

ADMINISTRATIVE REGULATION

APPROVED: January 13, 2015

REVISED:

# CENTENNIAL SCHOOL DISTRICT

## 209.1-AR-0. FOOD ALLERGY MANAGEMENT

Every food-allergic reaction has the possibility of developing into a severe or life-threatening reaction and even with proper treatment can be fatal. A severe or life-threatening reaction can occur within minutes or hours after exposure to the allergen. A student's ability to learn may be drastically altered by their fears of a reaction. This administrative regulation outlines the related aids and services needed to prevent exposure to food allergens and to respond appropriately should an anaphylactic reaction occur.

### Definitions

**Licensed Health Room Staff** - Certified School Nurse (CSN); Registered Nurse (RN); Licensed Practical Nurse (LPN).

**Medical Plans of Care** - written documents individualized for a particular student with a severe or life-threatening food allergy to address the student's needs throughout the school day, including:

1. **Emergency Care Plan (ECP)** - a medical plan of care based on the information provided in the student's Individualized Healthcare Plan (IHP) and distributed to all school personnel who have responsibilities for the student which specifically describes how to recognize a food allergy emergency and what to do when signs or symptoms of these conditions are observed.
2. **Individualized Healthcare Plan (IHP)** - a medical plan of care that provides written directions for school health personnel to follow in meeting the individual student's healthcare needs. The plan describes functional problem areas, sets goals for overcoming problems, and lists tasks/interventions to meet the goals. The IHP shall include a Food Allergy Medical Management Plan developed by a student's personal healthcare team and family, which shall outline the student's prescribed healthcare regimen and be signed by the student's board-certified allergist, family physician, physician assistant or certified registered nurse practitioner.
3. **Related Services Component in Individualized Education Program (IEP)** - that part of an IEP for a student receiving special education and related services which includes reference to development and implementation of an IHP and ECP for students with a documented severe or life-threatening food allergy as well as identifying the medical accommodations, educational aids and services to address the student's needs.

4. **Section 504 Service Agreement** - a medical plan of care which references development and implementation of an IHP and ECP as well as other accommodations, educational aids and services a student with a documented severe or life-threatening food allergy requires in order to have equal access to educational programs, nonacademic services and extracurricular activities as students without food allergies.

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ School: \_\_\_\_\_

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_ School Year: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

**FOLLOWING IS A SUMMARIZATION OF THE ACCOMMODATIONS THAT ARE NEEDED BY YOUR CHILD TO MEET HIS/HER NEEDS.**

Provision Of Food Allergy Care

1. In Pennsylvania, most medications require the assistance of a licensed nurse during school hours, school-sponsored activities and/or on school-sponsored trips. Unlicensed school staff may be trained to administer epinephrine auto-injectors.
2. All staff members will be able to recognize symptoms of anaphylaxis and be able to react to these symptoms as per school district protocols and the Emergency Care Plan (ECP), Individualized Healthcare Plan (IHP), and Medical Management Plan (MMP).
3. The student will have immediate access to all items necessary for the treatment of an anaphylactic reaction, including epinephrine auto-injectors as provided by the parent/guardian and ordered by a medical provider.
4. The CSN, RN, LPN, parent/guardian, student or trained school staff can give epinephrine auto-injectors as ordered by the medical provider, with the written approval of the parent/guardian.
5. Health room staff may contact the student's medical provider for advice or consultation when necessary. Phone numbers will be provided by the parent/guardian and will be available in the health office and on the student's ECP.
6. The student's food allergy ECP will be made available to all staff, including substitute teachers, nutrition service personnel, bus drivers, etc., as appropriate per the CSN.

Student's Level of Self-Care and Location of Supplies and Equipment

1. The student is able to perform the following food allergy care tasks without help or supervision as per the MMP and as assessed by the professional nurse (CSN or RN):

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NOTE: The student will be permitted to provide this self-care as directed by the MMP, IHP, and ECP as to time and locations, including all school-sponsored activities.

2. The student needs assistance or supervision with the following tasks:

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3. The student needs a licensed nurse to perform the following tasks:

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4. The student will be permitted to carry the following supplies and equipment with him/her at all times and in all locations:

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5. Supplies and equipment that are not kept on/with the student will be kept:

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6. Parent/Guardian is responsible for providing supplies, equipment, snacks and/or other food to meet the needs of the student as directed in the MMP, IHP and ECP.

Snacks and Meals

1. When a student's medical plan of care requires exceptions or variations to a reimbursable meal, accommodations will be made that comply with the USDA Nutrition Standards in the National School Lunch and School Breakfast Programs.
2. The student will be provided with a seating accommodation which limits the chance of exposure to allergens and allows students with food allergies to eat with nondisabled students, as appropriate to the needs of the student with food allergies.
3. Staff trained in the administration of epinephrine will be located near the food service area to support rapid response.

4. School nutrition staff or contracted staff will monitor and enforce cleaning and sanitizing procedures to prevent cross-contamination.
5. Adult supervision will be available in the cafeteria to intervene when they observe students attempting to share or trade food or when students bully the student with food allergies.
6. Where included in a medical plan of care as necessary to protect a student with food allergies, students will wash their hands or use hand wipes before and after the handling/consumption of food.
7. The student's parent/guardian will provide a nonperishable safe lunch, to be kept at school, in case the student forgets to bring lunch.
8. The student's teacher will follow established school procedures for limiting exposure to food allergens in the classroom.
9. If a student inadvertently brings a restricted food to the classroom, it will be removed from his/her possession until lunch (using cafeteria seating which is not reserved for a student with food allergies) or until the end of the school day, and s/he will not be allowed to eat that snack in any setting where the student with a food allergy would be exposed to the allergen.
10. The parent/guardian will supply snacks needed in addition to or instead of any snacks supplied for all students.
11. The student's parents/guardians will be notified three (3) days in advance (or as soon as possible in emergency situations) with any changes in the school's schedule, including field trips that may affect care.

