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**Anaphylaxis**

Anaphylaxis is a sudden, severe, potentially fatal allergic reaction to an allergen. The most common severe food allergens are peanuts, tree nuts, eggs, milk, wheat, soy, fish, and shellfish. Medications and latex can also cause anaphylaxis. Symptoms may start within a few seconds or up to 2 hours after exposure and each reaction may be different. Anaphylaxis may start with mild symptoms and rapidly progress and become life threatening.Usual symptoms include itching in or around the mouth, hives, cramps, nausea, repetitive vomiting, diarrhea, difficulty swallowing, swelling of the face/tongue/lips, coughing, shortness of breath, wheezing, lightheadedness, anxiety, increased heart rate. Anaphylaxis can be fatal if not recognized and treated rapidly. There is no cure for this type of reaction. The only way to avoid a reaction is strict avoidance of the offending allergen.

**Purpose**

The purpose of this policy is to define the standards of care relating to the students of SCA with severe food allergies, to implement techniques to reduce food allergy exposure, and to outline training requirements of teachers and staff. Guidelines have been put in place for the school, parents/guardians, allergic student, teachers/staff, and school nurse.

**Standards of Care for the student with a severe food allergy**

* A parent questionnaire will be sent home for completion at the start of the academic year and updated annually. Completed forms will be returned to the school nurse.
* For students with severe food allergies in danger of anaphylaxis, a Food Allergy Action Plan (emergency plan), signed by a physician, must be provided to the school nurse and updated annually. The parents must also provide, if prescribed, an epinephrine auto-injector to be kept in the school clinic. If more than one is provided, arrangements can be made to have the second epinephrine auto-injector kept with the student’s teacher.
* If physician and parent sign permission for the student to self-carry and administer their epinephrine auto-injector, the student must demonstrate competency to the school nurse.
* If an allergic reaction should occur, the Food Allergy Action Plan will be followed and the epinephrine auto-injector will be administered immediatelyby the nurse or trained school personnel if indicated.
* **EMS will be activated anytime an epinephrine auto-injector is administered in a school setting.**
* After contacting 911, the parent*/*guardian or emergency contact person will be contacted. The student will not be left alone and will be monitored for returning signs of anaphylaxis. They will be transported to the emergency room for evaluation and further treatment if necessary.

