

## R 5331 MANAGEMENT OF LIFE-THREATENING ALLERGIES IN SCHOOLS (M)

### A. Definitions

1. Anaphylaxis - A serious allergic reaction that is rapid in onset and may cause death.
2. Epinephrine (adrenaline) - A drug that can be successfully utilized to counteract anaphylaxis.
3. Food Allergy - A group of disorders characterized by immunologic responses to specific food proteins. In the United States, the most likely common allergens in adults and children are cow's milk, eggs, peanuts, wheat, soy, fish, shellfish, and nuts.
4. Individualized Emergency Healthcare Plan (IEHP) - A personalized healthcare plan written by the certified school nurse that specifies the delivery of accommodations and services needed by a pupil in the event of an emergency.
5. Individualized Healthcare Plan (IHP) - A plan written by the certified school nurse that details accommodations and/or nursing services to be provided to a pupil because of the pupil's medical condition based on medical orders written by a health care provider in the pupil's medical home.
6. School-Sponsored Function - Any activity, event, or program occurring on or off school grounds, whether during or outside of regular school hours, that is organized and/or supported by the school.

### B. Policy and Regulation Development

1. Policy and Regulation 5331 address different allergens, varying ages and maturity levels of pupils, and the physical properties and organizational structures of schools in this school district. The components below were critical in developing Policy and Regulation 5331.
  - a. The school district nursing staff, in consultation with the school physician, if needed:



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- (1) Assessed the overall health needs of the pupil population at risk for anaphylaxis, particularly pupils with food allergies; and
  - (2) Assessed current and relevant policies and/or protocols regarding the care of pupils with life-threatening allergies and identified areas in need of development or improvement.
2. Policy and Regulation 5331 were developed using a multidisciplinary team that included various school district administrators, teachers, and support staff members.
3. Additional factors need to be regarded at the secondary school level in order to provide the best care for food-allergic teens. The multidisciplinary team should consider the factors below when developing Policy and Regulation 5331 as it pertains to food-allergic teens.
  - a. In Grades 7 through 12, students need to self-monitor foods.
  - b. Pupils move to different classrooms, frequently in larger buildings and campuses, presenting needs for updated avoidance strategies, epinephrine availability, and designated assistance.
  - c. Pupils may have access to vending machines.
  - d. Certain classes give rise to new avoidance issues, e.g., chemistry/biology labs, home economics/culinary class, etc.
  - e. The number of off-site school-sponsored functions increases, e.g., travel, sometimes to other States and foreign countries; athletic games and competitions, sometimes in other towns; dances; etc.
  - f. Risk-taking behaviors frequently accompany the independence of adolescent years.
  - g. N.J.S.A. 18A:40-12.6 provides for a delegate for the emergency administration of epinephrine even when a pupil is able to self-administer life-saving medication. Although teenage pupils will more than likely be permitted to carry and self-administer emergency medications, those pupils are not to be expected to have complete responsibility for the administration of epinephrine.



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A severe allergic reaction can completely incapacitate a pupil and inhibit the ability to self-administer emergency medication. Therefore, the school nurse or volunteer delegate shall be available during school and school-sponsored functions to administer epinephrine in an emergency in accordance with the provisions of N.J.S.A. 18A:40-12.5.e.(2).

4. The Principal and/or the school nurse will educate staff and the community regarding Policy and Regulation 5331; obtain feedback on the implementation and effectiveness of the Policy and Regulation; and annually review, evaluate, and update the Policy and Regulation, as needed or required by law.

### C. Prevention Measures

#### 1. Considerations for the Cafeteria

The Principal, in consultation with the school nurse, teaching staff members, food service staff members, and other appropriate staff members, will work to make the cafeteria environment as safe as possible for food-allergic pupils. This process includes making determinations about serving foods with known allergens and identifying steps that can be taken to reduce the chance of accidental exposure. The steps may include:

- a. Informing food service personnel on students with food allergies.
- b. Educating cafeteria monitors about food-allergy management and make them aware of the pupils who have life-threatening food allergies.
- c. Developing and implementing standard procedures for cleaning tables, chairs, and trays, particularly those designated as allergen-safe, after lunch periods using dedicated and disposable supplies to avoid cross contact.
- d. When possible, sharing ingredient/allergen information for food provided by the school to pupils and parent(s) or legal guardian(s).
- e. Cafeterias in Grades Pre-School through 6 must make available nut-free tables. Parents of allergic students will be asked to sign a



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form indicating whether their child must sit at a designated nut-free table.

