

Care of the Student with Food Allergies At-Risk for Anaphylaxis

Purpose:

To provide guidance in the management of students with food allergies at-risk for anaphylaxis at school.

Responsibility:

School Nurse, Campus Administrators, Teachers, Students, and Parents.

Food Allergy Management Team:

In order to implement, coordinate, and monitor food allergy management on a campus a food allergy management team will be created.

Members of the team will include but not limited to:

Director of Child Nutrition; School Nurse; Principal; Cafeteria Manager; Classroom teacher. Also as necessary include: Custodial Staff; Bus Driver; Counselor.

Background:

A *food allergy* is an abnormal response to a food, triggered by the body's immune system (NIAID, 2010). Symptoms of a food induced allergic reaction may range from mild to severe and may become life-threatening. Reactions vary with each person and each exposure to a *food allergen* and the severity of an allergic reaction is not predictable. With the increasing prevalence of food allergies in the past two decades, care of students with life-threatening allergies has become a major issue for school personnel (Sheetz, 2004). School personnel should be ready to effectively manage students with known food allergies and should also be prepared to recognize symptoms of an allergic reaction in both diagnosed and undiagnosed students in order to respond to the student's emergency needs.

Strict avoidance of food allergens and early recognition and management of allergic reactions are important measures to prevent serious health consequences (U. S. Food and Drug Administration, 2008). Children spend up to 50 percent of their waking hours in school, and foods containing allergens are commonly found in schools. Thus, the likelihood of allergic reactions occurring in schools is high (Sheetz, 2004). Studies show that 16-18 percent of children with food allergies have had allergic reactions to accidental ingestion of food allergens while in school. Moreover, food-induced anaphylaxis data reveals that 25 percent of anaphylactic reactions in schools occur among students without a previous food allergy diagnosis (Sicherer, 2010 & Nowak-Wegrzyn, 2001).

Currently, management of food allergies consists of educating children, parents and care providers, including school personnel, about strict avoidance of the food allergen, recognizing the signs and symptoms of an allergic reaction, and initiating emergency treatment in case of an unintended ingestion or exposure. In order to address the complexities of food allergy management in schools, it is important that students, parents/caregivers, and school personnel work cooperatively to create a safe and supportive learning environment (National School Boards Association, 2011).

Signs and Symptoms of an Allergic Reaction:

In the case of life-threatening food allergy reactions, more than one system of the body can be involved. The mouth, throat, nose, eyes, ears, lung, stomach, skin, heart, and brain can all be affected.

The most dangerous symptoms include breathing difficulties and a drop in blood pressure or shock, which is potentially fatal.

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Body System	Anaphylactic Sign or Symptom
Mouth	Tingling, itching, swelling of the tongue, lips or mouth; blue/grey color of the lips
Throat	Tightening of throat; tickling feeling in back of throat; hoarseness or change in voice
Nose/Eyes/Ears	Runny, itchy nose; redness and/or swelling of eyes; throbbing in ears
Lung	Shortness of breath; repetitive shallow cough; wheezing
Stomach	Nausea; vomiting; diarrhea; abdominal cramps
Skin	Itchy rash; hives; swelling of face or extremities; facial flushing
Heart	Thin weak pulse; rapid pulse; palpitations; fainting; blueness of lips, face or nail beds; paleness

Treatment of Anaphylaxis

Epinephrine is the first-line treatment in cases of anaphylaxis. Other medications, such as antihistamines like benadryl, have a delayed onset of action, but may be prescribed for mild symptoms. Epinephrine is generally prescribed as an auto-injector device that is relatively simple to use.

Anaphylaxis can occur immediately or up to two hours following exposure to an allergen. In approximately one third of anaphylactic reactions, the initial symptoms are followed by a delayed wave of symptoms two to four hours later. This combination of an early phase of symptoms followed by a late phase of symptoms is defined as a biphasic reaction. While initial symptoms respond to epinephrine, the delayed biphasic response may not respond to epinephrine and may not be prevented by steroids. Therefore, it is imperative that following the administration of epinephrine, the student be transported by emergency medical services (EMS) to the nearest hospital emergency department even if the symptoms appear to have resolved.

Because the risk of death or serious disability from anaphylaxis itself usually outweighs other concerns, existing studies clearly favor the benefit of epinephrine administration in most situations. There are no medical conditions which absolutely prohibit the use of epinephrine when anaphylaxis occurs (Boyce, 2010).

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Definitions:

Anaphylaxis: a serious allergic reaction that is rapid in onset and may cause death. Anaphylaxis occurs within a few minutes to several hours after exposure to the allergen.