#### Exposure to Food Allergen and/or Signs of Anaphylaxis

1. In the event the student reports exposure to a food allergen and/or shows signs/symptoms of anaphylaxis, s/he will be treated according to the IHP and the ECP and then escorted to the health room by a responsible person.
2. Any staff member finding the student unconscious will call 911, and then contact the nurse on duty in the building. If no nurse is in the building, the staff member will call the CSN assigned to the building and the parents/guardians, as per the ECP.

#### Field Trips and Extracurricular Activities

1. The teacher will take into consideration the potential for exposure to the student's food allergens when determining sites for field trips.
2. A parent/guardian will be allowed, but not required, to accompany the student on field trips.
3. All supplies necessary to carry out the student's medical plans of care will accompany the student on field trips/extracurricular activities.

4. The student may take his/her own food and lunch on field trips/extracurricular activities.
5. The student will be under the supervision of a responsible adult prepared to respond to symptoms of anaphylaxis per the ECP.
6. The teacher/coach will enforce a no-food policy on the bus.
7. During field trips and extracurricular activities, responsible adults will have an emergency communication device available.
8. Coordinators of before and after school activities will follow the food allergy management procedures established by the district.

Classroom Work

1. Teachers will implement lesson plans which do not include the student's allergens.
2. Volunteers and others assisting in the classroom will be made aware of the student's allergies and assist with prevention measures.
3. Students will be monitored for appropriate hand washing procedures before and after handling/consumption of food.
4. The teacher will develop and implement a lesson on food allergies for all students.

Communication

1. Encouragement is essential. The student will be treated in a way that encourages the student to report possible exposure to allergen and/or any symptoms and to progress toward self-care with his/her food allergy management skills.
2. Each substitute teacher and substitute school nurse will be provided with written instructions regarding the student's care (ECP) and a list of all school nurses with contact information.

**IN THE EVENT OF AN EMERGENCY, THE STUDENT'S *EMERGENCY CARE PLAN (ECP)* ON FILE IN THE NURSE'S OFFICE AND COMMUNICATED WITH ALL WHO NEED TO KNOW, IS TO BE FOLLOWED. STUDENTS AND OTHER PARENTS/GUARDIANS WILL NOT HAVE ACCESS TO THE ECP FOR CONFIDENTIALITY REASONS.**

**IF YOU HAVE ANY QUESTIONS CONCERNING YOUR RIGHTS OR THE ABOVE ACCOMMODATIONS, PLEASE FEEL FREE TO CONTACT ME.**

\_\_\_\_\_  
School District Professional Employee and Phone Number

Date: \_\_\_\_\_

\_\_\_\_\_  
Central Office Approval

Date: \_\_\_\_\_

**DIRECTIONS TO PARENTS/GUARDIANS:** Please check one (1) of the options, sign, and return this form to:

Student Services  
(NAME) School District, Administration Building  
(School District) Address

- I agree and give permission to proceed as outlined above.
- I do not agree and do not give permission to proceed as outlined above and will schedule a planning conference.

My reason for disapproval is: \_\_\_\_\_  
\_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# CENTENNIAL SCHOOL DISTRICT

ADMINISTRATIVE REGULATION

APPROVED: January 13, 2015

REVISED:

## 209.1-AR-1. SERIOUS ALLERGIES

### Responsible Administrator

The Section 504 Coordinator will be responsible for ensuring district compliance of all administrative protocols. The Section 504 building administrator will be responsible for implementation and enforcement of these protocols. In his/her absence, the Superintendent will be responsible for implementation and enforcement of these protocols.

### Definitions

The following terms will have the following meanings, unless the context clearly indicates otherwise.

**Allergy and Allergies** - allergic medical conditions that prevent a student from attending or participating in school or school functions without posing a significant threat to the health or safety of the student. It generally includes food allergies or exposures of environmental allergens. It does not include asthma. Asthma shall be governed by other Board policy and administrative guidelines.

**An allergy(ies) that poses a significant health or safety risk** - an allergy or allergies where exposure to nuts or other allergens will likely result in one (1) or more of the following symptoms or conditions: deterioration of consciousness; difficulty breathing whether due to swelling in the throat or to asthma; anaphylaxis or anaphylactic shock, from either obstruction to breathing or extremely low blood pressure; swelling in the throat causing difficulty in swallowing or breathing; the effects resulting from any of the foregoing; and/or any other illness or disease that is not transitory or de minimus. Effects of exposure to nuts or other allergens that do not fall within the definition of a serious risk of health or safety include the following when none of the foregoing symptoms or conditions are likely to occur: tingling feelings; itchy nettle rash; hives; itching; or any other symptom that is transitory and will not lead to any serious adverse health condition.

**Anaphylaxis** - serious and rapid allergic reactions usually involving more than one (1) part of the body which, if severe enough, can kill.

**Include and Including** - inclusive of and not limited to or by way of example and not limitation.

**Parent** - a natural or adoptive parent, the legal guardian, a resident with whom the student is residing under the affidavit process of Section 1302 of the School Code, or a surrogate parent as defined in the Individuals with Disabilities Education Act (IDEA).

### Applicability Of Policy And Guidelines

The policy and these guidelines apply only to those students who have an allergy that poses a significant health or safety risk as defined herein and who cannot attend school or school functions without posing a serious risk to their health or safety.

