

## GARLAND INDEPENDENT SCHOOL DISTRICT

## **HEALTH SERVICES**

## Food Allergy Management Plan

DEFINITIONS	In accordance with state guidelines, and for the purposes of these procedures, the following definitions will apply:		
FOOD INTOLERANCE	An unpleasant reaction to a food that, unlike a food allergy, does not involve an immune system response or the release of hista- mine. Food intolerance is not life-threatening.		
ALLERGIC REACTION	An immune-mediated reaction to a protein. Allergic reactions are not normally harmful.		
SEVERE FOOD ALLERGY	An allergy that might cause an anaphylactic reaction.		
ANAPHYLACTIC REACTION	A serious allergic reaction that is rapid in onset and may cause death.		
FOOD ALLERGY MANAGEMENT PLAN (FAMP)	A plan developed and implemented by the District that includes general procedures to limit the risk posed to students with food al- lergies and specific procedures to address the care of students with a diagnosed food allergy who are at risk for anaphylaxis.		
FOOD ALLERGY ACTION PLAN (FAAP)	A personalized plan written by a health-care provider that specifies the delivery of accommodations and services needed by a student with a food allergy and emergency actions to be taken in the event of an allergic reaction.		
INDIVIDUALIZED HEALTH-CARE PLAN (IHP)	A plan written by a school nurse based on orders written by a health-care provider that details accommodations or nursing services to be provided to a student because of the student's medical condition.		
DISTRICT FOOD ALLERGY COORDINATOR	The Superintendent has designated the following staff person as the District food allergy coordinator for students:		
	Director of Health Services		
RESPONSIBILITIES	The District food allergy coordinator will:		
	<ol> <li>Coordinate the development and ensure implementation of the District's FAMP.</li> </ol>		
	2. Be responsible for disseminating applicable District policies, procedures, and the FAMP.		
	3. Develop, or assist in the development of, food allergy request, notice, and incident report forms, as well as District-approved forms for FAAPs, EAPs, and IHPs		
	4. Ensure that specific food allergy information is requested from parents and students of the District.		

- 5. Pursue ongoing, specialized training in the management of food allergies in the school setting.
- 6. Ensure specialized training is received by any other employees responsible for development, implementation, and monitoring of the District's FAMP.
- 7. Provide general food allergy awareness training to school nurses and other district employees as needed. [See TRAIN-ING, below]
- 8. Develop general strategies for reducing exposure to common food allergens at District facilities and activities. [See ENVI-RONMENTAL CONTROLS, below]
- 9. Coordinate the composition, responsibilities, and procedures of campus food allergy management teams (FAMTs), if applicable.
- 10. Ensure that employees and other individuals supervising a student with a diagnosed severe food allergy receive training, as necessary, regarding implementation of the student's FAAP, EAP, IHP, and/or Section 504 plan, as applicable, and on specific strategies to reduce the risk of the student's exposure to the diagnosed allergen.
- 11. Develop procedures related to student self-administration of allergy medicine, including epinephrine auto-injectors prescribed to a student.
- 12. Coordinate with the District's record management officer to develop and implement procedures for record retention.
- 13. Collect and maintain incident reports after a student's anaphylactic reaction at school or at a school-related activity.
- 14. Review individual student plans and procedures periodically and after an anaphylactic reaction by a student at school or at a school-related activity.
- 15. Review the FAMP and related District policies and procedures annually, including any recommendations from campus FAMTs or school health advisory councils (SHAC).
- 16. Develop procedures for response to fatal reactions.

CAMPUS FOOD ALLERGY MANAGEMENT TEAMS (FAMT)	A campus food allergy management team will be created at each campus. At a minimum, the campus FAMT will include a campus principal and the school nurse.	
COMPOSITION	Members of the campus FAMT should include:	
	1. Principal or Assistant Principal (required)	
	2. School nurse (required)	

- 3. Counselor or 504 campus coordinator
- 4. Campus food services manager
- 5. A member of the custodial staff

Additional staff may be included when a student requires an individual care plan.

