GUIDELINES FOR MANAGING LIFE THREATENING FOOD ALLERGIES IN SCHOOLS
# TABLE OF CONTENTS

Introduction and History ...........................................................................................................Page 1

Allergy Overview ....................................................................................................................Page 1

Key Management Concepts ......................................................................................................Page 2
  - Awareness, Prevention and Emergency Response ...............................................................Page 2

Procedural Guidelines .............................................................................................................Page 3

Awareness (Education) ............................................................................................................Page 3
  - Communication
  - Training and Education
  - Hand Washing

Prevention ....................................................................................................................................Page 4
  - Enrollment
  - After-School Activities
  - Classroom Management
  - Lunch Room
  - Playground

Emergency Response ................................................................................................................Page 5
  - Emergency Action Plan (EAP) Management
  - Medication Management
  - Field Trip Check List

Monitoring District Plans ......................................................................................................Page 5

Roles and Responsibilities ......................................................................................................Page 5
  - Family Responsibility ........................................................................................................Page 6
  - Student Responsibility ........................................................................................................Page 6
  - Principal’s Responsibility ....................................................................................................Page 7
  - Office Staff’s Responsibility ...............................................................................................Page 7
  - Nurse’s Responsibility .........................................................................................................Page 7
  - Teacher’s Responsibility .......................................................................................................Page 8
  - Nutrition Services’ Responsibility ......................................................................................Page 8
  - SNAP Computer Operator’s Responsibility .........................................................................Page 8

Appendices ...............................................................................................................................Page 9

Frequently Asked Questions ..................................................................................................Page 9

Resources ..................................................................................................................................Page 11
INTRODUCTION AND HISTORY

Food allergy is a growing concern in the United States and creates a challenge for our schools. Approximately 6 percent of school-aged children have a significant food allergy and may be at risk for anaphylaxis, a potentially life-threatening allergic reaction. Currently, there are no medications that cure food allergy. Therefore, strict avoidance of the food allergen is the only way to prevent allergic reactions. Deaths have occurred in schools because of delays in recognizing symptoms and not responding promptly or effectively. Plans that focus on food allergy education, awareness, avoidance and immediate treatment of allergic reactions are critical to saving lives.

The Spokane Public Schools tragically lost Nathan Walters, a 3rd grade student at Logan Elementary, on May 18th, 2001, after he ate a peanut butter cookie while on a field trip. These guidelines and list of responsibilities is the product of the Food Allergy Task Force that was established to review the district’s allergy procedures. Rick Walters, Nathan’s father, had a vision to maximize the safety and learning opportunities in schools for all students with life threatening allergies.

ALLERGY OVERVIEW

Food allergy is an exaggerated response by the immune system to a food that the body mistakenly identifies as being harmful. Once the immune system decides that a particular food is harmful, it produces specific antibodies to that particular food. The next time the individual eats that food, the immune system releases moderate to massive amounts of chemicals, including histamine, to protect the body. These chemicals trigger a cascade of allergic symptoms that can affect the respiratory system, gastrointestinal tract, skin and cardiovascular system.

In some people symptoms appear in only one body system, while in others symptoms appear in several systems. These symptoms can range from mild to severe and may be life-threatening depending on the individual and type of exposure.

Scientists estimate that approximately 11 million Americans suffer from potentially life-threatening food allergies. Of these 11 million, 2 million are school-aged children. At the present time, there is no cure for food allergy and avoidance is the only way to prevent an allergic reaction.

Although an individual can have a life-threatening allergic reaction to any food, including fruits, vegetables, and meats, over 90 percent of allergic reactions are caused by the following eight foods:

Peanut; Tree nut; Milk; Egg; Fish; Shellfish; Soy; Wheat

Although eight foods are responsible for the most reactions, it is important to remember that ANY food can cause a serious allergic reaction.

Most, but not all, childhood allergies to milk, egg, soy and wheat, are outgrown by age 5. Peanut and tree nuts typically cause the most severe allergic reactions, and approximately 90 percent of fatal and near-fatal reactions are due to these foods. Allergies to peanut, tree nuts, fish and shellfish are often considered to be life-long.