### Risk Assessment

A risk assessment will be conducted as part of the Section 504 evaluation process to determine if the Board policy and related administrative guidelines will apply to any student with an allergy or allergies. At a minimum, the risk assessment will consist of the following steps:

1. **Allergy Identification:** This is the process of determining whether exposure to an agent will likely lead to adverse health outcomes. This assessment is to be based on a consideration of relevant evidence as may be considered by the district or offered by the parents/guardians. Ordinarily, it will require adequate medical documentation from a treating physician, a physician retained by the district, or any other expert with appropriate qualifications.
2. **Assessment of Likely Adverse Health Outcomes:** This is the process of determining the nature of the reaction to exposure to the allergen. Ordinarily, it will require adequate medical documentation from a treating physician, a physician retained by the district, or any other expert with appropriate qualifications.

### Enforcement Of Protocols

The responsible administrator will promptly report any substantial and material violation of these protocols or of any applicable Section 504 Service Agreement to the Section 504 Coordinator and to the immediate supervisor of the employee whose acts or omissions constituted a violation.

### Child Find

Applicable child find activities will be taken with respect to children who might have or are suspected of having allergies that pose a significant threat to their health or safety, in accordance with Board policy and administrative guidelines on qualified students with disabilities and in accordance with law and regulations.

Notice: The Section 504 Coordinator will be responsible for posting and distributing appropriate notices and child find information, in accordance with applicable Board policy.

School Nurse Responsibilities: The school nurse will review registration materials and district health forms no less frequently than annually. If any material suggests that a student may have an allergy that poses a significant threat to health or safety, the school nurse will notify the responsible administrator.



Notice to Employees/Notice by Parent/Guardian or Student: If any parent/guardian or student provides information to any teacher, nurse or administrator that would reasonably lead such employee to believe that the student has an allergy that poses a significant threat to the health or safety of the student, said employee will notify the responsible administrator.

Notification of Rights: If a student is identified as possibly being a student with an allergy that poses a significant threat to the health or safety of the student, the student will be assessed under Section 504 in accordance with Board policy and provided appropriate notices and procedural safeguards.

### Section 504 Compliance

A student with an allergy that poses a significant risk to the health or safety of the student may be protected by Section 504. The determination of whether a student is protected by Section 504 will be made on an individual basis in consideration of relevant data and in accordance with Board policy and administrative guidelines on qualified students with disabilities.

Reliable Information: Whether a student has an allergy and what needs to be done at school or school functions generally requires appropriate medical information from a qualified health care provider. Documentation will be reviewed by the Section 504 Screening Team.

Medication Protocols: Generally, whenever medication is to be brought to school, the following protocols are to be followed, and to the extent appropriate, included in the Section 504 Service Agreement:

1. There must be a written statement from a licensed physician, certified registered nurse practitioner or physician assistant that generally provides:
  - a. The name of the medication.
  - b. The dose.
  - c. The time(s) when the medication is to be taken.
  - d. The route of administration of the medication, i.e., inhaled, oral or injected.
  - e. The diagnosis or reason the medication is needed.
  - f. The potential for any serious reaction that may occur to the medication.
  - g. Any necessary emergency response to a serious reaction that may occur to the medication.
  - h. Whether, in the opinion of the health care provider, the student is qualified and able to possess and/or self-administer the medication, which opinion shall be taken into consideration, but shall not be determinative.

2. Require the parent/guardian to supply a note or statement that is on a form prepared by the district or that substantially provides that the parent/guardian requests the school district to keep, administer or allow the student to keep and administer the medication, as applicable, and that the parent/guardian relieves the district and its employees of any responsibility for the benefits or consequences of the prescribed medication. If a parent/guardian refuses to execute such a note, the school solicitor or special counsel will be contacted by the responsible administrator to obtain legal advice and recommendations whether to insist on such a note and how to handle the matter.
3. Updated prescriptions and parental approvals must be obtained no less frequently than annually.

Contents of Section 504 Service Agreement: Although each Section 504 Service Agreement will be developed individually to meet the individual needs of each protected student, consideration of the following will be undertaken for inclusion in the Section 504 Service Agreement. The determination of whether any particular provision is reasonable or necessary will be made on an individual basis by members of the Section 504 Team in consideration of the relevant data, including the following:

1. The nature and severity of the student's allergy.
2. Provisions for handling medical emergencies caused by the allergy including but not limited to the storage location of the epinephrine auto-injector.
3. Elimination of the allergen in the student's classroom.
4. Provisions for an allergen-free lunch table.
5. Provisions for field trip accommodations.
6. Requirements for education of students and staff to ensure the safety of the allergic student.
7. Provisions for response to an incident during transportation to or from school or during transportation.
8. Provisions for response to an incident during, before or after school activities sponsored by the district, including during district-provided transportation to and from those activities.
9. Provisions for response to an incident during school emergencies, such as lock down or evacuation.
10. Provisions for alternative options for the student to ensure inclusion in the classroom activities (for example, provisions for alternative snacks that the child can eat such as peanut-free cookies for parties and where they will be stored).

Self-administration and/or Possession of Medication:

1. If a student will be permitted to possess and self-administer medication, including use of an epinephrine auto-injector, at school or during school functions, the student will be required to demonstrate the capacity for self-administration and for responsible behavior in the use and possession of such medication. Determination of competency for self-administration will be based on relevant considerations, including age, cognitive function, maturity and demonstration of responsible behavior. Determination of competency will be made by the prescribing physician.
2. The student will notify the school nurse immediately following each use of medication, including use of an epinephrine auto-injector, as required by Board policy.

