

NORTH SYRACUSE CENTRAL SCHOOL DISTRICT

POLICY 8101.2

BOARD OF EDUCATION POLICY STATEMENT

SUBJECT: Student Food Allergies

POLICY: _____

EFFECTIVE DATE: _____

DATE OF ORIGINAL POLICY: _____

DATE OF NEXT REVIEW _____

REPLACES POLICY NO.: _____

DATED: _____

I. PHILOSOPHY

The North Syracuse Central School District is committed to providing a safe environment for students. The NSCSD Board of Education understands the increasing prevalence of life threatening allergies among school populations. Recognizing that the risk of accidental exposure to food allergens can be reduced in the school setting, NSCSD is committed to working in cooperation with parents, students, and physicians, to minimize risks and provide a safe educational environment for all students. The focus of food allergy management shall be on prevention, education, awareness, communication and emergency response. While it is unrealistic to guarantee an allergen-free environment, this policy aims to minimize the risk by implementing procedures to prepare for and reduce the amount of life-threatening allergic reactions in our schools.

II. POLICY:

Under the Allergy and Anaphylaxis Management Act of 2007 (NY Public Health Law Section 2500-h) the Commissioner of the New York State Department of Health and the Commissioner of the New York State Education Department developed procedures and guidelines to address anaphylaxis, which refers to a collection of symptoms affecting multiple systems in the body caused by a life-threatening allergic reaction, the most dangerous of which are breathing difficulties and a drop in blood pressure. After consideration of these guidance documents, NCS D has implemented this policy which will address:

- Information Collection Procedures and forms
- Responsibilities of parents/guardians, students, school administrators, school nurses, teachers, food service department, custodians, and transportation department, and other school employees
- School procedures for safeguarding allergic students
- Education and Training

III. AMPLIFYING INSTRUCTIONS AND GUIDELINES

The responsibility for developing and revising these procedures for implementing this policy shall reside with the Superintendent of Schools and/or his/her designee.

IV. DELEGATION OF AUTHORITY

The Superintendent, or his/her designee, has the responsibility for enforcing this Policy by communicating it to all relevant parties and by providing necessary instruction and guidelines to the appropriate administrators.

V. REPORTS

All necessary and/or required forms developed to implement this policy will be completed and forwarded to the appropriate administrators and school nurses. All forms will be available on the N drive.

VI. REVIEW

This policy will be reviewed every three years after acceptance, unless re-approved by the Board of Education. A yearly review of relevant legal implications will be conducted.

VII. LEGAL REFERENCES

Federal Public Law (PL 108.265 Section 204)
Center for Disease and Control (CDC)
Child Nutrition and WIC Reauthorization Act
NY Public Health Law Section 2500-h

VIII. SIGNATURE BLOCK

Reviewed and Approved
By Board Policy Committee

_____ _____
Chairperson Date

Reviewed and Adopted
By Board of Education

_____ _____
President Date

Received for Implementation

_____ _____
Superintendent Date

**NORTH SYRACUSE CENTRAL SCHOOL DISTRICT
STUDENT FOOD ALLERGY POLICY - 2010**

RESPONSIBILITIES OF THE PARENT/GUARDIAN OF A STUDENT WITH ALLERGIES

Each parent/guardian of a child with an allergy shall have the following expectations:

1. Teach your child to:
 - a. Recognize the first symptoms of an allergic reaction.
 - b. Communicate with school staff as soon as he/she feels a reaction is starting.
 - c. Carry his/her own epinephrine auto-injector when appropriate.
 - d. Consistently wear the medical alert bracelet if applicable.
 - e. Not share snacks, lunches, drinks or utensils.
 - f. Understand the importance of hand washing before and after eating.
 - g. Report teasing and/or bullying that may relate to the child's allergy.
2. Teach your child to take responsibility for his/her own safety. As children get older, teach them to:
 - a. Encourage self-advocacy of the seriousness of the allergy to adults and peers.
 - b. Communicate symptoms as soon as they appear to the school nurse and teacher.
 - c. Encourage education on label reading and ingredient safety.
 - d. Administer his/her own epinephrine auto-injector.
 - e. Develop awareness of their environments
3. Inform the school nurse of your child's allergies and health history prior to the opening of school (or as soon as possible after diagnosis). **All food allergies must be verified by documentation from physician or physician's designated licensed extender [Nurse Practitioner (NP) or Physician Assistant (PA), or Doctor of Osteopathy (DO)].**
4. Complete and submit all required medical documentation, instructions, and medications as directed by a physician using the Allergy Action Plan and Food Allergy Awareness forms. Include an updated photo of your child on the forms.
5. Provide the school with current cell phone, pager, etc., maintain updated emergency contact numbers and medical information.
6. Provide the school nurse with up-to-date emergency medications (including Epinephrine) so they can be placed in all required locations for the current school year. Medications must comply with the district medication policy of proper labeling and expiration. Replace medications after use or upon expiration.
7. Work with the school team collaboratively to develop the Individual Health Plan that accommodates your child's needs in the classroom, in the cafeteria, in after-care programs, during school-sponsored activities, and provide an **Allergy Action Plan**.
8. The Individual Health Plan should also promote increasing age-appropriate independence as the student grows and matures. In determining age-appropriate independence the student's level of autonomy and their ability to function autonomously is considered. A self-directed student must be able to:
 - Identify medication (color, shape)
 - Identify the purpose
 - Determine correct dosage (e.g. 1 pill)
 - Identify the time medication is to be taken.
 - Describe what would happen if medication was not taken.
 - Refuse to take medication if the student has any concerns, re: its inappropriateness.