Ingestion of the food allergen is the principal route of exposure that leads to allergic reactions. For sensitized individuals, ingestion of even very minute amounts of foods can, in certain instances, result in fatal reactions without rapid intervention. While, it is also possible for a child to have an allergic reaction to tactile (touch) exposure or inhalation exposure, research has shown that they are extremely unlikely to result in severe or life-threatening reactions. Nevertheless, if children with life-threatening food allergies touch the allergens and then put their fingers to their eyes, nose or mouth, the exposure becomes an
ingestion and may cause anaphylaxis. The quantity of food necessary to trigger an allergic reaction may depend upon multiple variables. Each individual’s level of sensitivity may fluctuate over time.


KEY MANAGEMENT CONCEPTS

Awareness, Prevention, and Emergency Response:
The focus of this management plan is Awareness (education), Prevention, and Emergency Response. By working together, parents, students, medical professionals, school district team members, and community partners can create a safe and nurturing environment for all of our students, including those with life-threatening allergies.

Awareness (Education) means that students, staff, and the community become more aware of the impact of life threatening allergies and a better understanding of its impact and implication to students and families who have to live with this condition. It also means that key school team members know who in Their school community has a life-threatening allergy. Education is the key to awareness.

Prevention addresses the need to limit or avoid possible exposure of students with life threatening allergies to their allergen. The school district has reviewed and will continue to update key procedures and forms that help protect students. One of the key ways to help prevent allergy problems in school is for the parent to ensure that all the necessary health information and forms are updated each year. A law is now in place (RCW 28A.210) that requires each family to provide the school a completed Emergency Action Plan along with required medication and a completed medication request form before their child with a life-threatening allergy can attend school.

Another key to prevention is for the family to provide meals and snack items from home. Local allergists recommend this, and foods provided from home offer the safest option for students with life-threatening allergies.

Emergency Response: Unfortunately, total avoidance is simply not possible because many of the offending substances are so widespread or hidden in our daily environment. That is why Emergency Response (being prepared and ready) is so important. Each child with a life-threatening allergy will have an Emergency Action Plan in place. Immediate medical treatment is critical to saving a life. Call 911, and follow the plan.

Remember:

• **You are never alone.** It takes a team to ensure the best for our students. Help is usually a phone call away.

• **Food bans do not work** because they create a false sense of security. Today, processed foods contain trace amounts of food items that are not always identified on the food label. That is why we do not use the term peanut or allergen free. The best plan is to educate our school community about the issues that face students with life threatening allergies.

• **Special events/Non-routine days.** The greatest risk for a life threatening allergic reaction exists when the normal routine is broken. Examples are classroom parties, field trips, a substitute teacher, and after school events. **Be Prepared.** Always have the Emergency Action Plan (EAP) available and think ahead to prevent possible exposures to a food allergen.

• **Symptoms vary greatly.** Call 911 when anaphylactic symptoms occur or if ingestion is suspected. Use emergency medication (i.e. Epi-Pen) if needed and follow the EAP. Do not be afraid or hesitant to call 911. They are the experts and are there to help.
PROCEDURAL GUIDELINES

KEY POINTS:

- **Be safe, not sorry!** Take all complaints from children with food allergies very, very seriously. It is important to respect the needs and rights of each student, especially those covered under Section 504.

- A child with a life threatening food allergy should **NEVER eat a food item** that has not been approved by their parent or guardian.

- **Be prepared! Know your plan!**

- **Call 911.** In the event a student has an allergic reaction at school, **call 911 and administer emergency medication** (i.e. antihistamine and Epi-Pen) as ordered by the student’s physician. Key staff members should be trained to use emergency medications and know the location of those medications at school and on any special function. **If epinephrine (Epi-Pen) is used, the student should be taken to the hospital for evaluation even if the allergic reaction symptoms subside.** The school principal, nurse and school director should be notified as soon as feasible. Emergency rescue squad should be called for all suspected food allergy reactions. No one can predict how a reaction will progress. A mild reaction can blossom into a full blown anaphylactic reaction very quickly or over several hours. A reaction can also appear to subside or even appear to be under control and can blossom again into a more severe reaction.

- **Cross contamination.** It only takes a trace amount of the food protein to cause an allergic reaction. To prevent exposure to an allergen, **hand washing and washing of surfaces** (tables, chairs, mixing bowls, etc.) where an allergen has been used is necessary. Soap and warm water are most effective for cleaning surfaces.

AWARENESS (Education)

COMMUNICATION PROCESS:
Communication is ongoing and needs to be specifically focused on each of the key audiences that are within and outside of the school district. Contact the Nursing Services Coordinator (354-7298) or the director of Nutrition Services (354-7270) if you have any comments, concerns, or questions.