Additional Considerations

When a student has been offered a Section 504 plan in connection with an identified allergy, the following steps will be taken as appropriate, and/or as required by the Section 504 Service Agreement:

1. All school personnel who work with a student who has a Section 504 plan are required to implement all aspects of the plan. This may include but is not limited to: classroom teachers, substitute teachers, aides, bus drivers, lunch room monitors and personnel who work with students in district-sponsored before and after school programs and extracurricular activities. For example: an allergic student's Section 504 Service Agreement may be given to all substitute teachers who will teach the student including a picture of the student.
2. Teachers, leaders of district-sponsored before and after school programs, and staff, including custodial staff, cafeteria staff, and bus drivers who may be in contact with the student will receive information at a training session from the school nurse regarding the nature and extent of the student's allergy.
3. Training will be tailored to address the specific needs of the students who are allergic and include a review of the signs and symptoms specific students who are allergic may present and the emergency procedures required to treat them including, if necessary:
  - a. The use of the epinephrine auto-injector.
  - b. The location and availability of the student's medicine pack.
  - c. The importance of prevention and risk reduction.
  - d. How to read food labels.
  - e. Working to ensure that school activities are safe, fun, and inclusive for all students including students with allergies.

4. Training may also include:

- a. Discouraging the use of the allergen for classroom and school-wide functions, including fundraisers.
- b. Consciousness raising information of the possible allergens used at school activities including classroom projects, manipulatives (i.e., egg cartons, shells, play doh) and including before and after school events.
- c. Positive role modeling.
- d. Promoting positive self-esteem for students with allergies.
- e. Promoting peer support for students with

allergies. Education and Training

All school personnel and leaders of district-sponsored before and after school programs will receive training by the school nurse about life-threatening allergic conditions, risk reduction, determining safety of foods to which allergic students are exposed, and response to emergencies, including fatal reactions.

All students will receive education about life-threatening allergic conditions, prevention (such as limiting food swapping and purpose for allergen-free zones, hand washing), and anti-harassment, bullying and teasing of students with allergies.

Major Food Allergens

FALCPA, a comprehensive food labeling law, has been in effect since January 1, 2006. Under FALCPA, food labels are required to state clearly whether the food contains a major food allergen.

A major food allergen is defined as one of the following foods or food groups, or is an ingredient that contains protein derived from one of the following foods or food groups:

- Milk
- Eggs
- Peanuts
- Tree nuts such as almonds, walnuts, and pecans
- Soybeans
- Wheat
- Fish
- Shellfish such as crab, lobster, and shrimp

### Allergen-Free Space

If allergen-free space is deemed necessary according to a student's Section 504 plan, the following requirements will be fulfilled by responsible employees:

1. The space will be clearly designated as an allergen-free space with a notice.
2. The space will not contain, or in the case of food-related allergens be used for the consumption, preparation, or serving of food containing allergens, at any time during the school year, including special events.
3. Allergen-free tables will be cleaned after each meal using disposable wipes and/or dedicated cleaning materials.
4. Extra care will be given to avoid cross-contaminating allergen-free space during cleaning.
5. Homemade foods will not be allowed in the space; only labeled foods sealed in their original packaging may be brought for special occasions.

### Communication About Events Involving The Student

At least one (1) week in advance of the event, the teacher or staff member, as appropriate, will notify the parents/guardians of any allergic student of any upcoming related events that may trigger the student's allergies and how they will be made safe and inclusive for their child.

If a classroom has been designated as allergen-free, then at the beginning of each term a letter will be sent home to parents/guardians of students in that classroom notifying them that the classroom has been so designated and providing them with the list of allergens in question.

Visitors to classrooms in which there are allergic students will be directed to refrain from bringing in any items that might contain the allergen.

### Emergency Procedures

In addition to complying with any emergency provisions contained in an applicable Section 504 Service Agreement:

1. All staff and teachers who are responsible for a student who might need to be administered epinephrine by an auto-injector will be trained by the school nurse in the correct administration of an epinephrine auto-injector including specific procedures for responding to a reaction for each student.
2. In the case of an allergic reaction, the person responsible for the student will follow the medical emergency procedures that are in the student's Section 504 Service Agreement and will notify the school nurse.

### Field Trips

In addition to complying with any field trip provisions contained in an applicable Section 504 Service Agreement:

1. On all field trips that include a student with an allergy to which Board policy and these guidelines apply, that student's parents/guardians should be invited to accompany their child on school trips. This may be in addition to or in lieu of other chaperones and is intended to allow the parent/guardian to assist their child if an emergency arises. If this cannot happen, a designated classroom teacher or aide who has read and is able to fully implement the student's Section 504 plan must be included on the field trip. The student will not be excluded from a field trip due to the inability of a parent/guardian to accompany their child.

Homeroom

The student's parent/guardian may be offered the opportunity to serve as a homeroom parent.

ADMINISTRATIVE REGULATION

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# CENTENNIAL SCHOOL DISTRICT

## 209.1-AR-2. INDIVIDUALIZED HEALTHCARE PLAN (IHP)

<b>Assessment</b>	<b>Nursing Diagnosis</b>	<b>Goals</b>	<b>Nursing Interventions</b>	<b>Expected Outcomes</b>

**Medical Plan of Care for School Food Service  
(Students with Disabilities and Non-Disabling Special Dietary Needs)**

The following child is a participant in one of the United States Department of Agriculture (USDA) school nutrition programs.

