

GREENWICH PUBLIC SCHOOLS
Greenwich, Connecticut

Policy E- 001 – PROGRAMS, SERVICES AND CURRICULUM

Procedure E-001.21 -Management of Serious Allergies

GUIDELINES FOR MANAGING SERIOUS ALLERGIES

The incidence of potentially life-threatening food allergies among children is increasing across the nation. An estimated 8% of all children suffer from food allergies. Peanuts are the leading cause of severe reactions.

Greenwich Public Schools District recognizes the need to implement strategies to help the allergic child avoid offending foods and to establish emergency procedures to treat any allergic reaction that may occur. The primary focus of these guidelines is to support parents regarding food allergy management and to maintain a safe school environment.

Process for the Identification of Students with Life-Threatening Allergies

Each school year the school nurse will identify from health records any student that may have a life-threatening allergy.

Process for Annual Development of Individualized Health Care Plan

Prior to enrollment the nurse will meet with the student's parent/guardian to obtain documentation of the student's allergy and discuss the plans to keep the student safe while at school. At that meeting if the student has a food allergy, for example, the nurse will emphasize to the parents the importance of teaching their child to refrain from sharing food with others. Since the best treatment for anaphylaxis is the avoidance of the allergen, parents, teachers, nurse and school staff should encourage the child to only eat food that his/her parent has approved. Avoidance should also be stressed as the best treatment for any type of allergy whether food or bee allergy or environmental.

At this meeting also, the nurse will encourage the parent to teach his/her child to immediately tell the adult present in the classroom, cafeteria etc. if they are feeling ill.

The nurse will supply the parent/guardian with an Emergency Health Care Plan Form (ECP) and an Authorization for Administration of Medication by School Personnel Form to be fully completed by the student's medical provider, signed by the parent, and returned to the school with the necessary medication.

Based on the information contained in the completed Emergency Care Plan and any other health information provided, the nurse with the parent's collaboration will formulate an Individualized Health Care Plan (IHP), and/or School Health Plan (SHP) delineating management of the student's allergy at school and on field trips. The allergy student's parent/guardian will be given

a copy of the School Health Plan to read, review, and sign. The ICHP, SHP, and ECP will address the student's every day care as well as emergent care.

Administration of Medications

Consistent with the revised regulation Section 10-212a of the General Statutes of Connecticut, medications may be administered by a school nurse in accordance with the orders of a licensed physician, dentist, Advanced Practice Registered Nurse (APRN) or Physician's Assistant (PA) and written authorization from parent and/or guardian or, in the absence of such nurse, the principal and/or any certified teacher of a school trained in the administration of medication.

In the absence of a school nurse, an EpiPen/EpiPenJr may be administered by a principal, teacher, Occupational Therapist (OT) or Physical Therapist (PT) with proper training by the school nurse. An individual paraprofessional who has been properly trained in EpiPen administration may administer an EpiPen only to the specific child for which the paraprofessional has been trained.

The school nurse is responsible for the supervision and medication training of the other school personnel who are delegated to give medications in her absence. The nurse will notify the school nurse supervisor and the school administrator if she needs to leave the school for any reason.

The emergency medication will be kept in an appropriate, easily accessible location, which allows for prompt response in case of a reaction. Consistent with the newly adopted Public Act 09-155, the district will permit students diagnosed with either asthma or an allergic condition to retain possession of asthmatic inhalers and automatic pre-filled cartridge injectors (EpiPens) at all times while attending school provided a written authorization for self-administration of medication signed by the child's parent or guardian and an authorized prescriber is submitted to the school nurse

The nurse and when necessary the teacher will carry walkie-talkies to allow for rapid response time. 911 will be called immediately when an EpiPen/EpiPenJr is given, and the parent/guardian will be notified to meet the student at the emergency room.

The school nurse supervisor and building administrator will be notified each time that an EpiPen is administered to an allergic student for a known allergen exposure. After each emergency event for a known allergen exposure, a meeting will be held on the school level with appropriate staff, nurse, and administrator to assess what went wrong and address the problem within the school.