TRAINING AND EDUCATION:
Training material and resources are available through Nursing Services and Nutrition Services. Contact Nutrition Services (354-7270) to check out any of the following materials.

- “Alexander, The Elephant Who Couldn’t Eat Peanuts” a video for primary students.
- The School Food Allergy Program Binder, from the Food Allergy and Anaphylaxis Network.
- Epi Pen practice pen.
- “Friends Helping Friends” a video for middle and high school students.
- Protect A Life Materials (PAL) program: An easy program focused on the elementary level that encourages students to help keep their friends safe at school.

Staff training: Available through the health services department

- It Only Takes One Bite- video
- On-line or group training: “Emergency Treatment of Severe Allergic Reactions”

FAAN: The Food Allergy and Anaphylaxis Network have excellent resources and can be contacted at 800-929-4040, and the Web address is: www.foodallergy.org
HANDWASHING:
Effective hand washing with soap and warm water is one of the simplest and most effective ways to prevent unnecessary allergen exposure to students. Regular hand washing after activities, prior to lunch, after lunch, and after recess time create a safer environment for all students. A mild cleansing wipe such as a “baby wipe” can be considered when washing facilities are not available or accessible.

PREVENTION

ENROLLMENT:
Washington State law (RCW 28A.210 section 1) requires that all students with life health conditions have the needed medical orders, medications, equipment, and a nursing care plan in place before the child may attend school.

1. Enrollment health form (1F15B): If the life threatening allergy box is checked, processing of the enrollment stops and the parent/guardian is provided with a parent packet for life threatening allergies.

2. Parent/guardian provides school with required medical form and information:
   - Emergency Action Plan must be completed by a licensed health provider and signed by the parent/guardian.
   - Medication request form(s) must be completed by licensed health provider and parent/guardian.
   - Required forms must be received and reviewed by the school nurse before a student can attend school.

3. Once correct forms are filled out and medication is available at school, student may attend school

AFTER SCHOOL ACTIVITIES:
Parents are responsible for making sure that supervising staff are aware of their child’s medical concerns during after school activities and programs. The school nurse may be contacted to assist with additional accommodations and training that may be needed. Supervisors of such programs may request a health query list of student health concerns from the school office.

CLASSROOM MANAGEMENT:
- Provide PALS education with parent involvement
- Avoid food reinforcements whenever possible
- Provide storage for safe snacks, provided by parents of the allergic child
- Notify classroom parents that a student in the classroom has a severe food allergy (K-3 and as needed)
- No sharing of food is allowed.
- Ensure science kits and classroom activities are safe for students with allergies.

LUNCH ROOM:
The lunchroom can be a very intimidating place for both students with life threatening allergies and their family. Having adults who are aware of the student’s with allergies and their EAP’s helps to create a safer lunchroom environment. Follow the PAL program and the SNAP operator responsibilities.

PAL Table Program (“protect a Life”- FAAN program www.foodallergy.org/pal.html)
Recommended elementary lunch room procedure for students with life threatening allergies:
1. Provide one end of the classroom's table(s) as a PAL area, preferably the end with the least amount of traffic.
2. Table and benches washed with warm soapy water by an adult prior to students with allergies attending lunch.
3. Placemats may be used at the PALs area.
4. Classroom teacher helps identify PALs before class goes to lunch.
5. Adult in lunch room monitors PALs and students with allergies to observe for and remove any obvious allergen containing food items.
6. Hand washing with warm soapy water before lunch and after lunch (good hygiene practices for everyone).
7. Students trained and reminded that there is no sharing of food.

PLAYGROUND:
Attendants need to be aware of signs and symptoms of severe allergic reactions and the prompt emergency action that is necessary. No food should be allowed on the playground equipment.

EMERGENCY RESPONSE

EMERGENCY ACTION PLAN MANAGEMENT
The Emergency Action Plan (EAP) is processed and evaluated by the school nurse. The nurse will copy all key staff members noted at the bottom of the EAP. Key staff members must include, but are not limited to:

- Office manager: This copy must be kept in the terra green office note book. The nurse will help ensure this notebook has all the current EAP’s.
- Teacher and sub file: Measures are needed to provide an alert for substitutes (health queries, sub-finder messages, postings at check-in sites, etc.).
- Kitchen manager/Nutrition Services: An Emergency Action Plan is posted on the “hot box” in the kitchen for every child eating school provided meals with an additional copy distributed to the Nutrition Services department.
- Other building team members could include: PE specialist, recess supervisor, lunchroom supervisor, etc.