Auto-injector: a pre-measured, spring-loaded pen-like device used to administer epinephrine and designed for ease of use by non-medical persons.

Child Nutrition Allergy Form: a form signed by a licensed physician that indicates the allergy, explains why the allergy restricts the child's diet; and the food or foods to be omitted from the child's diet and the food or choice of foods that must be substituted.

Cross Contamination: when an allergen is transferred from one item (Utensils, pots, pans, countertops, surfaces, etc.) to another.

Emergency Action Plan: (EAP) a personalized emergency plan that specifies the delivery of accommodations and services needed by a student in the event of a food allergy reaction.

Emergency Medical Service (EMS): an emergency medical technician or paramedic that is training to provide out-of-hospital medical care in urgent situations and providing transportation to the nearest hospital.

Epinephrine: (Adrenaline) medication used to counteract anaphylaxis; usually administered via an auto-injector.

Food Allergy: a potentially serious immune-mediated response that causes release of histamine that develops after ingesting or coming into contact with specific foods or food additives.

Food Allergy Action Plan (FAAP): a personalized emergency plan that specifies the delivery of accommodations and services needed by a student in the event of a food allergy reaction.

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.

Health Services Food Allergy Form: form to disclose whether the child has a food allergy or a severe food allergy that, in the judgment of the parent/guardian, should be disclosed to the district to enable the district to take necessary precautions regarding the child's safety, and specify the food to which the child is allergic and the nature of the allergic reaction.

Individualized Healthcare Plan (IHP): a plan written by the school nurse that details accommodations and/or nursing services to be provided to a student because of the student's medical condition based on

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medical orders written by a health care provider in the student's medical home.

School Nurse: a person who holds a current license as a nurse from the Texas Board of Nursing

School-Sponsored Activity: any activity, event, or program occurring on or off school grounds, whether during or outside of regular school hours, which is organized and/or supported by the school.

Severe Food Allergy: a dangerous or life threatening reaction of the human body to a food-borne allergen induced by inhalation, ingestion or skin contact that requires immediate medical attention.

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Procedure:

1. Notification of a food allergy
 - Upon enrollment of a new student, the parent/guardian will be provided with the following form:
 - Health Services Food Allergy Form **Parent Statement of Food Allergy**
 - The Parent Statement of Food Allergy Information forms will be available at fall school registrations and schedule pick-ups.

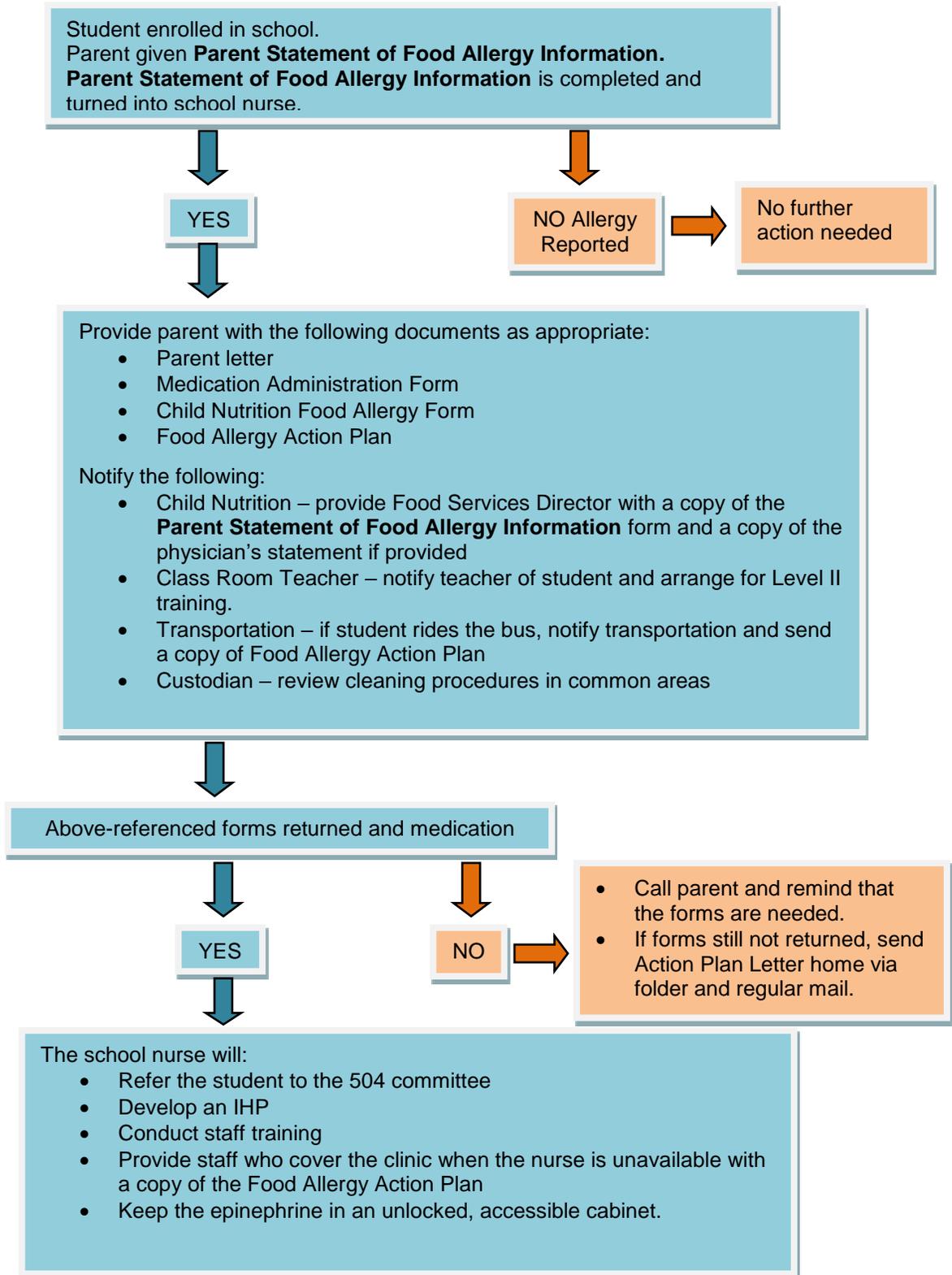
2. Upon receipt of the Health Services Food Allergy Form, the school nurse will:
 - Send home the parent notification letter including necessary paperwork.
 - Develop an IHP for the food allergy
 - Develop an EAP or FAAP
 - Initiate the 504 process, if appropriate