1. Parent/Guardian Responsibilities/Guidelines:
   1. Notify the school nurse of the food allergy and any changes that have occurred
   2. Complete the severe allergy questionnaire
   3. Provide a Food Allergy Action Plan signed by a physician, epinephrine auto-injector, and other medications needed per action plan
   4. Complete cafeteria seating plan form
   5. Educate your child on safe and unsafe foods, reading food labels (age appropriate), asking an adult for help when they are in doubt, and how and when to tell an adult if they are experiencing a reaction
   6. Inform supervising adults of your child’s food allergies, special needs, and treatment plans when they are participating in activities before and after school including extended daycare on campus, extracurricular activities, trips, and athletics. School nurses and teachers are not aware of all activities students are participating in beyond the normal school day and may not be available.
   7. When possible, parents/guardians of the food allergic child are encouraged to attend field trips with their child and carry the epinephrine auto-injector.
   8. SCA encourages parents to send in a box of “safe” snacks so there is always something special the student can choose from during unplanned events.
2. Student Responsibilities/Guidelines:
   1. Use proper hand washing with soap and water before and after eating and throughout the school day
   2. Should not consume items containing known allergen, or items with unknown ingredients, and should ask when in doubt
   3. Will not share/trade food or use the eating utensils of others
   4. Learn to be proactive in the management of their allergy including how to avoid their allergen and how to report sign/symptoms of a possible reaction (age appropriate)
   5. Will notify an adult IMMEDIATELY if they eat something believed to contain a food to which they are allergic
   6. Will always notify an adult if they are being picked on or threatened by others as it relates to their food allergy
   7. If self-carry of epinephrine permission is granted, will always have it available in designated place as established with parents and school nurse
3. School Responsibilities/Guidelines:
   1. Mandatory training/in-service will be provided to school personnel annually and as needed. Training will include: a description/definition of severe allergies/anaphylaxis and a discussion of the most common foods causing allergic reactions, the signs and symptoms of anaphylaxis, the correct use of an epinephrine auto-injector, and specific steps to follow in the event of an emergency
   2. School buses and vans will have a no eating policy
   3. A dedicated allergy table will be available at all lunch sessions. The allergy table will be cleaned before and after each lunch session.
   4. Cafeteria prepared food will be Nut Free.
   5. Peanut/Nut Free Classrooms will be provided for those students with documented severe peanut and/or tree nut allergies. This will include food, crafts, instructional, pet, and manipulative items.
4. School Nurse Responsibilities/Guidelines:
   1. Conduct annual training as stated above
   2. Ensure that medical records of student with food allergies are current and contain required severe food allergy questionnaire, food allergy action plan, cafeteria seating form, and medications required
   3. Provide a list of students with food allergies to classroom teachers, lunch room personnel, and applicable ancillary staff. This will be done at the beginning of the academic year and updated as necessary.
   4. Designate classrooms peanut/nut free as needed and requested by parent
   5. Provide teachers with letters to parents regarding classroom allergen free status
   6. Communicate to teachers and cafeteria staff at the beginning of the year which students must be placed at the allergy table and how to check lunches of friends invited to sit there with them
   7. Maintain epinephrine auto-injectors provided by parents and medication ordered by physician in the metal cabinet located in the school clinic. Medication will be clearly labeled and monitored for expiration. The cabinet will remain unlocked during school hours.
   8. Provide instruction, guidance, and resources as needed to parents and teachers regarding food allergies and the SCA Food Allergy Policy
5. Classroom Teacher Responsibilities/Guidelines:
6. Participate in annual training regarding students with severe food allergies and potential anaphylaxis, understand signs and symptoms of an allergic reaction, and know how to implement the food allergy action plan
7. Be able to read food labels and identify allergens. Always check labels on all food brought in for parties, celebrations, or anytime the food allergic student will be consuming food not brought from home. Contact the school nurse when assistance is needed.
8. Reinforce appropriate classroom hygiene practices/thorough hand washing with soap and water before and after eating. Alcohol based sanitizers do not remove nut proteins from skin.
9. Ensure desk tops and commonly touched items are wiped down with an approved cleansing agent after any food is consumed in the classroom
10. Ensure food allergic student sits at the designated allergy table at lunch unless otherwise allowed by parent to sit with general population
11. Abide by Nut Free Classroom guidelines as stated in the SCA Food Allergy Policy
12. Ensure that information regarding students with food allergies is organized and copies are kept in the classroom sub folders accessible for substitute teachers
13. Communicate clearly with parents regarding birthday treats being brought in during lunch. All food brought in to share must have prior approval of the teacher or school nurse. There will be no sharing of “extras” with other classes in the cafeteria.
14. Carry your food allergic student’s epinephrine auto-injector with a copy of the food allergy action plan on field trips when parents are unable to attend. Ensure all meals consumed while on trip are allergen free.
15. If there is a question as to the safety of food being served, do not give it to the food allergic child until school nurse or parents have been contacted.
16. Keep all health related information appropriately confidential as defined by HIPPA
17. Peanut/Nut Free Classroom Guidelines:
    1. Teachers will send home written notification to other parents regarding the Nut Free Classroom status. This letter will be provided by the nurse.
    2. Teachers will be able to read food labels and screen for nut products.
    3. Laminated sign will be posted outside the classroom clearly indicating that the classroom is a Nut Free area. Sign will remain posted for the duration of the academic year.
    4. All student’s hands must be washed with soap and water or wiped with baby wipes after lunch to prevent nut proteins from being brought back into the classroom from the cafeteria.
    5. Food and beverages brought in to be shared in the classroom for parties, celebrations, etc. must be nut free. This means the items can not contain nuts in any form or be processed in a facility or on equipment that processes peanuts and/or tree nuts. Ingredient labels will be checked by the teacher prior to items entering the classroom. This is to be done every time food is brought for sharing even if the same item has been brought on a previous date. For example, Oreo cookies will need to have the ingredient list checked every time as the manufacturer may have changed processing plants or altered ingredients. Never assume generic brands have the same ingredients as name brand products, they must all be checked. If there is a question on an ingredient or safety for food allergic student, school nurse or parent will be contacted for assistance.
    6. Home prepared items are discouraged due to possibility of cross contamination. If they are brought in they must also include a full ingredient list. Example: cupcakes made at home decorated with sprinkles and candy must include cake mix, frosting, sprinkles, and candy ingredient labels. Also, home prepared items must have prior approval of food allergic student’s parents.
    7. Food/beverage items brought in without ingredient labels will not be allowed into the allergy classroom. **There will be no exceptions.**
    8. Desk tops and commonly touched items (pencil sharpeners, door handles etc.) will be wiped down with an approved cleansing agent at the beginning of each school day and after any food/snack items are consumed in the classroom.
    9. If a Nut Free classroom decides to move their celebration/party to another area within the school, that area is to be considered Nut Free.
    10. Class pets - pet food, bedding, and cage material must be allergen free.
    11. Teachers will encourage parents to contact the school nurse with any questions regarding the Nut Free Classroom guidelines, guidance with food selection, or to obtain more information regarding food allergies.