MEDICATION MANAGEMENT:
Medication management in schools must comply with state and federal requirements and must be provided by the parents. Contact Nursing Services with questions at 354-7298.

FIELD TRIP CHECK LIST:
This tool is provided by Nursing and Safety Services and should be completed prior to a field trip to assist supervising staff in preparing for emergencies that may occur. Contact the parent and school nurse regarding safety concerns. Extra emergency medication may be needed on field trips.

EMERGENCY DRILLS:
It is encouraged to have one practice drill scheduled yearly that addresses a medical emergency for a student with a life threatening health condition. This could be covered as a staff table discussion that addresses topics such as the location of meds, the location of the EAP binder, and the priority to call 911. All staff will have access to Epi-Pen trainers at every school.

MONITORING DISTRICT PLANS: Annually the director of Nutrition Services and the Health Services Coordinator will meet to review allergy materials and make recommendations for improving the district’s allergy management systems.

ROLES AND RESPONSIBILITIES

Trust, Relationship and Understanding: It is important to remember that Families who are dealing with life threatening allergy issues want to be heard and understood. By taking the time to listen to the unique individual concerns and addressing each of those concerns a level of trust can be built that will
greatly enhance the safety and educational experience for the student. The collaborative team approach creates the best results for everyone involved.

The CARE TEAM is made up of the parents/guardians and the key building team members that can help create the safest learning environment for the student. The team could include the parent, student, principal, school nurse, classroom teacher, lunch room aide, nutrition services kitchen manager, and an office team member. Each team member has specific responsibilities for creating this safe learning environment.

**Family’s Responsibility**

- Notify the school of the child's allergies.
- Work with the school team to develop a plan that accommodates the child's needs throughout the school, including in the classroom, in the cafeteria, in after-care programs, during school-sponsored activities, as well as an Emergency Action Plan (EAP).
- Provide written medical documentation, instructions, medications and medical orders as requested by the school nurse, using the parent packet for life threatening allergies as a guide.
- Provide small photo of the child to be used on the EAP (approx. 1½” x 2”).
- Replace medications after use or upon expiration.
- Ensure all necessary enrollment verification forms are filled out accurately and updated annually.
- Educate the child in the self-management of their food allergy including:
  - Safe and unsafe food
  - Strategies for avoiding exposure to unsafe foods
  - Symptoms of allergic reactions
  - How and when to tell an adult they may be having an allergy related problem
  - How to read food labels (age appropriate)
- Review policies/procedures and EAP with the school staff, the child's physician, and the child (if age appropriate) after a reaction has occurred.
- Ensure student information and necessary forms are provided if the child transfers schools at any time during the school year.
- Notify school office staff of any changes emergency contact phone numbers.
- Notify school nurse of any changes needed on the emergency action plan or medication orders.
- Notify school when moving. Be responsible for transfer of necessary information, paperwork and medication so your child can safely attend school.
- Share food allergy information including a copy of the EAP and medication orders with all after school programs/activities. Notify the school nurse if additional staff training is needed.
- Provide safe snacks for classroom parties and other special events.
- Provide safe meals from home, if possible. This is the safest option for a child with life threatening allergies.
- Work with kitchen staff and district nutrition services to ensure safe school meal options are selected if the child will eat at school.

**Student’s Responsibility**

- Should not share or trade food or eating utensils with others.
- Should not eat anything with unknown ingredients or known to contain any allergen.
- Should be proactive in the care and management of their food allergies and reactions based on their developmental level.
- Should notify an adult immediately if they eat something they believe may contain the food to which they are allergic.
- Should notify an adult if they are being picked on or threatened by other students as it relates to their food allergy.
Principal’s Responsibility
The building principal is the key care team coordinator that pulls together the building, district, and school community team members that can best serve the particular student and circumstance. Key responsibilities are:

- Meet with parents and LISTEN to their needs and concerns. They often have become an expert on their child’s specific allergy.
- Establish a care team. (Could include: Parent, Principal, Teacher, Student, Nurse, Aid, Kitchen Manager)
- Help parent understand possible 504 implications.
- Inform parent when child may attend school.
- Develop school accommodation plan: Lunchroom, classroom, lunch menu, special events, parties, field trips, and science kits.
- Ensure necessary paperwork is completed/updated prior to attendance each year: Enrollment forms, EAP, Medication forms.
- Ensure Training takes place annually and as needed: Emergency medications (i.e. Epi-Pen), EAP, Accommodation Plan at school.
- Ensure medications are stored appropriately, are accessible, and staff knows where they are located.
- Ensure district procedures for special events are followed: Field trip plans, parties, and special events.
- Ensure Emergency Action Plans are in designated areas.
- Ensure new staff and substitutes are alerted.