3. School nurse provides/coordinates education and training for school personnel. Training will be conducted annually at the beginning of the school year.
 - **Training:** This includes district wide education to all school personnel. Training will cover the following subjects:
 - Most common food allergens
 - Hazards related to the use of food for instructional purposes
 - Importance of environmental controls
 - Signs and symptoms of an anaphylactic reaction
 - How to use an EAP
 - How to administer epinephrine
 - Identifying students at risk for anaphylaxis
 - Planning for students who do not have epinephrine at school
 - Development and implementation of EAP/IHP/504 plan(s)
 - Communication procedures for initiating emergency protocols, including substitutes.
 - Environmental control factors including hand washing and cleaning procedures
 - Working with EMS
 - Post anaphylaxis debriefing

4. In the event of an anaphylactic event, a post exposure conference will be held on the campus. The following will be addressed in the debriefing:
 - Interview of the student and witnesses regarding events leading up to incident
 - Identification of the source of the allergen exposure
 - Work with Child Nutrition if allergen was due to food served by the school
 - Review allergy action plan, EAP/IHP/504 plan(s)
 - Steps to prevent future exposure
 - Replacement of epinephrine if used at school

5. In the rare event of a fatal reaction, the district's crisis plan will be activated.

Anaphylaxis Planning Algorithm



Severe Food Allergy - Responsibilities of Classroom Teacher

In promoting a safe school environment for children with food allergies at-risk for anaphylaxis, students, parents, and school personnel should work as a team in identifying students at-risk for anaphylaxis, reducing the risk of exposure to food allergens and to react quickly should an exposure or allergic reaction occur.

Classroom:

- Complete Food Allergy training.
- Review the Food Allergy Action Plan (FAAP) for your student.
- Develop a communication plan with the front office and/or school nurse.
- Keep accessible the FAAP with a photo of the student, if photo available.
- Ensure that volunteers, student teachers, aides, specialist and substitute teachers are informed of the student's food allergy and take necessary safeguards.
- Leave information in an organized, prominent and accessible format for the substitute teacher(s) and other appropriate staff.
- Be aware of how the student with food allergies is being treated; enforce school rules on bullying and threats.
- Inform parents and school nurse of any school events where food will be served.
- Consider eliminating or limiting food in classrooms and other learning environments.
- Avoid isolating or stigmatizing a student with food allergies and adhere to the Santo ISD policy on bullying.
- Ensure that a student suspected of having an allergic reaction is accompanied by an adult (preferably) or student to the clinic.
- Do not put a student on the bus if there are any signs or symptoms of an allergic reaction.