- RESPONSIBILITIES The campus FAMT will:
  - 1. Assist in the development, implementation, and monitoring of the District's FAMP.
  - 2. Be responsible for disseminating applicable District policies, procedures, and the FAMP.
  - 3. Ensure that specific food allergy information is requested from parents and students of the campus.
  - 4. Pursue ongoing, specialized training in the management of food allergies in the school setting.
  - 5. Ensure specialized training is received by any other employees responsible for development, implementation, and monitoring of the District's FAMP.
  - 6. Provide general food allergy awareness training to employees. [See TRAINING, below]
  - 7. Implement general strategies for reducing exposure to common food allergens at campus facilities and activities. [See ENVIRONMENTAL CONTROLS, below]
  - 8. Implement the FAAP, EAP, IHP, and/or Section 504 plans, as applicable, for a student with a diagnosed severe food allergy.
  - 9. Develop and implement specific strategies to reduce the risk of exposure to a diagnosed allergen for a student with a severe food allergy.
  - 10. Ensure that employees and other individuals supervising a student with a diagnosed severe food allergy receive training, as necessary, regarding implementation of the student's FAAP, EAP, IHP, and/or Section 504 plan, as applicable, and on specific strategies to reduce the risk of the student's exposure to the diagnosed allergen.
  - 11. Implement procedures related to a student's self-administration of allergy medicine, including epinephrine auto-injectors prescribed to the student.
  - 12. Implement procedures for record retention developed by the Director of Health Services and record management officer.
  - 13. Submit incident reports to the Director of Health Services after a student's anaphylactic reaction at school or at a school-related activity.

	14.	Review individual care plans and procedures periodically and after an anaphylactic reaction by a student at school or at a school-related activity.		
	15.	Review the FAMP and related District policies and procedures annually and provide input to the Director of Health Services.		
	16.	Implement, if necessary, procedures for response to fatal re- actions.		
FOOD ALLERGY MANAGEMENT PLAN GENERAL PROCEDURES TRAINING	The	District's FAMP will include the following components:		
	othe	District will provide specialized training to school nurses and r employees who are responsible for the development, imple- tation, and monitoring of the FAMP.		
	In addition, the District will provide general food allergy awareness training addressing:			
	1.	The FAMP and applicable District policies and procedures;		
	2.	General strategies to reduce the risk of exposure to common food allergens;		
	3.	Signs and symptoms of food allergies;		
	4.	Emergency response in the event of an anaphylactic reaction at school or at a school-related activity; and		
	5.	Bullying awareness and response.		
ENVIRONMENTAL CONTROLS	The District's general procedures to reduce the risk of exposure to common food allergens will include:			
	1.	Limiting, reducing, and/or eliminating food from classroom(s) and other learning environments used by students diagnosed with food allergies who are at risk for anaphylaxis.		
	2.	Implementing appropriate cleaning protocols in the school, with special attention to identified high-risk areas.		
	3.	Posting visual reminders promoting food allergy awareness.		
	4.	Educating students about not trading or sharing food, snacks, drinks, or utensils.		
	5.	Implementing hand washing protocols that emphasize the use of soap and water before and after meals.		
	6.	Training staff members in the administration of epinephrine auto-injectors if they act as monitors in the food service area.		
	7.	Implementing appropriate risk reduction strategies for high- risk areas in the school, including, but not limited to, the cafe-		

teria, classroom(s), and common areas; the school bus; extracurricular activities; field trips; school-sponsored activities; and before- and after-school activities.

- INFORMATION REQUEST The District will use the following methods for requesting specific allergy information from the parent of a student with a diagnosed food allergy [see FD]:
  - 1. Enrollment form
  - 2. Annual Student Information and Health Update
  - 3. Student Handbook
  - 4. District Website

REVIEW The FAMP and related District policies will be reviewed at least annually by the Director of Health Services with the assistance of Food Services, School Facilities Directors, and School Heath Advisory Council.