9. Consider providing a medical alert bracelet and/or necklace for your child.
10. Complete appropriate forms requested by Transportation or other appropriate departments and/or programs.
11. If your child is attending a school activity and/or participating in an extracurricular activity, provide appropriate medications (Benadryl, Epi-Pen) and a copy of your child's Allergy Action Plan to district personnel in charge.
12. For students who require an alternative menu under their 504 Plan or IEP, submit a physician's note indicating dietary restrictions to Food Service. The parent must review the menu with the child.
13. Provide "safe snacks" for your student's classroom so there is always something your child can choose from during an unplanned special event.
14. Encourage your child to wash hands before and after handling food.
15. Inform the school of any changes in the child's allergy status and complete a Food Allergy Change of Status Form which includes a physician's statement.

RESPONSIBILITIES AND/OR EXPECTATIONS OF STUDENT

Each student with a Life-Threatening Allergy shall be expected to:

1. Develop a relationship with the school nurse to assist in identifying issues related to the management of the allergy in the school.
2. Use proper hand washing before and after eating and throughout the school day.
3. Avoid sharing or trading of foods or eating utensils with others. Take responsibility for avoiding food allergens.
4. Not eat anything with unknown ingredients or known to contain any allergen.
5. Avoid putting anything in mouth such as writing utensils, fingers, or other foreign object.
6. Be proactive in the care and management of their allergies and reactions based on their developmental level. Learn to recognize personal symptoms of an allergic reaction.
7. Notify an adult immediately if they eat something they believe may contain the food to which they are allergic.
8. Notify an adult if they are being picked on or threatened by other students as it relates to their food allergy.
9. Keep emergency epinephrine with the student, in the nurse's office, in the classroom or in coaches' first aid box if deemed necessary. When appropriate, students are encouraged to carry their Epi-pen in accordance with school policy and guidelines. If the student is authorized to carry the emergency medication with them at all times, he/she will demonstrate responsibility of this practice by completing the skills checklist with the school nurse (found in the appendix within the Epinephrine Self-Administration Authorization packet for Anaphylaxis).
10. Develop an awareness of their environment.
11. Know the overall Individual Healthcare Plan and understand the responsibilities of the plan.
12. Develop greater independence to keep themselves safe from anaphylactic reactions.

RESPONSIBILITIES OF SCHOOL ADMINISTRATORS

The North Syracuse Central School District Administrators will:

1. Follow all applicable federal laws, including ADA, Section 504, and FERPA, as well as all state laws and district policies/guidelines that may apply.
2. Have available the appropriate allergy forms for the parent and explain that the required forms must be returned in a timely fashion to ensure a safe environment.
3. Provide appropriate staff with opportunities for volunteer in-service training and education on reducing allergy risks, identifying allergy symptoms, implementing emergency procedures and administering epinephrine.
4. Ensure the Individual Health Plan for Accommodations is available in the nurse's office and in a student's homeroom at the elementary levels.
5. Instruct and reinforce with custodial personnel the development of cleaning protocol to ensure that the threat of allergens is minimized.
6. Direct school staff to discuss students' health issues in confidential settings and be mindful not to isolate the allergic student or label them in front of others.

