e.g., peanut shells), etc.
    - The parent makes a request
  - To prevent social isolation, the student with the food allergy should invite a friend to sit at this table who is eating a lunch that has been screened to be free of peanuts and tree nuts.

- School nurses/cluster nurses, in collaboration with health assistants, the parent and the school administrator/designee, will determine which school staff members should be informed of the student’s allergy and the level of information and training that should be provided. At a minimum, the classroom teacher and bus driver should receive written information from health services staff on the signs and symptoms of a severe allergic reaction and the appropriate first aid response to be taken for that student.

- School nurses, cluster nurses, and health assistants will be competent to administer the EpiPen.

- School nurses/cluster nurses will train at least two other appropriate school staff in the use of the EpiPen. Included in this training may be teachers, instructional assistants, school administrators, front office personnel, and others as indicated. School nurses/cluster nurses will provide training for bus drivers and bus aides for those students who have an EpiPen order form on file in the health room that specifically states student must carry an EpiPen.

- School nurses/cluster nurses and health assistants will carry out all related routine health services procedures as directed in the health services manual.

- School nurses/cluster nurses and health assistants will assure that current emergency procedure cards are completed with alternate telephone numbers and alternate emergency contacts listed.

- School health services staff will promote food allergy awareness when a food allergic student is enrolled in the school.

**STUDENT RESPONSIBILITIES**

- Students will become informed about symptoms of food allergic reactions.
- Students will practice age appropriate behavior regarding health and safety.
- Students should wear an appropriate Medic Alert bracelet or necklace indicating their allergy at all times while in school.
• Students will inform the school administrator, teacher, counselor, school nurse/cluster nurse/health assistant or other responsible adult if they are being harassed or bullied about their allergies.

SCHOOL ADMINISTRATOR RESPONSIBILITIES

• School administrators, in collaboration with the school nurse/cluster nurse or health assistant will identify teachers and other school staff who will be trained in the use of an EpiPen.
• School administrators should request parents of other students in a life threatening food allergic student’s class to avoid bringing foods to school that contain certain offending foods. In addition, school administrators should encourage parents to use alternate non-food treats when a food allergic student is in the class. The assistance of the school PTA should be sought to support this practice.
• School administrators will enforce the “no-eating” policy in areas that are normally off limits to eating (e.g. computer labs, media center, etc.)
• School administrators will assure that students will receive instruction on proper handwashing. **School administrators will designate an allergen-free table in the cafeteria, as needed.**
• School administrators will identify appropriate areas within the school where special events involving food may be held.
• School administrators will direct staff to carefully clean table surfaces and any other areas that may have food residues after activities involving food to reduce the potential for accidental exposure.
• School administrators will assist students and staff to provide a safe and nurturing environment for the life threatening food allergic child by promoting understanding and acceptance of the student and his or her allergic condition.
• School administrators will monitor classroom activities to avoid those activities that may involve the use of certain foods in the presence of a life threatening food allergic child. For example, do not use peanuts for counting activities or craft activities (e.g. bird feeders).
• School administrators will develop a plan that includes strategies to address possible bullying or teasing of the food allergic student.
• School administrators are responsible for assuring that substitutes are notified of students with severe food allergies.

TEACHER RESPONSIBILITIES

• Teachers of a student with severe food allergies will know the signs and symptoms of severe allergic reaction as provided in the student’s individual health care plan, and be aware of and implement the emergency plan if a reaction is suspected.
• Teachers will assist students in the same classroom(s) as a student with food allergies to understand the nature and seriousness of severe food allergy.
• Teachers will develop a plan for notification of substitutes about a student with a severe food allergy.
• Teachers will review planned classroom activities and omit those activities that involve the use of certain food products, if known, in the presence of a life threatening food allergic
student in the class. The activity may be used if it can be modified to use an alternative to the life threatening food products.

- Teachers should request parents of other students in a life threatening food allergic student’s class to avoid foods for a class treat containing certain food products and to provide an ingredients list for any food sent in for a class treat. Staff will notify parents of occasions when class treats will be shared and share any ingredient list with the parent for their review. Parents of life threatening food allergic students will review this list. If no list is provided, the product is not to be shared with the student’s class. In addition, teachers should encourage the use of alternate non-food treats when a food allergic student is in the class. The assistance of the school PTA should be sought to support this practice.

- Teachers will assure that any classroom surface that has been exposed to food be thoroughly cleaned by an adult at the conclusion of the activity. This is to prevent possible cross contamination of educational materials.

- Teachers will provide students the opportunity to wash their hands after every classroom activity involving food.

- Teachers will notify parents and health services staff in advance of parties, field trips, or other special events so that appropriate plans for the student’s safety may be made.

- Teachers will respond immediately and appropriately to reports of students being teased or bullied about their allergies.

**FOOD SERVICES RESPONSIBILITIES**

- Food Services personnel will, upon request, make available to parents within three days, the manufacturers ingredients list of foods served in the cafeteria. However, ingredients lists may not be available for all foods served. Manufacturers may change ingredients included in foods without notice.

- Food Services personnel will, upon request, make available to parents the planned menus for the month.

- Food Services personnel will clearly identify snack foods of which they are aware contain peanut products. This applies where there is a peanut allergic student in the school.

- Food Services personnel will assist with the implementation of individual 504 plans for food allergies when appropriate.

**TRANSPORTATION SERVICES RESPONSIBILITIES**

- Bus drivers will be notified of a student with severe food allergy on their bus by school health services personnel or by transportation personnel.

- Bus drivers will assure that students are aware of the “no eating on the bus” rule.

- Bus drivers will notify their supervisor if students violate the “no eating on the bus” rule.

- Bus drivers of a student with a severe life threatening food allergy will know the signs and symptoms of a severe allergic reaction and understand how to respond to a medical emergency.

- Bus drivers will respond to an allergic reaction in accordance with the individual transportation emergency plan developed for the child.

**RESOURCES FOR SCHOOLS**
The AAFA Maryland-Greater Washington DC Chapter can provide training for school nurses and packages for individual schools that are assembled for school’s needs. Contents can include: Book: Taming Asthma and Allergy by Controlling your environment: A Guide for Patients by Dr. Robert A. Wood M.D., lung posters, peak flow meters, spacers, nebulizer tubing, and various information sheets.

The comprehensive, multimedia program includes a video, an EpiPen trainer, a poster, and a binder filled with more than 100 pages of information and standardized forms. To nominate individual schools go to the website http://www.foodallergy.org/programform.html and complete the form.

The American Lung Association has two programs for schools: Friendly Schools Initiative and the award-winning Open Airways for Schools.