Communication Plans

Communication is essential for student's safety. The district's communications plan includes:

With permission of the food allergy student's parent, notification (Food Allergy Letter) will be sent to all other parents in the child's immediate class. The importance of allergen avoidance will be stressed to all parents, and cooperation will be requested. The school weekly newspaper can also be used to send health and allergy information home to parents.

With the permission of the food allergy student's parent the school nurse can also meet with the student's class to provide age appropriate information about food allergies and anaphylaxis.

With the help of the school administrator the nurse will familiarize appropriate school staff with identification of this student, the student's particular allergy, management of that allergy in the school setting, and signs and symptoms of anaphylaxis. Parents should consider obtaining one of the many styles of MedicAlert Bracelets for any child with a chronic health condition. Bus personnel will be made aware of the presence of an allergic student, and emergency protocols in the event of a reaction will be reviewed. Allergen avoidance must be stressed. A "no eating" policy must be maintained on buses.

Staff will use established communication systems within the school (i.e., walkie-talkies and phones) to get help if needed. During off-site activities (Field Trips) cell phones and bus radios will be used.

Education and professional development

The nurse supervisor will subscribe to Food Allergy & Anaphylaxis Network (FAAN) and will disseminate relevant information to the nursing staff. School nurses will continue their professional development through scheduled Staff Development Days, and attending conference to obtain CEU's. The school nurse will provide the school staff with information needed to keep allergic children safe in school.

Food Service and Food Safety Considerations

Reasonable accommodations are made for students with specific food allergies. The Superintendent does not endorse the concept of a ban on an allergy-producing product (e.g. peanuts, milk), since such a ban is difficult to enforce and may create a false sense of security for the affected students.

School personnel will not attempt to determine foods that are safe for an allergic student to consume. Parents, upon request, will be provided with information regarding ingredients of school lunches. The district relies on ingredient lists provided by food companies.

Food service personnel will be instructed on the utmost importance of avoiding cross contamination. They will further be given full information by food service on how to avoid cross contamination while preparing food.

Students will be encouraged to wash hands frequently especially before and after meals if possible.

An "allergy free table(s)" will be available in each school cafeteria. This table will be washed before the first lunch and between subsequent lunch periods with cleaning supplies used only for the allergen free table. Parents will indicate if their child is to be seated at this table.

Food or utensil sharing or “swapping” will continue to be prohibited. Parents and school staff will remind students of this rule. Cafeteria monitors will also be aware of the no sharing rule and will remind children. Further, cafeteria monitors will know which children have food allergies and the signs and symptoms of anaphylaxis.

Emotional and Social Issues

The district recognizes that often there are social/emotion issues that accompany allergies. It is important that the student have the opportunity to be included in classroom activities, field trips, and be able to socialize in the cafeteria. In those few classroom activities that include food, the classroom teacher will collaborate with the parent of the identified allergic child. Parents are encouraged to cooperate with school staff and other parents to promote this goal.

LEGAL REFERENCE:

Connecticut General Statutes:

- 10-15b** Access of parent or guardian to student’s records
- 10-154a** Professional communications between teacher or nurse and student
- 10-207** Duties of medical advisors
- 10-212a** Administrations of medications in schools
- 10-220i** Transportations of students carrying cartridge injectors
- 52-557b** Immunity from liability for emergency medical assistance first aid or medication by injection.
- PA 05-144 and 05-272** An Act Concerning the Emergency Use of Cartridge Injectors
The Regulations of Connecticut State Agencies section 10-212a through 10-212a-7

Federal Legislation:

- PA 05-104** An Act Concerning Food Allergies and the Prevention of Life-Threatening Incidents in Schools
- PA 05-144 and 05-272** An Act Concerning the Emergency Use of Cartridge Injectors
- Americans with Disabilities Act (ADA)** of 1990
- The Family Education Rights and Privacy Act of 1974 (FERPA)**
- FCS Instruction 783-2, Revision 2**, Meal substitution for medical or other special dietary reasons
- PA 09-155** An Act Concerning the use of Asthmatic Inhalers and Epinephrine Auto Injectors While at School

Procedure Revised—October 2009