### 2. Considerations for the Classroom

Provisions will be made to develop safeguards for the protection of food-allergic pupils in the classroom. The school nurse will work with the classroom teacher(s) so the teacher understands and is able to initiate the pupil's IEHP, as necessary.

- a. In an effort to maximize instructional time and create a more optimal learning environment, and in response to the presence of food-based allergies, no outside food is permitted to be shared in the classroom.
- b. As part of the district-wide initiative to discourage the use of food as a reward, both teachers and parent/guardians are encouraged to recognize and celebrate students' birthdays by methods that do not involve food (e.g., craft).
- c. All classrooms are nut-free (\*nuts include peanuts, tree nuts and nut by-products). Nut products may be kept in a student's backpack/lunchbox for later consumption in the lunchroom ONLY.
- d. All food that is brought to school must be consumed ONLY by the student who brought it in. School, lunchroom and classroom rules must list, "No Sharing of Food." This rule should be reinforced often with students.
- e. Children should be encouraged to bring in a healthy snack.
- f. If a student does not have a snack or if they cannot eat their snack because it contains nuts, the staff member cannot give them a snack.
- g. Conduct training for teachers, aides, and pupils about food allergies.



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- h. Develop and implement a procedure that will alert substitute teachers to the presence of any pupils with food allergies and any accompanying instructions.
- i. Encourage pupils to wash hands before and after eating.
- j. Develop and implement standard procedures for cleaning desks, tables, and the general classroom area.

### 3. General Considerations for the School Environment

The Principal, in consultation with the school nurse, teaching staff members, food service staff members, and other appropriate staff members, will work to make the school environment as safe as possible for the food-allergic pupil to include:

- a. Developing and implementing cleaning procedures for common areas (i.e., libraries, computer labs, music and art rooms, hallways, etc.).
- b. Developing protocols for appropriate cleaning methods following events held at the school, which involve food.

### 4. Field Trips and Other School Functions

N.J.S.A. 18A:40-12.6 requires a nurse or delegate to be available during school and school-sponsored functions in the event of anaphylaxis. Pupils with food allergies should participate in all school activities and will not be excluded based on their condition. The appropriate school staff member(s) should:

- a. All field trip application forms must be reviewed and signed by the school nurse 4 weeks prior to the trip.
- b. Communicate (with parent(s) or legal guardian(s) permission) relevant aspects of the IEHP to staff, as appropriate, for field trips, school-sponsored functions, and before- and after-school programs.



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- c. Encourage long-term planning of field trips in order to ensure that food-allergic pupils receive needed services while away from school.
- d. Evaluate appropriateness of trips when considering the needs of pupils e.g., a trip to a dairy farm should not be scheduled for a class with a milk-allergic pupil.
- e. Encourage, but do not require, parent(s) or legal guardian(s) of food-allergic pupils to accompany their child on school trips.
- f. Implement the district's procedure for the emergency administration of medications.
- g. Implement the district's procedure for emergency staff communications on field trips.
- h. There will be a designated bus(es) for students with any life-threatening medical condition.

#### 5. Bus Transportation

The district administrative staff and transportation personnel will consider the needs of pupils with life-threatening allergies while being transported to and from school and to school-sponsored activities. The appropriate school staff member(s) should:

- a. Food is prohibited on buses.
- b. Advise bus drivers of the pupils that have food allergies, symptoms associated with food-allergic reactions, and how to respond appropriately.
- c. Assess the emergency communications systems on buses.
- d. Consider assigned bus seating i.e., pupils with food allergies can sit at the front of the bus or can be paired with a "bus buddy."