- USDA regulations 7CFR Part 15B require substitutions or modifications in school program meals for children whose **disability** restricts their diet and is supported by a statement signed by a **licensed physician**. Food allergies which may result in a severe, life-threatening (anaphylactic) reaction may meet the definition of "disability."
- The school may choose to accommodate a student with a **non-disabling special dietary need** that is supported by a statement signed by a **recognized medical authority** (physician, physician assistant or nurse practitioner).
- The school food authority may choose to make a milk substitution available for students with a **non-disabling special dietary need**, such as milk intolerance or for cultural or religious beliefs. If the school food authority makes these substitutions available, the milk substitute must meet nutrient standards identified in regulations. If available, this will be indicated in Part 2. A parent/guardian or **recognized medical authority** (physician, physician assistant, or nurse practitioner) may complete this section. If this is the only substitution being requested, complete Part 1 and 2 only.

**Part 1: To be completed by Parent/Guardian (all requests for special dietary needs)**

Child's Name		Date of Birth	M	F
Name of School/Center/Program		Grade Level/Classroom		
Parent's/Guardian's Name		Address, City, State, Zip Code		
( )	( )			
Home Phone	Work Phone			

**Part 2: Request for milk substitution for non-disabling special dietary needs only**

School/school district does not make milk substitutes available to students with non-disabling special dietary needs. Do not complete Part 2.

School/school district provides \_\_\_\_\_ as a milk substitute to students with non-disabling or other special dietary needs when Part 2 is completed by Medical Authority or Parent/Guardian and approved by the school/school district.

Does the child have a non-disabling medical or special dietary need that restricts intake of fluid milk? Yes  No   
List medical or special dietary need (e.g., lactose intolerance or for cultural or religious beliefs):

Medical Authority or Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Part 3: To be completed by Physician/Medical Authority**

**Disability/Special Dietary Needs**

Does the child have a **disability**? Yes  No

If Yes,

Please describe the major life activities affected by the disability.

Does the child's disability affect their nutritional or feeding needs? Yes  No

If the child **does not have a disability\***, does the child have special nutritional or feeding needs? Yes  No

(\*These accommodations are optional for schools to make)

**If the child has a disability or special dietary/feeding need, please complete Part 4 of this form and have it signed and stamped with the office name and address of a licensed physician/recognized medical authority.**

**Part 4: To be completed by Physician/Medical Authority**

**Diet Order**

List any dietary restrictions, such as food allergies, intolerances or restrictions:



List specific foods to be substituted (Substitution cannot be made unless section is completed):

List foods that need the following change in texture. If all foods need to be prepared in this manner, indicate "All."  
Cut up/chopped into bite sized pieces:  
  
Finely Ground:  
  
Pureed:

List any special equipment or utensils needed:

Indicate any other comments about the child's eating or feeding patterns:

Physician's Name and Office Phone Number	Office Stamp
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Physician/Medical Authority's Signature	Date
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Part 5: Parent Signature	Date
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Part 6: School Nutrition Program Signature	Date
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**Health Insurance Portability and Accountability Act Waiver**  
In accordance with the provisions of the Health Insurance Portability and Accountability Act of 1996 and the Family Educational Rights and Privacy Act, I hereby authorize \_\_\_\_\_ (medical authority) to release such protected health information of my child as is necessary for the specific purpose of Special Diet information to \_\_\_\_\_ (school/program) and I consent to allow the physician/medical authority to freely exchange the information listed on this form and in their records concerning my child with the school program as necessary. I understand that I may refuse to sign this authorization without impact on the eligibility of my request for a special diet for my child. I understand that permission to release this information may be rescinded at any time except when the information has already been released. My permission to release this information will expire on \_\_\_\_\_ (date). This information is to be released for the specific purpose of Special Diet information.

The undersigned certifies that he/she is the parent, guardian or representative of the person listed on this document and has the legal authority to sign on behalf of that person.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signing this section is optional, but may prevent delays by allowing us to speak with the physician)

Please have parent/guardian review form annually and initial/date if no changes are required. Any changes require submission of a new form signed by the Physician/Medical Authority.

Parent confirmed no change in diet order. \_\_\_\_\_ Date \_\_\_\_\_ \_\_\_\_\_ Date \_\_\_\_\_ \_\_\_\_\_ Date \_\_\_\_\_  
\_\_\_\_\_ Date \_\_\_\_\_ \_\_\_\_\_ Date \_\_\_\_\_ \_\_\_\_\_ Date \_\_\_\_\_ \_\_\_\_\_ Date \_\_\_\_\_

A copy of this form should be kept by the School Food Service and the Nurse. FERPA allows school nurses to share student's medical information regarding dietary needs with school food service.

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# CENTENNIAL SCHOOL DISTRICT

## 209.1-AR-4. FOOD ALLERGY CHECKLIST

The food allergy checklist is designed to help users identify areas that need attention and specific actions that can be taken for improvement. This tool allows for a systematic approach to managing food allergies by tracking implementation of the elements into district practice, whether already established or being considered for development.

It is optimal for these elements to be implemented at both the school district and school building levels. The checklist contains a space for notes where users can add comments about specific actions needed for improvement with respect to these elements.

### ESSENTIAL COMPONENT A

Identification of students with severe or life-threatening food allergy and provision of school health services.

*Develop, implement, monitor, and update a school health services plan for students with food allergies in accordance with privacy/confidentiality laws.*

Elements	Implemented	Not Implemented	Notes: Specify what is needed of this element to be included and/or implemented
1. Collect information on students with severe or life-threatening food allergies.			
2. Coordinate a process to acquire current student information from healthcare providers and parents/guardians.			
3. Document and keep current parental consent for medication administration.			

<b>Elements</b>	<b>Implemented</b>	<b>Not Implemented</b>	<b>Notes: Specify what is needed of this element to be included and/or implemented</b>
4. Define appropriate health service for student with food allergies and train school personnel in the provision of services.			
5. Implement and follow procedures for self-administration of medication.			
6. Maintain and update student health records.			
7. Review standard operating procedures to identify students and revise as needed.			