RESPONSIBILITIES OF SCHOOL NURSES

The school nurse is the primary coordinator of each student's life-threatening allergy plan. Each school nurse will have the following responsibilities:

1. Follow all applicable federal laws, including ADA, Section 504, and FERPA, as well as all state laws and district policies/guidelines that may apply.
2. The HIPAA Compliant Authorization for Exchange of Health & Education Information will be presented to parents for signature to provide needed communication between the supervising physician and school for effective implementation of the plan.
3. Maintain updated AAP/Individual Health Plan for Accommodations in the nurse's office, in the classroom when appropriate, and with Epinephrine that is carried by identified students. The emergency action plans will also travel with the Epinephrine on school-sponsored field trips.
4. Collaborate with school administrators to provide annual volunteer in-service education for staff that will address symptoms of life-threatening allergic reactions, risk reduction and emergency procedures, and the risks of a biphasic reaction by a student who has an allergic reaction.
5. Familiarize teachers with the Individual Health Plan for Accommodations of their students and any other staff member who has contact with student on need-to-know basis.
6. Inform the school principal and parent/guardian if any student experiences an allergic reaction that has not been previously diagnosed.
7. In the event the nurse is not in the building, person supervising event is responsible for making sure 911 is called. Plans for a nursing sub are in place in the event the nurse is not in the building.
8. Collaborate with classroom staff to determine whether a letter needs to be sent to all parent(s)/guardian(s) of students in class with an individual with a severe allergy in the class. The student's name should not be shared in the letter to protect the student's right to confidentiality.

9. Notify staff of self directed students carrying antihistamines and Epinephrine. Staff will call 911 in all instances of Epinephrine administration, and request advanced life support.
10. Ensure that medications are appropriately stored and emergency kits are maintained in appropriate locations.
11. Work with the parent/guardian, healthcare provider, and other staff to develop an Individual Healthcare Plan for students with known allergies, as appropriate.

RESPONSIBILITIES OF TEACHERS/TEACHER ASSISTANTS/TEACHER AIDES/THERAPISTS

Each teacher shall have the following responsibilities:

1. Knowledge of the signs and symptoms of severe allergic reaction as provided in the student's health care plan. *If an exposure occurs, the teacher will contact the school nurse, and/or call 911 for emergency services.*
2. Review the Individual Health Plan for Accommodations with the nurse of any student in your classroom with life-threatening allergies along with relevant staff members.
3. Establish a procedure regarding the management of food in the classroom.
4. Collaborate with administration, nurse, and parents to send out letters to all parent(s)/guardian(s) of students in a class with an individual with a severe allergy.
5. Reinforce appropriate classroom hygiene practices/hand washing before and after eating.
6. Respond immediately to reports of students being teased or bullied about their food allergies.
7. Communicate written notification of student allergy or allergies to substitute teachers, teacher aides, therapists and volunteers on a need to know basis.

RESPONSIBILITIES OF FOOD SERVICE PERSONNEL

1. Provide in-service training to food service employees regarding safe food handling practices to avoid cross contamination with potential food allergens.
2. Food service employees will wear non-latex gloves. Gloved hands will be changed during extended use to avoid cross contamination with potential food allergens.
3. Maintain a list of students with food allergies with a photo of the student whenever possible. (Not for public viewing.)
4. Maintain knowledge of which food products contain allergens.
5. Set up procedures for cafeteria regarding students with food allergies, including entering student's allergy into computerized database. Information will remain confidential and be shared on a need-to-know basis in compliance with federal privacy regulations.
6. Respond appropriately to all concerns from any student with an allergy, including allowing student to see school nurse if complaining of any potential symptoms.

RESPONSIBILITIES OF CUSTODIAL SERVICES

The custodial service department, under the direction of the Building Principal will:

1. Use a separate cloth for cleaning purposes, if an allergen-safe zone has been established per Individual Health Plan (IHP), 504 Plan or IEP.
2. Where possible, avoid cross contamination of foods by cleaning surfaces with soap and water before and after students eat in the cafeteria and other school rooms.

RESPONSIBILITIES OF THE TRANSPORTATION DEPARTMENT

All school bus drivers shall be informed when he/she is transporting a child with a Life-Threatening Allergy. The transportation department will:

1. Encourage policy of no food eating on the bus except for those medically documented needs, i.e., diabetics. In cases of medically documented needs, those students must bring allergen safe foods for eating on the bus.
2. Upon parent request, communicate to discuss a plan for designated seating area for students with severe food allergies.
3. Direct bus drivers not to hand out food, even on special occasions due to risk of allergic reactions.
4. Provide school bus drivers who are transporting students with known life-threatening allergies with training on symptom awareness and steps to take if an allergic reaction occurs. Substitute bus drivers should be informed when they are transporting students with life-threatening allergies.

