

Warroad Public Schools

Allergy/Anaphylaxis Management Guidelines

Background

Food allergies are on the rise. According to data included in CDC's guidelines, nearly 1 in 5 students (16-18 percent of children) with food allergies has had a reaction at school. And 25 percent of severe reactions experienced at school are among children having no previous diagnosis of food allergy.

The number of students with life-threatening allergies attending school has increased significantly. Peanut allergy incidence among children has doubled from 1997 to 2002 (Sicherer, Furlong, DeSimone & Sampson, 2003) and peanuts are one of eight foods commonly responsible for 90% of the food allergies that cause a severe reaction termed anaphylaxis. The other foods that many cause a potentially fatal reaction include, but are not limited to milk, eggs, fish, shellfish, wheat, soy and tree nuts. Other triggers for anaphylaxis may include medication, latex, insect stings and idiopathic causes. The challenge for schools is to provide a safe environment for student learning. This is becoming increasingly difficult to manage with the rising number of students with anaphylaxis, estimated at two million or 8% (Sampson, 2014) of the student population and the need to have a comprehensive plan to keep each of the students safe.

As defined in 2004 by the Food Allergy and Anaphylaxis Network (FAAN) and the National Institute of Health (NIH), anaphylaxis is "a serious reaction that is rapid in onset and may cause death." True allergies result from the reaction of an allergen to the immune system. Anaphylaxis is a potentially fatal reaction that can occur spontaneously and can affect multiple body systems. This systemic response may be characterized by respiratory distress, drop in blood pressure, loss of consciousness and potential death. Fatalities associated with anaphylaxis have been associated with reactions that occur with greater frequency away from home. Causes include: symptoms that are not recognized as an allergic reaction, failure to follow the established emergency plan, and the absence of or delay in the use of epinephrine to treat a reaction. (American Academy of Allergy, Asthma and Immunology, AAAI, 2006).

Education and planning are foundational in establishing and maintaining a safe school environment for students. School employees that are in direct contact and responsible for students must understand the dangers of an allergic reaction. Prevention of exposure to an identified allergen involves coordination and cooperation of school staff which should include parents, student, Licensed School Nurse, health paraprofessional and appropriate school personnel. Early recognition of anaphylaxis and early intervention are vital to survival.

The Warroad School District will formulate comprehensive guidelines to aid in the creation of health plans for students with life-threatening allergies. The Licensed School Nurse will develop and implement the Emergency Care Plan and coordinate a team approach to manage students with severe allergic reactions.

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Allergy/Anaphylaxis Management Guidelines

Parent/Guardian's Responsibility

- Prior to the start of the school year, notifies School Nurse of the child's allergies.
- Works with the school's team to develop a plan that accommodates the child's need during the school day.
- Provides written documentation by submitting the Anaphylaxis Questionnaire and the Anaphylaxis Action Plan (AAP) before the start of the school year. The AAP must include medical providers orders.
- Provides properly labeled medication (Epinephrine and/or antihistamine) and replaces medication when expired. The student's medical provider must renew medication orders each year.
- Notifies School Nurse of reactions that occur outside of the school day or changes in their child's needs during the school year.
- Educates child in the self-management of their food allergy including:
 - Symptoms of an allergic reaction
 - How and when to tell an adult they may be having an allergic reaction
 - Which are safe and unsafe foods
 - Strategies of avoiding exposure to unsafe foods
 - The risks of unauthorized food sharing
 - The need for good hand washing when handling food
 - How to read food labels

The above skills will be taught age appropriately
- Provides supply of safe snacks for allergic student, if needed
- Contacts Food Service to determine whether their child can eat food items listed on the school menu.
- Accommodations will be made for students, but the District cannot guarantee that incidental exposure will not occur. Parents will need to decide whether their child can safely eat the school lunch.

Warroad Public Schools Responsibilities

- Supports efforts of school and parents to provide a safe learning environment for students with severe allergies.
- Will request an Anaphylaxis Action Plan and implement this plan for students with medical provider documented allergic reactions and medication orders.
- Schedules a Section 504 meeting to consider evaluation of student when it is determined that the student may be eligible for Section 504 services.
- Identifies a core team that may consist of, but is not limited to, Licensed School Nurse, teacher(s), principal, and food service staff to work with the parents and the student to establish a prevention plan.

- Provides annual anaphylaxis training on prevention strategies, recognizing symptoms of a severe allergic reaction, epinephrine administration, and proper follow-up procedures. This training will be provided to all school staff.
- Schools will store epinephrine in a safe and unlocked area in the Health Office. Additional epinephrine may be kept in the classroom or other areas as needed. Student may carry their own epinephrine, if approved by medical provider, parent and Licensed School Nurse in accordance with Minnesota State Law 121A.2205.
- Provides student's Anaphylaxis Action Plan to all school staff that work directly with the student.
- Takes threats or harassment against an allergic student seriously.

Staff Responsibilities

Licensed School Nurse (LSN)

- The LSN is responsible for developing, reviewing, and implementing Warroad Public Schools' Anaphylaxis Management Guideline's, Anaphylaxis Action Plan, and Anaphylaxis Questionnaire.
- Consults and meets with parents as needed or requested.
- Creates a list of students with anaphylaxis and updates it as needed. Sends out this list the first week of school to appropriate building staff, teachers, specialists, and food service staff.
- Provides and documents training to staff who work directly with the students, who have life-threatening allergies, on prevention strategies, importance of immediate treatment, the symptoms of anaphylaxis, the administration of epinephrine.
- Provides training to other staff on an as need basis as determined by the Section 504 team, LSN, and/or parent.
- When students with life-threatening allergies go on field trips, sends epinephrine and Anaphylaxis Action Plan with the teacher. Reviews the procedure for administration of epinephrine with the teacher before the trip.
- Will display the Allergy/Anaphylaxis Management Guidelines on the school website along with a list of acceptable peanut/nut-free snacks.