**ESSENTIAL COMPONENT B**

Individual written management plans.

*When notified of a student’s food allergy diagnosis, each district or school should develop and implement individual written management plans, including an Individualized Healthcare Plan (IHP) and an Emergency Care Plan (ECP), to address the healthcare needs of the student. The plans should be developed in collaboration with the registered school nurse or designee, student’s healthcare provider, student’s parents/guardians, district or school nutrition staff, the student, if appropriate, and other outside providers appointed by the district, revised as needed according to the the student’s age and developmental level, and be consistent with state and federal laws regarding confidentiality.*

<b>Elements</b>	<b>Implemented</b>	<b>Not Implemented</b>	<b>Notes: Specify what is needed of this element to be included and/or implemented</b>
1. Develop and maintain Individualized Healthcare Plan (IHP) to include student’s medical needs and accommodations.			

<b>Elements</b>	<b>Implemented</b>	<b>Not Implemented</b>	<b>Notes: Specify what is needed of this element to be included and/or implemented</b>
2. Develop and maintain an Emergency Care Plan (ECP) and identify and coordinate a food allergy management team to assure a comprehensive and coordinated approach to addressing student's needs.			
3. Designate an individual to establish and monitor plan implementation.			
4. Maintain incident reports and follow up.			
5. Develop medication storage policies, on a case-by-case basis, to support a student's rights to self-carry and self-administer prescribed medications.			

**ESSENTIAL COMPONENT C**

Medication protocols: storage, access, and administration.

*Medications should be managed to allow for quick access when needed and to protect the safety of students and the medications. The details for storage, access, and administration are outlined in state laws.*

<b>Elements</b>	<b>Implemented</b>	<b>Not Implemented</b>	<b>Notes: Specify what is needed of this element to be included and/or implemented</b>
1. Maintain written medication orders for students, including permissions for students to carry and self-administer medications.			

<b>Elements</b>	<b>Implemented</b>	<b>Not Implemented</b>	<b>Notes: Specify what is needed of this element to be included and/or implemented</b>
2. Identify authorized personnel to administer medications, who will:			
a. Store medications appropriately.			
b. Request multiple (at least two (2)) epinephrine auto-injectors from parents/guardians.			
c. Monitor expiration dates on medications.			
d. Refill/Restock medications as necessary.			
e. Obtain standing order for epinephrine for emergency use, as permitted by law.			
f. Include epinephrine auto-injectors in emergency first aid treatment kits.			
g. Document any medication that is administered and notify parent/guardian/caregiver when medication is administered.			

**ESSENTIAL COMPONENT D**

Healthy school environment: comprehensive and coordinated approach.

*Each and every environment within a school requires special attention to protect the safety of students with food allergies and prevent allergic reactions, thus, it is important to develop a comprehensive and coordinated approach for the management of food allergies across the school system. Although there are commonalities across school environments, some of the specific environments are identified below.*

<b>Elements</b>	<b>Implemented</b>	<b>Not Implemented</b>	<b>Notes: Specify what is needed of this element to be included and/or implemented</b>
<p><b>1. CLASSROOM</b></p> <ul style="list-style-type: none"> <li>• Limit or reduce allergens in classroom or identify specific areas/desks that will be allergen safe.</li> <li>• Limit or reduce the use of potential food allergens in classroom projects/activities.</li> <li>• Allow only pre-packaged food items with complete ingredient lists.</li> <li>• Implement appropriate hand washing procedures.</li> <li>• Communicate rules and expectations about bullying related to food allergies.</li> <li>• Train classroom teachers and other staff on food allergies.</li> <li>• Train classroom teachers and other staff on food handling and cleaning procedures to prevent cross-contamination.</li> </ul>			

Elements	Implemented	Not Implemented	Notes: Specify what is needed of this element to be included and/or implemented
<p><b>2. CAFETERIA</b></p> <ul style="list-style-type: none"> <li>• Enforce responsibilities of school nutrition staff and contracted food service staff.</li> <li>• Develop procedures to identify students with severe or life-threatening food allergies.</li> <li>• Identify specific areas/tables that will be allergen safe.</li> <li>• Promote hand washing before and after meals.</li> <li>• Encourage and enforce no trading of food or sharing utensils.</li> <li>• Be vigilant of “food bullying.”</li> <li>• Monitor and enforce strict cleaning and sanitation policies and procedures.</li> </ul>			
<p><b>3. BUSES</b></p> <ul style="list-style-type: none"> <li>• Enforce no eating policies.</li> <li>• Store epinephrine in a safe, appropriate, secure, yet accessible location.</li> <li>• Equip all school vehicles with functional two-way communication devices.</li> <li>• Include bus drivers as members of the food allergy management team.</li> </ul>			

Elements	Implemented	Not Implemented	Notes: Specify what is needed of this element to be included and/or implemented
<ul style="list-style-type: none"> <li>• Train bus drivers in allergy awareness.</li> <li>• Require bus companies/personnel to be trained on local EMS procedures.</li> <li>• Assign seating to support safety of students.</li> </ul>			
<p><b>4. EXTRACURRICULAR ACTIVITIES, BEFORE-AND-AFTER-SCHOOL, FIELD TRIPS, AND COMMUNITY USE OF SCHOOL FACILITIES</b></p> <ul style="list-style-type: none"> <li>• Notify food allergy management team members of scheduled field trips for necessary preparation.</li> <li>• Delegate responsibilities for carrying necessary medications (epinephrine); provide a copy of the student’s individual written management plan and contact information of parent/guardian/ caregiver, the licensed healthcare provider, and the nearest hospital(s).</li> <li>• Provide access to functioning two-way communication devices.</li> <li>• Discourage trading of food and sharing of utensils.</li> </ul>			