INFORMATION COLLECTION PROCEDURES

The initial collection of food allergy or intolerance data will be initiated by the nurses who will send the Allergy Action Plan form and Food Allergy Awareness form home with students at the beginning of the school year. It is expected that all forms will be returned within 10 business days. It is important to obtain documentation for reported food allergy or intolerance whenever possible. In cases where a physician's note does not accompany a reported food allergy or intolerance, the District Dietician will send the Food Allergy Change of Status form to parent and conduct appropriate follow up. However, in cases where a physician's note is not obtained immediately or with follow-up, it is in the best interest of the district to acknowledge and respond in a manner which recognizes the food allergy or intolerance.

CARE PLAN OPTIONS AND PROCEDURES FOR SAFEGUARDING ALLERGIC STUDENTS

There are a variety of student accommodation and care plans that are appropriate to use for students in the school setting who may experience allergic food reactions. The most common plans include:

1. Individual Student Emergency Allergy Care Plan

The Allergy Care Plan stays in the nurse's office along with any medication(s). On any out-of-building activity this care plan must accompany any medication related to a food allergy or intolerance and will be given to the district representative in charge of the activity.

2. Individual Healthcare Plan for Accommodations (IHP) – This is a document which may be developed by the nursing staff in collaboration with parents and other school staff to identify the plan of care outlined by the school nurse in response to a diagnosis by a student's healthcare provider. This document shall be maintained in the nurse's office. The school nurse will determine which students would benefit from having an IHP.
3. Individualized Education Plan (IEP) – This plan may be developed pursuant to the requirements of Section 504 of the Rehabilitation Act of 1973 by appropriate school personnel in accordance with federal laws. When an IEP includes a food allergy or directive, a copy must be sent to the appropriate school nurse and Food Service Director by Director of Special Education or designee.
4. Section 504 Plan – This plan is developed by the District's Committee on Special Education and the parent/guardian to meet the unique educational needs of a student with a disability. When a 504 Plan includes a directive regarding food, a copy must be sent to the appropriate school nurse and Food Service Director by Director of Special Education or designee.

Allergy Action Plan

Student's Name _____ D.O.B. _____ Teacher _____

Place
Child's
Picture
Here

ALLERGY TO: _____

Asthmatic Yes* No *Higher risk for severe reaction

◆ STEP 1: TREATMENT ◆

Symptoms:

- If a food allergen has been ingested, but no symptoms:
- Mouth Itching, tingling, or swelling of lips, tongue, mouth
- Skin Hives, itchy rash, swelling of the face or extremities
- Gut Nausea, abdominal cramps, vomiting, diarrhea
- Throat† Tightening of throat, hoarseness, hacking cough
- Lung† Shortness of breath, repetitive coughing, wheezing
- Heart† Thready pulse, low blood pressure, fainting, pale, blueness
- Other† _____
- If reaction is progressing (several of the above areas affected), give

Give Checked Medication**:

** (To be determined by physician authorizing treatment)

- | | |
|--------------------------------------|--|
| <input type="checkbox"/> Epinephrine | <input type="checkbox"/> Antihistamine |
| <input type="checkbox"/> Epinephrine | <input type="checkbox"/> Antihistamine |
| <input type="checkbox"/> Epinephrine | <input type="checkbox"/> Antihistamine |
| <input type="checkbox"/> Epinephrine | <input type="checkbox"/> Antihistamine |
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| <input type="checkbox"/> Epinephrine | <input type="checkbox"/> Antihistamine |
| <input type="checkbox"/> Epinephrine | <input type="checkbox"/> Antihistamine |

The severity of symptoms can quickly change. † Potentially life-threatening.

DOSAGE

Epinephrine: inject intramuscularly (circle one) EpiPen® EpiPen® Jr. Twinject™ 0.3 mg Twinject™ 0.15 mg (see reverse side for instructions) **PERMISSION TO CARRY & SELF ADMINISTER: YES** ___ **NO** ___

Antihistamine: give _____ medication/dose/route

Other: give _____ medication/dose/route

IMPORTANT: Asthma inhalers and/or antihistamines cannot be depended on to replace epinephrine in anaphylaxis.

◆ STEP 2 TREATMENT ◆

1. Call 911 (or Rescue Squad: _____). State that an allergic reaction has been treated, and additional epinephrine may be needed.

2. Dr. _____ Phone Number: _____ at _____

3. Parents _____ Phone Number(s) _____

4. Emergency contacts: _____ Name/Relationship

a. _____ Phone Number(s) 1.) _____ 2.) _____

b. _____ 1.) _____ 2.) _____

EVEN IF PARENT/GUARDIAN CANNOT BE REACHED, DO NOT HESITATE TO MEDICATE OR TAKE CHILD TO MEDICAL FACILITY!