Licensed School Nurse or other Health Staff

- Identifies the student with a severe allergy in the health alert section of Synergy.
- Sends home an Allergy/Anaphylaxis packet for parents to complete as soon as they become aware of a student with a severe allergy.
- At the end of the school year, sends out new Allergy/Anaphylaxis documents for the next school year, to all parents whose students have plans in the current year.

- Stores epinephrine, other allergy medications, and Anaphylaxis Action Plans in a container clearly labeled in an unlocked area in each health office. The outside of the cabinet is clearly labeled “Emergency Allergy Medications.”
- Checks all allergy medications for expiration dates when these are received in the health office and notifies parents when medications are near expiration dates.

Teacher

- Must be aware of the Anaphylaxis Action Plan and/or Section 504 Plans for students and keeps a copy of these readily available in the substitute teacher folder.
- Receives education regarding the student’s life-threatening allergy, avoidance strategies, symptoms of a reaction, and emergency response. Has training and demonstrates competency in the use of injectable epinephrine.
- If the parent provides an epinephrine to be kept in the classroom, this medication must be accessible and carried along for all evacuations, field trips, etc.
- Informs all substitutes, paraprofessionals, parent volunteers, or others who may assist in the classroom of students who have allergic reactions.
- At the preschool and elementary level, the teacher will send home letters regarding a student’s allergies and request that parents of other students avoid sending foods with known allergens. (This letter will be provided by the Licensed School Nurse)
- Reviews lesson plans and projects and modifies to accommodate the student with allergies.
- Instructs elementary children on proper hand washing and provides time for them to wash their hands before and after eating.
- Contacts the parents of each student with an allergy or refers to the acceptable food list provided by the parent, before providing any food item. If uncertain, uses snacks that are provided by the parent for the student with allergies.
- Instructs all students in the class that sharing or trading of food or drink is not allowed.
- If there is no epinephrine in the classroom and a reaction is suspected, assures that an adult quickly escorts the student with the allergy to the health office, sends an adult to the health office to get the epinephrine, and/or contacts the school nurse to come to the classroom with the epinephrine.

Teacher Substitute

- Checks substitute folder for any Anaphylaxis Action Plans or 504 documents. If unfamiliar with the plan or has not had previous instruction, will go to the health office where the licensed school nurse or designee will instruct him/her on all aspects of the plan.
- Complies with all other responsibilities as described in previous Teacher section.

Food Service Staff

- If requested, provides parents of student with an allergy, an ingredient list for foods served in the cafeteria.
- Provides teachers who have students with allergies and other staff members involved with those students with monthly menus indicating which foods to avoid depending on allergens.
- Receives training on avoidance of cross-contamination when preparing and serving foods.
- Receives a list from the Licensed School Nurse of students with known food allergies. This list will include the known allergens and the grade (elementary teacher) the student is in. This list should be available to all kitchen staff.

Lunchroom Staff

- Designates and clearly labels a peanut/nut free table. Although it is recognized that there are other foods that students may be allergic to, peanuts are the most common food trigger for anaphylaxis and it is for this reason that the peanut/nut free table is advised.
- Instructs students that they cannot sit at the peanut/nut free table if their lunches contain peanuts or nuts. At the elementary level, staff will check lunches for obvious peanut/nut products if a student without allergies sits at the peanut/nut free table.
- Cleans the peanut/nut free table with hot soapy water or approved spray, using a separate bucket and cloth after each lunch period.
- Lunchroom staff will receive training regarding life-threatening allergies and symptoms of a reaction.

Custodial Staff

- Cleans the peanut/nut free lunchroom or classroom tables separately using hot soapy water or an approved spray, if these tables are used by others after school hours.

Transportation Staff

- The Licensed School Nurse will provide anaphylaxis training on prevention strategies, recognizing symptoms of a severe allergic reaction, epinephrine administration, and proper follow-up procedures to all bus drivers. The LSN will notify the bus driver if a student will be carrying his/her epinephrine emergency medication with them.
- The Licensed School Nurse will provide individual student's Anaphylaxis Action Plans to Transportation Coordinator and/or individual bus drivers.
- Drivers will enforce the district's "no eating" policy on the bus. This policy does not exclude food for those students who have a medical condition, such as diabetes, that requires them to have food available.
- In the event of a serious allergic reaction, the bus driver will pull the bus over, call 911 and follow the Anaphylaxis Action Plan. The bus driver will remain close to the student until EMS arrives.

The Accommodation Process for Students with Severe Food Allergies

- Students who have a documented food allergy may or may not require accommodations under Section 504.
- Any school staff that receives notification from a parent or medical provider that a child has a food allergy must report this directly to the Licensed School Nurse (LSN). This communication is time sensitive and needs to take place as soon as the information is received or as soon as appropriately possible.
- The LSN will partner with the parent of the student and the student's medical provider to determine the significance of the food allergy. If it is determined the food allergy requires food service and/or classroom accommodations, a Section 504 evaluation meeting will be held. The steps outlined in the District's Section 504 Procedures will be followed.
- The Section 504 evaluation meeting will determine whether the student is eligible for accommodations under Section 504. If eligible for accommodations, these can be discussed and a Section 504 plan for the student can be written at this meeting.

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