<b>Elements</b>	<b>Implemented</b>	<b>Not Implemented</b>	<b>Notes: Specify what is needed of this element to be included and/or implemented</b>
<ul style="list-style-type: none"> <li>• Promote and monitor good hand washing practices.</li> <li>• Restrict the use of foods that are known allergens.</li> <li>• Train before-and-after-school coordinators in allergy awareness.</li> <li>• Train before-and-after-school coordinators in basic food handling procedures.</li> </ul>			
<ul style="list-style-type: none"> <li>• Communicate with and permit parents/guardians of students with food allergies opportunities to attend field trips/activities and include information on the provisions for food.</li> <li>• Promote allergy policy awareness and compliance with outside community members and organizations authorized to use school facilities.</li> </ul>			

**ESSENTIAL COMPONENT E**

Communication and confidentiality.

*Policies and communication plans must comply with state and federal privacy and confidentiality laws and accommodate parent/guardian requests, as feasible (U.S. Department of Education, 2007). Communication plans should be developed with the intent to:*

<b>Elements</b>	<b>Implemented</b>	<b>Not Implemented</b>	<b>Notes: Specify what is needed of this element to be included and/or implemented</b>
1. Inform personnel of student’s individual written management plan, being aware of confidentiality concerns.			
2. Inform parents/guardians and students of their rights regarding food allergy policies and procedures.			
3. In contractual relationships, establish that buses and transportation companies are an extension of a safe environment for students with food allergies.			
4. In contractual relationships, establish that kitchens and cafeterias are extensions of a safe environment for students with food allergies.			
5. Increase awareness of severe or life-threatening food allergies throughout the school environment.			

Elements	Implemented	Not Implemented	Notes: Specify what is needed of this element to be included and/or implemented
6. Create, maintain, and implement communication systems among school personnel and between school and student's parents/guardians in the event of a food allergy reaction.			

**ESSENTIAL COMPONENT F**

**Emergency Response.**

*A school district's development of a comprehensive emergency management plan is essential to protect the safety of students, school personnel, and others. The U.S. Department of Education recommends that such protocols, developed in collaboration with community partners, focus on the following phases of emergency management: prevention, mitigation, preparedness, response, and recovery. Managing a life-threatening allergic reaction should be included as part of an "all-hazards approach," which addresses a wide array of situations including health, fire, weather, terrorist, and other emergencies.*

*Each food allergy reaction has the potential to be life-threatening, and schools are at highest risk for accidental ingestion of a food allergen (Massachusetts Department of Education, 2002). A school should anticipate and plan for any emergency, including a food allergy reaction or other emergency related to a chronic health condition. An emergency response to address food allergy includes:*

Elements	Implemented	Not Implemented	Notes: Specify what is needed of this element to be included and/or implemented
1. Written individualized healthcare and emergency care plans that outline emergency procedures for managing severe or life-threatening allergic reactions.			

<b>Elements</b>	<b>Implemented</b>	<b>Not Implemented</b>	<b>Notes: Specify what is needed of this element to be included and/or implemented</b>
<p>2. Roles and responsibilities of adults identified to respond to an allergic reaction, including those of students not identified as having food allergies.</p> <p>3. Responding to a life-threatening allergic reaction as part of an “all-hazards” approach.</p>			

**ESSENTIAL COMPONENT G**

Professional development and training for school personnel.

*Professional development and training are needed for school personnel to be effective in supporting students with severe or life-threatening food allergies and responding to an emergency. Annual training regarding the following topics should be provided.*

<b>Elements</b>	<b>Implemented</b>	<b>Not Implemented</b>	<b>Notes: Specify what is needed of this element to be included and/or implemented</b>
<p>1. Board policies and district procedures and plans for managing students with chronic health conditions, including food allergy.</p> <p>2. Bullying prevention and responsibility to address any harassment, hazing, or bullying, and enforce consequences.</p>			

<b>Elements</b>	<b>Implemented</b>	<b>Not Implemented</b>	<b>Notes: Specify what is needed of this element to be included and/or implemented</b>
<p>3. Basic information associated with food allergy and anaphylaxis, including recognizing a student not identified as having food allergies.</p> <p>4. Awareness of food and non-food items that are potential risks.</p>			
<p>5. Strategies to reduce exposure to identified allergens in the school environment.</p> <p>6. Communication procedures for initiating emergency protocols.</p> <p>7. Proper storage and administration of medications.</p> <p>8. Access to local EMS/911.</p> <p>9. Strategies to manage individual student privacy/confidentiality.</p> <p>10. Basic food handling procedures to reduce or eliminate exposure to allergens.</p> <p>11. Additional skill instruction and practice for those assigned to administer epinephrine or likely to be present during an allergic reaction.</p>			

**ESSENTIAL COMPONENT H**

Awareness education for students.

*Food allergy awareness education should be a part of a district’s health education curriculum. Consider incorporating lessons into family and consumer sciences, science, health, and/or physical education courses. Lessons on food allergies should emphasize:*

<b>Elements</b>	<b>Implemented</b>	<b>Not Implemented</b>	<b>Notes: Specify what is needed of this element to be included and/or implemented</b>
1. Support for classmates with chronic health conditions, such as food allergy.			
2. Bullying prevention, including reporting any harassment, hazing, or bullying to appropriate personal, and consequences for bullying.			
3. Knowledge of potential allergens and signs, symptoms, and potential of a severe or life-threatening reaction.			
4. Differences between severe or life-threatening food allergy and food intolerance.			
5. Emergency response actions.			
6. Developmentally-appropriate self-management of food allergy.			