Parent/Guardian Signature _____ Date _____

Doctor's Signature _____ Date _____

(Required)

OVER PLEASE →→

NORTH SYRACUSE CENTRAL SCHOOL DISTRICT

FOOD ALLERGY AWARENESS INFORMATION

Student Name: _____ School: _____ D.O.B. _____

- No known food allergies (stop) Known food allergies (continue below)

What age was the student diagnosed with an allergy? _____

Specific Food Allergy(ies) _____

Pure food, list allergy(ies): _____

As an ingredient, list allergy(ies): _____

Reaction Signs: _____

Is medication required? _____

Is antihistamine in Nurse's Office? _____

Is Epinephrine (Epi-pen) in Nurse's Office? _____

Food Intolerance(s): _____

Pure food, list food intolerance(s): _____

As an ingredient, list specific ingredient(s): _____

Reaction Signs: _____

- If lactose intolerant is it:
- milk
 - yogurt
 - ice cream
 - cheese
 - all types of food or beverages that contain milk

Has the student been hospitalized as a result of an allergic reaction? Yes No

If student has a **peanut or tree-nut** allergy: can student eat anything manufactured in a plant that processes items with peanuts and tree-nuts? Yes No

A physician's note must be submitted to the school nurse, if you are reporting a **food allergy/intolerance for the first time or there has been a change in your child's allergy/intolerance status**. A physician's note can be faxed or submitted in person to appropriate school.

Please read the school's Student Food Allergies Policy (8101.2) which is located on the district website at www.nscsd.org.

Signature indicates agreement to allow the NSCSD to share information on this document with appropriate personnel.

Parent Signature _____ Date _____

To be filled out by Nurse: Physician note on file in student's health record.

NORTH SYRACUSE CENTRAL SCHOOL DISTRICT

FOOD ALLERGY CHANGE OF STATUS FORM

It has been brought to the district's attention that you have a child who has been identified with a food allergy or intolerance. The District's Student Food Allergy Policy (8101.2) requests that a physician's note or this form be completed when a food allergy or intolerance is reported for the first time or there has been a change in your child's allergy or intolerance status.

Student Name _____

School Student Attends _____

Parent/Guardian Name _____

Phone Number _____

Address _____

The following food allergy/intolerance is being reported for the first time: _____

My child is no longer allergic to or no longer has a food intolerance to: _____

Signature indicates agreement to allow the North Syracuse Central School District to share information on this document with appropriate personnel.

Parent Signature _____ Date _____

Physician's Signature _____ Date _____

Please return or fax to your child's school nurse. Please note that the school nurse will share this information with Food Service upon receipt.

If you have any questions, please contact the Director of Food Service at 218-2175.



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Jerome F. Melvin, Ph.D.
Superintendent of Schools

Stanley C. Finkle
Assistant Superintendent for
Instruction

Wayne D. Bleau
Assistant Superintendent for
Management

Dear Parent/Guardian:

We are committed to providing a safe and welcoming environment for all children in our school.

THERE IS A STUDENT IN YOUR CHILD'S CLASSROOM WHO HAS A SEVERE PEANUT/TREE NUT ALLERGY. While many allergic reactions can be mild, most children with peanut and other nut allergies experience serious symptoms after eating, touching or smelling peanuts or any nut products (especially peanut butter). Please **do not** send items containing peanut/tree nuts for distribution.

Thank you for your cooperation.

Sincerely,

School Nurse

Input:	
Document 1	PowerDocs://SYRNY1/1781307/1
Document 2	PowerDocs://SYRNY1/1781307/2
Rendering set	BSK Default

Legend:	
<u>Insertion</u>	
Deletion	
Moved from	
<u>Moved to</u>	
Style change	
Format change	
Moved deletion	
Inserted cell	
Deleted cell	
Moved cell	
Split/Merged cell	
Padding cell	

Statistics:	
	Count
Insertions	65
Deletions	83
Moved from	1
Moved to	1
Style change	0
Format changed	0
Total changes	150

Redline options:	
	Status
Redline Statistics at End of Document	ON
Include Redline Comparison Summary	OFF
Show Line Numbering	OFF
Show Change Numbers	OFF
Show Change Bars On Left	ON
Show Hidden Text	OFF
Detect List Numbering Changes	ON
Compare Headers/Footers	ON
Compare Footnotes	ON
Display DeltaView Footers	OFF
Ignore Embedded Objects/Images	OFF
Compare at Character Level	OFF
Compare Numbers at Character Level	OFF

Show Moved Deletions	OFF
Show Changes to Spaces	OFF
Show Paragraph Changes	OFF
Ignore Case Changes	OFF
Ignore Textboxes	SET ON
Ignore Field Codes	OFF
Ignore Tables	OFF