Office Staff’s Responsibility

- Review Enrollment form (1F15B) and identify students with life threatening allergies.
- Hand out a “Parent Packet for Life Threatening Allergies” to parents enrolling or reporting that their child has a serious allergy condition. Explain that required forms must be returned and approved by the school nurse prior to the child attending school. This is in compliance with the state law.
- Notify the principal, nurse, and teacher immediately that a student with a life threatening allergy will be enrolling (email or call).
- Receive and review all required forms (EAP, Medication request form, and any other information the parent provides).
- Immediately inform nurse that the completed paper work is available.
- Ensure all care plans are on file in the designated notebook and easily accessible.
- Prompt entry of health codes into SASI.
- Remind substitutes who are checking in at the office, to be alert for and the location of emergency action plans and other important health related information.

Nurse’s Responsibility
The nurse is the key resource for medical direction and staff/student training. The nurse MUST be contacted as soon as a student is identified with an allergy. Key responsibilities are:

- Work with principal and parents to develop an individual health care plan/accommodations plan.
- Review and approve EAP and medication forms as submitted.
- Distribute EAP and medication request form to appropriate staff.
- Review EAP with key staff and provide staff training resources for “Emergency Treatment of Severe Allergic Reactions”.
- Review EAP annually and update as needed. Communicate with parents and medical professionals as needed.
- Monitor emergency medication expiration dates.
- Resource to school staff in accommodating student needs.
Teacher’s Responsibility
The teacher has the greatest impact on the student and classroom environment. Making the school a place where the student can be accepted is very important. Key responsibilities are:

- Understand parent and student needs.
- **Call 911 first** when allergy related symptoms occur or ingestion is suspected.
- Know the Emergency Action Plan and school/classroom accommodations. NOTE: All EAP’s and life threatening allergy information should be on **bright TERRA-GREEN paper**.
- Inform substitutes of the plan(s) and ensure all paper work is current and available.
- Help educate students about allergies and peer pressure. (Video available)
- Review/rethink lesson plans and field trips in regard to foods.
- Be prepared for special events (parties) and field trips. The greatest risk for a student to have an allergic reaction is when class activity is outside the normal routine.
- Only use approved forms for meal requests (Special Order Sack Lunches, Testing snacks, Outdoor Educational Camp)
- Emphasize hand washing and surface washing before and after eating or handling food.
- Train all students not to share food or eating utensils.
- Review craft and science kits/projects in regards to specific food allergies.
- Practice the Emergency Action Plan at least once as early in the school year as possible.
- Know the location of all Emergency information and medications.
- Know how medications are accessed after normal school hours and on special trips
- Know how to contact emergency services at school or on a field trip.
  1. Do you dial “9” first?
  2. Know how to contact emergency services throughout the full course of your field trip.
  3. Is 9-1-1 available throughout the entire itinerary? If not, what is the number to dial for the local emergency response service?
  4. Be aware that your cell phone may not be operational in all areas.
  5. **Know your alternatives.**
- Ensure compliance with district field trip procedures and use a field trip checklist during the planning of a field trip.

Nutrition Services’ Responsibility
The Nutrition Services has access to educational resources and staff that are trained in nutrition, labeling, and food production. Their role is to clearly communicate with the principal and parent what allergens exist on the school menus. Menu and Allergy resources are available on the districts web site at [http://www.spokaneschools.org/NutritionServices/Allergies/](http://www.spokaneschools.org/NutritionServices/Allergies/). Key responsibilities are:

- Know the ingredients of school food items.
- Annually review food labels.
- Label peanut and nut products that are produced by nutrition services
- Participate with care team as needed.
- Ensure all meal requests are on appropriate forms.
- Label all sack meals ordered for the students with life threatening allergies with the student’s name and allergy.
- Prevent cross contamination of allergenic food products.
- Ensure all EAP’s are posted on the hot box closest to the serving line.
- Make menu accommodations as needed. Communicate these changes with the principal and nutrition services supervisor.
- Compare EAP’s posted in kitchen with EAP’s available in school office.
- Provide appropriate food substitutions that comply with EAP.
Snap Computer Operator’s Responsibility