Classroom Activities:

- Avoid use of foods for classroom activities (e.g., arts and crafts, counting, science projects, parties, holidays and celebrations, cooking or other projects).
- Welcome parental involvement in organizing planning class parties and special events. Consider non-food treats.
- Use non-food items such as stickers, pencils, etc. as rewards instead of food.

Snack time/Lunchtime:

- Establish processes to ensure that the student with life-threatening food allergies eats only what she/he brings from home and/or is known to be safe.
- Encourage hand washing before and after snacks and lunch. *Alcohol-based hand sanitizers are NOT effective in removing allergens from hands.*
- Encourage students to not share or trade food.
- Encourage parents/guardians to send a box of "safe" snacks for their child.

Field Trips:

- Give the nurse at least a WEEK notice prior to field trips.
- Ensure the FAAP/EAP and the student's epinephrine is taken on the field trip and all outings.
- Collaborate with parents of student with food allergies when planning field trips.
- When eating on field trips plan for reduction of exposure to a student's life threatening food allergy.
- Invite parents of students at risk for anaphylaxis to accompany their child on school trips, and/or to act as a chaperone. However, the student's safety or attendance must not be a condition on the parent's presence on the trip.
- Ensure that 1 or 2 people on the field trip are trained in recognizing signs and symptoms of life-threatening allergic reactions and are trained to use an epi-pen.
- Consider ways to wash hands and encourage hand washing before and after eating (e.g. provision for hand wipes, etc.)

Severe Food Allergy - Responsibilities of Family & Student

In promoting a safe school environment for children with food allergies at-risk for anaphylaxis, students, parents, and school personnel should work as a team in identifying students at-risk for anaphylaxis, reducing the risk of exposure to food allergens and to react quickly should an exposure or allergic reaction occur.

The responsibilities of the family include:

- Notifying the school of the student's allergies in accordance with TEC, Section 25.022. Use of the Santo ISD Parent Statement of Food Allergy Information is the preferred method of notification.
- Working with the School Nurse to develop and review the FAAP/EAP and IHP as well as discuss accommodations the student will need throughout the school day, during school-sponsored activities, and on the school bus.
- Providing completed and signed Santo ISD medication authorization, Child Nutrition Food Allergy Form and Food Allergy Action Plan (signed by the physician) to the school nurse.
- Providing properly labeled medications and replace medications after use or upon expiration.
- Working with your child in the self-management of their food allergy including:
 - Safe and unsafe foods,
 - Strategies for avoiding exposure to unsafe foods,
 - Symptoms of allergic reactions,
 - How and when to tell and adult they may be having an allergy-related problem,
 - How to read food labels (age appropriate),
 - If age appropriate, the importance of carrying and administering their personal asthma and anaphylaxis medications as prescribed.
- Meeting with the school staff for post-exposure conference.
- Providing emergency contact information and *update when needed*.

The responsibilities of the student include:

- No trading of food with others.
- Not eating anything with unknown ingredients or known to contain any allergen.
- Being proactive in the care and management of their food allergies and reactions (as developmentally appropriate).
- Immediately notifying an adult if they have eaten something they believe may contain a food to which they are allergic.

Severe Food Allergy - Responsibilities of School Nurse

In promoting a safe school environment for children with food allergies at-risk for anaphylaxis, students, parents, and school personnel should work as a team in identifying students at-risk for anaphylaxis, reducing the risk of exposure to food allergens and to react quickly should an exposure or allergic reaction occur.

Responsibilities of school nurse:

- Review the Santo ISD Parent Statement of Food Allergy Information.
- Work with parent/guardian and student in development of FAAP/EAP and IHP.
- Ensure that required paperwork has been submitted.
- Notify Child Nutrition, Transportation, Teachers of the enrollment of the student with a severe food allergy as appropriate.
- Provide classroom teacher(s), Transportation and any other staff with a need to know with a copy of the FAAP/EAP .
- Ensure that medications are properly labeled and note expiration date.
- Encourage parent to keep extra epinephrine in the clinic if the student will be carrying the medication with them.
- Store medication in an accessible but unlocked cabinet in the case of an emergency.
- Provide Food Allergy training as outlined in the Care of the Student with Food Allergies At-Risk for Anaphylaxis guideline.
- Maintain documentation of training.
- Periodically assess staff readiness to administer epinephrine when needed.
- Ensure that a trained staff member attends field trips, school outings if parents are not in attendance.

Severe Food Allergy - Responsibilities of Child Nutrition

In promoting a safe school environment for children with food allergies at-risk for anaphylaxis, students, parents, and school personnel should work as a team in identifying students at-risk for anaphylaxis, reducing the risk of exposure to food allergens and to react quickly should an exposure or allergic reaction occur.