Elements	Implemented	Not Implemented	Notes: Specify what is needed of this element to be included and/or implemented
7. Importance of following health and wellness policies and guidelines such as hand washing, food sharing, allergenic safe zones, and student conduct.			

**ESSENTIAL COMPONENT I**

Awareness education and resources for parents/guardians/caregivers.

*To increase understanding of the special needs of students with food allergies, parental education should be provided by qualified personnel, such as the registered nurse or designee, or an appropriate licensed healthcare provider. As feasible, in-person education is desirable, but written communications can also be effective. Parents/Guardians of a food allergic student might provide useful information and support in addition to that provided by qualified personnel.*

Parent/Guardian/Caregiver education and resources should foster:

- Trusting and collaborative relationships among district/school personnel, families, and community members, particularly licensed healthcare providers.
- Clear communication channels between parents/guardians/caregivers and the school system.
- Recognition and respect for the needs of both individuals and the larger student population.
- Parent/Guardian/Caregiver responsibility for educating their children about the seriousness of food allergies and how to be supportive of fellow students with food allergies.
- Realistic expectations and commitments about how food allergies can be managed in school settings.
- Knowledge of district/school policies, procedures, and plans for managing students with chronic health conditions (including food allergy and promoting their safety through all-hazard response plans and no-bullying policies).

Elements	Implemented	Not Implemented	Notes: Specify what is needed of this element to be included and/or implemented
1. Basic information associated with food allergy and anaphylaxis.			

<b>Elements</b>	<b>Implemented</b>	<b>Not Implemented</b>	<b>Notes: Specify what is needed of this element to be included and/or implemented</b>
2. District/School policies and procedures for managing students with food allergies.			
3. Parental responsibility to provide information and medications for their child.			
4. Access to informational resources on food allergy for credible resources.			
5. Restrictions to reduce the presence of foods and non-food items in classrooms that have a student with a food allergy.			

**ESSENTIAL COMPONENT J**

Monitoring and Evaluation.

*Food allergy policy and practices should be reviewed and updated at least annually to:*

<b>Elements</b>	<b>Implemented</b>	<b>Not Implemented</b>	<b>Notes: Specify what is needed of this element to be included and/or implemented</b>
1. Collect and review data on when and where medication was used and the impact on the affected individual.			
2. Incorporate lessons learned by food allergy management teams.			



<b>Elements</b>	<b>Implemented</b>	<b>Not Implemented</b>	<b>Notes: Specify what is needed of this element to be included and/or implemented</b>
3. Align with current science on food allergies.			
4. Comply with current state and federal legislation, recommendations, and/or guidelines.			
5. Verify that health records submitted by parents/guardians and licensed healthcare providers are current.			
6. Determine whether the appropriate personnel received allergy awareness training and are adequately informed, competent, and confident in performing assigned responsibilities.			

**OTHER IMPORTANT DETAILS:**

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Checklist completed on \_\_\_\_\_  
(date)

**NAMES OF TEAM MEMBERS COMPLETING CHECKLIST:**

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**RESOURCES OR ADDITIONAL ASSISTANCE NEEDED TO IMPROVE FOOD ALLERGY POLICY AND PRACTICE:**

1.

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3.

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4.

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5.

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**NEXT STEPS:**

1.

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2.

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3.

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4.

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5.

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ADMINISTRATIVE REGULATION

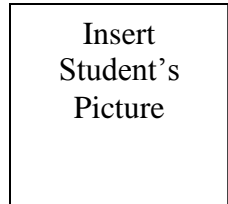
APPROVED: January 13, 2015

REVISED:

# CENTENNIAL SCHOOL DISTRICT

## 209.1-AR-1. EMERGENCY CARE PLAN (ECP)

### Emergency Care Plan



Name: \_\_\_\_\_ DOB: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

KNOWN ALLERGIES: \_\_\_\_\_

\_\_\_\_\_

#### COMMON SIGNS OF AN ALLERGIC REACTION (This is not an exclusive list of symptoms)

- MOUTH Itching, tingling, swelling of the lips, tongue, or mouth
- THROAT Itching and/or a sense of tightness in the throat, hoarseness, hacking cough
- SKIN Hives, itchy rash, swelling about the face or extremities
- GI Nausea, vomiting, abdominal cramps, diarrhea
- LUNGS Shortness of breath, repetitive coughing, wheezing
- HEART "Thready" pulse, dizziness or fainting

DURING AN ALLERGIC REACTION, HIS/HER TYPICAL SYMPTOMS ARE:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

NOTE: Different symptoms may occur with any reaction and severity of symptoms can change rapidly. A high level of suspicion needs to be maintained for any symptoms exhibited by a student with food allergies. **ACT QUICKLY!!**

IF INGESTION IS SUSPECTED AND/OR SYMPTOMS ARE PRESENT, **IMMEDIATELY** DO THE FOLLOWING:

1. TREATMENT

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2. CALL 911 & CERTIFIED SCHOOL NURSE

3. CONTACT PARENT/GUARDIAN/DESIGNEE

Parent/Guardian Emergency Contact: \_\_\_\_\_

Telephone (h) : \_\_\_\_\_ (w): \_\_\_\_\_ (cell): \_\_\_\_\_

Parent/Guardian Emergency Contact: \_\_\_\_\_

Telephone (h) : \_\_\_\_\_ (w): \_\_\_\_\_ (cell): \_\_\_\_\_

Emergency Contact (if Parent/Guardian not available)/Relationship/Telephone Number:

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Healthcare Provider/Telephone: \_\_\_\_\_

Certified School Nurse Signature: \_\_\_\_\_ Date: \_\_\_\_\_