

SUMMARY OF SLS POLICIES REGARDING FOOD ALLERGIES

Food allergies can be life-threatening. The risk of accidental exposure to foods can be reduced in the school setting if the school works with students, parents, and physicians to minimize the risks and provide a safe educational environment for food-allergic students.

Family's Responsibility

*Notify the school of the child's allergies.

*Work with the school team to develop a plan that accommodates the child's needs throughout the school including in the classroom, in the cafeteria, during school-sponsored activities, as well as a *Food Allergy Action Plan*.

*Provide written documentation, instructions and medications as directed by a physician, using the *Food Allergy Action Plan* as a guide. Include a photo of the child on the written form.

*Replace medications after use or upon expiration.

*Educate the child in the self-management for their food allergy including:

1. safe and unsafe foods
2. strategies for avoiding exposure to unsafe foods
3. symptoms of allergic reactions
4. how and when to tell an adult they may be having an allergy-related problem
5. how to read food labels (age appropriate)

*Review these policies/procedures with school staff, the child's physician, and the child (if age appropriate) after a reaction has occurred.

School's Responsibility

*Be knowledgeable about and follow the applicable federal laws including ADA, IDEA, Section 504, and FERPA and any state laws or district policies that apply.

*Review health records submitted by parents and physicians.

Include food-allergic students in school activities. Students should not be excluded from school activities solely based on their food allergy.

*Identify a core team of, but not limited to, the school nurse, teacher, principal, school food service and nutrition manager and counselor (if available) to work with parents and

the student (age appropriate) to establish a prevention plan. Changes to the prevention plan to promote food allergy management should be made with the core team participation.

*Assure that all the staff who interact with the student a regular basis understands food allergies, can recognize symptoms, knows what to do in an emergency, and works with the other school staff to eliminate the use of food allergens in the allergic student's meals, educational tools, arts and crafts projects or incentives.

*Practice the *Food Allergy Action Plans* before an allergic reaction occurs to assure the efficiency/effectiveness of the plans.

*Coordinate with the school nurse to be sure medications are appropriately stored, and to be sure that an emergency medicine kit is available that contains a physician's standing order for epinephrine (such as the EpiPen). Keep medications easily accessible in a secure location central to designated school personnel.

*Designate school personnel who are properly trained to administer medications in accordance with the State Nursing and Good Samaritan Laws governing administration of emergency medications.

*Be prepared to handle a reaction and ensure that there is a staff member available who is properly trained to administer medications during the school day regardless of time or location.

*Review policies/prevention plan with the core team members, parents/guardians, student (age appropriate) and the physician after a reaction has occurred.

*Discuss field trips with the family of the food allergic child to decide appropriate strategies for the managing the food allergy.

*Follow federal/state/district laws and regulations regarding sharing medical information about the student.

*Take threats or harassment against the allergic child seriously.

Specific objectives of the St. Louis Policy include, but are not limited to, the following steps:

- I. St. Louis School ("SLS") will devise an Emergency Health Care Plan and use the necessary forms necessary to implement this plan. (See sample forms: Medical Statement by Physician, Cafeteria Information Card, Emergency Health Care Plan Form.) The plan should be reviewed and practiced at the minimum semi-annually.

- II. SLS will devise a plan with regard to the safe location of storage of emergency medicines such as Epipens/Benadryl. (See Medical Form 5-7) Ideally each allergic student would have an Emergency Medicine Kit in the main office as well as one in his/her homeroom classroom (this Emergency Medicine Kit would travel with the student throughout the day.)
- III. SLS will annually educate its staff and student body (using the PAL program) concerning the serious risks of food allergies. Substitute teachers should also be included in this training.
- IV. As a general rule, SLS will discourage food being eaten in the classroom and any foods used should be obtained through the SLS Cafeteria. Homemade foods will not be accepted to be consumed and/or used in classroom activities events.
- V. SLS will provide a table in the cafeteria for students with food allergies that will be “nut free” and free of other life-threatening allergies when needed. Students who purchase the school lunch would be able to sit at this table. Students bringing lunches from home would not be able to sit at this table. Cafeteria aids will be trained to recognize symptoms and to handle emergencies that could arise with food allergies.

Student’s Responsibility

- *Should not trade food with others.
- *Should not eat anything with unknown ingredients or known to contain any allergen.
- *Should be proactive in the care and management of their food allergies and reactions based on their developmental level.
- *Should notify an adult immediately if they eat something they believe may contain the food to which they are allergic.