- Review all Emergency Action Plans for the school.
- Place a bright terra-green dot by the name of each student that has a life threatening allergy and write the student’s allergy on the dot next to the student’s name.
- In SNAP place the word “ALLERGY” for the students that have a life threatening allergy.
- Inform SNAP substitutes of the students with allergies in their school.
- Remind student to tell the adult on the serving line that they have a food allergy.
- Provide student eating school meals with an allergy card, to be placed on their tray that identifies the student and their allergy. Ensure allergy card is collected for future use.

APPENDICES

FREQUENTLY ASKED QUESTION

1. Does the health care provider have to sign off on each and every accommodation detailed in a child’s Emergency Action Plan (EAP) and/or accommodation plan? The health care provider plays a significant role on the team by providing accurate and current medical information, providing the emergency protocol, and signing the appropriate medication administration forms. The health care provider, however, is often unfamiliar with the day to day operations of the school and may not be in the position to recommend or sign-off on each and every accommodation especially since some accommodations are more educational in nature rather than medical.

2. Does the school team have to include all recommendations from the health care provider? Medical/therapeutic recommendations should be accepted by the school team unless they are outside the acceptable standard of care. Suggestions and recommendations that affect the educational program and school operations from the health care provider should be welcomed and considered carefully; however they need to be decided on by the school team. Open communication between the family, the school staff and health care provider is recommended to develop a plan that meets the individual student’s need and takes into consideration each school’s unique environment. However, consideration should be given to any suggestions and requests the provider has concerning the student.

3. When a classroom is designated as a “peanut alert” or “allergen-alert” area and a parent complains that his/her child likes peanut butter crackers for snack, how should I respond? All children have the right to learn in an environment that is safe. It is sometimes necessary to designate a classroom as “peanut or other allergen-alert” area (thus asking that food items containing the allergen not be brought into the classroom) to reduce the risk of accidental exposure for a particular student. Some children will react if they ingest the particular allergen and others will react in varying degrees by touching or inhaling it. Even a young child with an ingestion-only allergy might react if he/she touches the allergen and subsequently puts his fingers in his mouth, nose or eyes. Early elementary classrooms are busy places with many centers such as sand/water tables, puppet theaters, and toy kitchens where the risk of exposure is great. Although the peanut-alert designation may be difficult for another child, it does present an opportunity for you to teach all children about understanding and cooperation in meeting the needs of their peers. The terminology, “peanut-free” may be misleading and provide a false sense of security. It is impossible to provide an absolute allergen free environment at all times in the school setting and therefore preferable to use terms such as “PALS” tables, “allergen alert” area, etc.

4. Who can administer an epinephrine auto-injector in schools? In the state of Washington, non-oral medications such as injections generally must be administered by licensed medical practitioners. In the case of auto-injected adrenalin (i.e. Epi-
Pens), used to treat a specific student with life threatening allergies, **trained**, unlicensed staff may administer this medication for a suspected allergy emergency.

5. **What paperwork must be in place for a child to have medication in school?**
   In order to administer medication in the school setting, the school must have a signed “Medication Request” form. This form has a section that must be completed by the student’s licensed health provider (LHP) and a section that must be completed by the parent. Both sections must be signed and dated.

6. **Can the school district tell students they cannot carry their epinephrine auto-injector during school or school related events?**
   **NO.** RCW28A.210.370 allows students to self-carry and self-administer medication to treat a student’s asthma or anaphylaxis, if:
   - Medication is prescribed by a licensed health provider (LHP) during school hours and has been instructed in the correct and responsible use of the medication.
   - The student has demonstrated to the LHP/designee and a registered nurse at the school, the skill level necessary to use the medication and any device that is necessary to administer the medication as ordered.
   - The LHP has provided a written school treatment plan for managing anaphylaxis episodes at school for a specific student.
   - The student’s parent or guardian has completed and submitted to the school any written documentation required by the school district.
   - Authorization must be renewed each school year.