Responsibilities of Child Nutrition:

- Review the legal protections for students with life-threatening allergies and ensure that students with severe food allergies that participate in the federally-funded school meal program are given safe food items as outlined by the physician's signed statement.
- After receiving notice from healthcare provider, make appropriate substitutions or modifications for meals served to students with food allergies.
- Read all food labels and recheck routinely for potential allergens.
- Train all child nutrition staff and substitutes to read food labels and recognize food allergies.
- Maintain contact information for manufacturers of food products (Consumer Hotline).
- Review and follow sound food handling practices to avoid cross-contamination with potential food allergens.
- Follow cleaning and sanitation protocol to avoid cross-contamination.
- Provide training to all child nutrition personnel.
- Avoid use of latex gloves, use non-latex gloves.
- Provide advance copies of the menu to the parent/guardian of students with food allergy, and notification if menu changes. Consider how to provide specific ingredient lists to parents upon request.
- Be prepared to take emergency action for a student in the cafeteria in the event of an allergic reaction.

Severe Food Allergy - Responsibilities of Campus Administrator

In promoting a safe school environment for children with food allergies at-risk for anaphylaxis, students, parents, and school personnel should work as a team in identifying students at-risk for anaphylaxis, reducing the risk of exposure to food allergens and to react quickly should an exposure or allergic reaction occur.

Responsibilities of campus administrator include:

- Ensure a process is in place for identifying students with food allergies who are at-risk for anaphylaxis.
- Ensure that designated staff complete Food Allergy training annually.
- Ensure that at least one trained staff member attends field trips when a student with food allergies who are at-risk for anaphylaxis is participating the event.
- Ensure that a plan is in place to notify substitute teachers if they have a student with food allergies who are at-risk for anaphylaxis in their classroom.
- Ensure that a plan is in place to respond to exposure or allergic reactions when a school nurse is not available.
- Encourage Limited use of food as rewards and manipulatives in classrooms.

Severe Food Allergy - Responsibilities of Transportation Department

In promoting a safe school environment for children with food allergies at-risk for anaphylaxis, students, parents, and school personnel should work as a team in identifying students at-risk for anaphylaxis, reducing the risk of exposure to food allergens and to react quickly should an exposure or allergic reaction occur.

Responsibilities of the transportation department include:

- Provide Food Allergy training to all bus drivers.
- Obtain a copy of the FAAP/EAP from the school nurse for students with food allergies who are at-risk for anaphylaxis who ride the bus,
- Provide appropriate bus drivers with FAAP/EAP for students with food allergies who are at-risk for anaphylaxis who are on their routes.
- Maintain a policy of no consumption of food or drinks on the buses.
- Ensure that bus drivers know how to contact EMS in the event of an emergency.

Severe Food Allergy - Responsibilities of Coaches/Sponsors of Before and After School Sponsored Activities

In promoting a safe school environment for children with food allergies at-risk for anaphylaxis, students, parents, and school personnel should work as a team in identifying students at-risk for anaphylaxis, reducing the risk of exposure to food allergens and to react quickly should an exposure or allergic reaction occur.

Responsibilities of coaches/sponsors include:

- Conduct the school sponsored activity in accordance with school policies and procedures regarding students with food allergies who are at-risk for anaphylaxis.
- Provide the school nurse with a list of students who are participating in the before and after school sponsored activity.
- Obtain a copy of the FAAP/EAP from the school nurse for students with food allergies who are at-risk for anaphylaxis who participating in the activity.
- Ensure all coaches/sponsors of the activity receive Food Allergy training.
- Ensure all coaches/sponsors know if the student is self-carrying epinephrine and/or where the student(s) epinephrine is located on the campus.
- Discourage trading or sharing of food and utensils.
- Promote and monitor good hand washing practices.
- Encourage restriction of the use of foods that are known allergens.

Severe Food Allergy - Responsibilities of Custodial Staff

In promoting a safe school environment for children with food allergies at-risk for anaphylaxis, students, parents, and school personnel should work as a team in identifying students at-risk for anaphylaxis, reducing the risk of exposure to food allergens and to react quickly should an exposure or allergic reaction occur.

Responsibilities of custodial staff include:

- Attend/participate in Food Allergy training.
- Follow cleaning and sanitation protocol to avoid cross-contamination.
- Avoid use of latex gloves, use non-latex gloves.
- Be prepared to take emergency action for a student in the cafeteria in the event of an allergic reaction.

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