STUDENTS AT RISK FOR ANAPHYLAXIS IDENTIFICATION When a student is identified as having a severe food allergy, the school nurse will request that the parent provide the following documents completed by a physician or other licensed health-care provider:

- 1. An Emergency Allergy Action Plan including Physician orders for an Epipen if applicable.
- 2. If the parent is requesting meal substitutions or modifications, the Diet Modification Request Form.
- 3. The Authorization for Self-Administration of Asthma and/or Anaphylaxis Medication form, if applicable.
- 4. The Request for the Administration of Medication at School form, if applicable.
- 5. Additional information regarding the signs and symptoms of an anaphylactic reaction that the student might experience.

The school nurse will use documents completed by a physician or other licensed health-care provider to develop an IHP for the student, if necessary.

ELIGIBILITY FOR ACCOMMODATIONS UNDER FEDERAL LAW Upon receipt of the identification information above, a student with a disability who is thought to be in need of special education and related services will be referred for formal evaluation in accordance with law.

> A Section 504 committee will convene to determine if accommodations, including substitutions and other school support services, are necessary for the student to receive a free appropriate public education (FAPE) under Section 504 of the Rehabilitation Act. If the

	committee determines that the student needs these accommoda- tions to participate successfully and safely in the learning environ- ment, the committee will develop a Section 504 plan.			
	To the extent the use of epinephrine for a food allergy is not a re- quired service or support addressed in a student's Section 504 plan or individualized education program (IEP), a FAAP, EAP, or IHP does not constitute a service or accommodation under Section 504 or the Individuals with Disabilities Education Act (IDEA).			
POST- IDENTIFICATION	The school nurse will meet with the student and parent to review the documentation and to develop:			
	1.	Specific strategies to reduce the student's risk of exposure to the diagnosed allergen;		
	2.	Procedures related to the student's self-administration of his or her prescribed epinephrine auto-injector, if applicable;		
	3.	Procedures for when the student is not able to self-administer anaphylaxis medication; and		
	4.	Emergency procedures that will be implemented in the event of an anaphylactic reaction at school or at a school-related ac- tivity.		
NOTIFICATION AND TRAINING	As necessary and in compliance with the Family Educational Rights and Privacy Act (FERPA) and District policy, notification will be provided to staff, classmates, parents, volunteers, and substi- tutes of a student with a diagnosed severe food allergy, and the school nurse will provide training addressing:			
	1.	General and specific strategies to reduce the student's risk of exposure to the diagnosed allergen;		
	2.	Signs and symptoms of the food allergy; and		
	3.	Emergency response in the event of the student's anaphylac- tic reaction at school or at a school-related activity.		
REVIEW	and	Individual care plans and procedures will be reviewed periodically and after a student's anaphylactic reaction at school or at a school related activity.		
AFTER AN ANAPHYLACTIC REACTION REPORTS	After a student's anaphylactic reaction at school or at a school-re- lated activity, the school nurse should submit an incident report to the Director of Health Services identifying:			
	1.	If known, the source of allergen exposure;		
	2.	Emergency action taken, including whether an epinephrine auto-injector was used and whether the student or a staff member administered the epinephrine; and		
	3.	Any recommended changes to procedures		

- 1. Meet with school staff to dispel any rumors and review administrative procedures if necessary.
- If the allergic reaction is thought to be from food provided by the school food service, work with the school food service department to ascertain what potential food item was served/consumed and how to reduce risk in the cafeteria by reviewing food labels, minimizing cross-contamination, and other strategies.
- 3. Review the FAAP, EAP, and IHP as applicable, and any other elements of the care plan to address any changes needed or made by the student's health-care provider.
- 4. If an epinephrine auto-injector was used during the reaction, ensure that the parent/guardian replaces it with a new one.

If applicable, the Section 504 committee will convene to review the student's Section 504 plan.

STUDENT HEALTH PLANS FOR OTHER MEDICAL CONDITIONS If required for the student to remain in the school setting, an IHP will be implemented.

If applicable, a student's IHP must be coordinated with his or her Section 504 plan.