7. **What happens when a child goes on a field trip?**
   It is critical to include collaborative planning for field trips when accommodations are discussed with school team members to ensure that he or she will be able to fully participate. The accommodations can include provisions that require the teacher to notify parents and the school nurse in advance of upcoming field trips and for the teacher, parent and school nurse to collaborate in preparing for the trip. Advance notice allows staff and parents time to investigate the destination, to identify safety risks, plan for meals and snacks, and ensure that the same or comparable safety provisions as in school are in place on the field trip. In addition the child’s group should be assigned to an adult who is trained in epinephrine auto-injector administration. The epinephrine auto-injector should remain with that child at all times including during transportation to and from the fieldtrip destination. Parents may want to volunteer to be a chaperone on trips that are more complicated in terms of safety issues, but should never be required to be a chaperone.

8. **Is it appropriate to discuss accommodations in the student’s plan in front of other parents and students?**
   No. Schools should maintain the confidentiality of student information. Parents should be informed of the general food allergy management plan without any reference to a particular child. With permission from the parent of the student with life-threatening food allergies, it may be appropriate in specific situations to share certain aspects of a student’s plan, such as the need for allergy-alert classrooms, or alternatives to food celebrations in the classroom. However, it is important protect the family and student with life-threatening food allergies from discrimination and harassment due to accommodations that may be made.

9. **How should changes to accommodations be made?**
   The plan should be reviewed annually, and it should be modified or amended when changes in the child’s health status, medical management or development (e.g., self-care competencies)
occur, when a student transitions from grade to grade and school to school, when team members identify an improved manner of addressing a safety issue and when accommodations are not working to promote safety. The team should meet to address any changes to the plan, and a new plan should be generated to reflect the changes needed. School staff and parents should maintain open lines of communication and any key team member should feel comfortable initiating a change.

10. **If a child unexpectedly brings in a treat for the class, and it is unclear as to whether or not the treat contains allergens, should the treat be given to a child with an allergy?**
Do not serve any food item to a student with a severe allergy that has not been approved or provided by the student’s parent or guardian. The teacher, other parents or school staff should not determine that food items are acceptable to be served to students with severe food allergies.

11. **Is it appropriate to use classroom manipulatives that involve food allergens?**
Using classroom manipulatives that contain allergens may prevent a particular child from safely and equally participating in a class activity. As a result, teachers should work with students and parents to ensure that all students can fully participate in the activity. This may require the teacher to utilize manipulatives free from any offending allergens. The extent of the child’s allergy, and his/her age and maturity level should be taken into consideration. District science kits include allergy alerts for a variety of allergens, for each unit.

12. **How can a child safely participate in school meal programs (breakfast and lunch)?**
Collaboration with food service staff is essential to assist the student with life-threatening food allergies to participate in the school meal program. With documentation from the student’s health care provider, meal substitutions can be made to ensure that students are provided with food choices that avoid certain foods. It is important to remember that most allergist recommend that parents provide the food and snacks for students with life threatening allergies. Food from home is the safest option. See “PALs Program” under Lunch Room management.

13. **Should all children with life-threatening food allergies be in same classroom?**
School districts should make their placement decisions primarily on the educational considerations for all students regardless of special health care needs. Families who are dealing with life threatening allergy issues want their children to be included in as much of the normal school day experiences as possible, and they want them to be safe. Generally the regular classroom can be a safe place for students with life threatening allergies.

**RESOURCES:**

- **The Food Allergy and Anaphylaxis Network (FAAN).** FAN is a great resource for current research, informational newsletter, support groups, and information of food products. Their phone number is 800-929-4040, and the Web address is: [www.foodallergy.org](http://www.foodallergy.org)

- **Allergy, Asthma Information Association of Canada.** (AAIA) [http://www.aaia.ca/en/index.htm](http://www.aaia.ca/en/index.htm)

- **American Academy of Allergy, Asthma and Immunology.** (AAAAI). [http://www.aaaai.org](http://www.aaaai.org)

- **National Association of School Nurses.** [http://www.nasn.org/](http://www.nasn.org/)

- **Asthma & Allergy Foundation of America.** [http://www.aafa.org/](http://www.aafa.org/)

- **Inland Food Allergy Support Team.** Local eastern Washington support group. [www.i-fast.org](http://www.i-fast.org)

- **Spokane Public Schools Nutrition Services.** Current food allergy procedures, forms, and information available on the web. [www.spokaneschools.org/nutritionservices](http://www.spokaneschools.org/nutritionservices)

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