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#### 6. Preparing for an Emergency

The Principal and school nurse will establish emergency protocols and procedures in advance of an emergency. These protocols and procedures should:

- a. Provide training for school personnel about life-threatening allergic conditions.
- b. Create a list of volunteer delegates trained by the nurse in the administration of epinephrine, and disseminate the list appropriately.
- c. Ensure that epinephrine is quickly and readily accessible in the event of an emergency. If appropriate, maintain a backup supply of the medication.
- d. 911 is called in the event of administration of epinephrine.
- e. Ensure access to epinephrine when developing plans for fire drills, lockdown drills, etc.
- f. Ensure that reliable communication devices are available in the event of an emergency.
- g. Adhere to Occupational Safety and Health Administration (*OSHA*) and *Universal Precautions* Guidelines for disposal of epinephrine auto-injectors after use.

#### 7. Sensitivity and Bullying

A food-allergic pupil may become victim to threats of bullying related to his/her condition. N.J.A.C. 6A:16-7.9 requires each Board of Education to develop, adopt, and implement a policy prohibiting harassment, intimidation, or bullying on school grounds, including on a school bus or at a school-sponsored function, pursuant to N.J.S.A. 18A:37-15. The appropriate school staff member(s) should:



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- a. Remind pupils and staff that bullying or teasing food-allergic pupils will not be tolerated and violators should be disciplined appropriately.
- b. Offer professional development for faculty and staff regarding confidentiality to prevent open discussion about the health of specific pupils.
- c. Discourage needless labeling of food-allergic pupils in front of others. A food-allergic pupil should not be referred to as “the peanut kid,” “the bee kid” or any other name related to the pupil’s condition.

#### D. Roles and Responsibilities for Managing Food Allergies

The risk of accidental exposure to foods can be reduced in the school setting if schools, pupils, parent(s) or legal guardian(s), and physicians work together to minimize risks of exposure to allergens and provide a safe educational environment for food-allergic pupils.

##### 1. Family’s Role

- a. Notify the school of the pupil’s allergies.
- b. Work with the school team to develop a plan that accommodates the pupil’s needs throughout the school, including the classroom, the cafeteria, during school-sponsored activities, and on the school bus, as well as an IEHP.
- c. Provide written medical documentation, instructions, and medications as directed by a physician, using the Montgomery Township School District Food Allergy Action Plan as a guide. Include a photo of the child on written form by the first day of school attendance of each school year.
- d. Provide properly labeled medications and promptly replace medications after use or upon expiration by the first day of school attendance of each school year. All forms expire on the last day of the school year.





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- e. Educate the 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 an adult they may be having an allergy-related problem; and how to read food labels (age appropriate).
- g. Provide current emergency contact information and update the Parent Resource Account in Genesis regularly.

### 2. School's Role

- a. Review the health records submitted by parent(s) or legal guardian(s) and physicians.
- b. Assure that all staff who interact with the pupil on a regular basis understand food allergies, can recognize symptoms, know what to do in an emergency, and work with other school staff to eliminate the use of food allergens in the allergic pupil's meals, educational tools, and arts and crafts projects.
- c. Coordinate with the school nurse to ensure medications are appropriately stored and ensure an emergency kit is available that contains a physician's standing order for epinephrine. Epinephrine should be kept in a secure but unlocked location that is easily accessible to delegated school personnel.
- d. Pupils who are permitted to self-administer should be permitted to carry their own epinephrine in accordance with State regulations and district policy.
- e. Designate school personnel who volunteer to administer epinephrine in an emergency.
- f. Be prepared to handle a reaction and ensure there is a staff member available who is properly trained to administer medications during the school day, regardless of time or location.
- g. Work with the transportation administrator to insure that school bus drivers receive training that includes symptom awareness and what to do if a reaction occurs and assess the means by which a



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bus driver can communicate during an emergency, including proper devices and equipment.

- h. Discuss field trips with the family of the food-allergic child to decide appropriate strategies for managing the food allergy.
  - i. Follow Federal and/or State laws and regulations regarding sharing medical information about the pupil.
  - j. Take threats or harassment against an allergic child seriously.
3. Pupil's Role
- a. Pupils should not trade food with others.
  - b. Pupils should not eat anything with unknown ingredients or known to contain any allergens.
  - c. Pupils should be proactive in the care and management of their food allergies and reactions based on their developmental level.
  - d. Pupils should notify an adult immediately if they eat something they believe may contain the food to which they are allergic.

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