

Student Allergies

I. Family's Responsibility in Management and Emergency Planning

- A. To notify the school of the child's allergy and update at least annually and with any changes in condition.
- B. To work with the school nurse and school team to develop a plan that accommodates the child's needs throughout the school including the classroom, cafeteria, after-school activities, and the school bus.
- C. To provide written medical documentation, instructions and medication as directed by a physician. This may include proper authorizations for medications and emergency response protocols.
- D. To provide written permission for the nurse to communicate with the health care provider.
- E. To provide a photo of the child on the written form.
- F. To replace medication after use or upon expiration.
- G. To provide to the school a way to reach you (cell phone, beeper, etc.)
- H. To attempt to go on the child's field trips if possible and/or requested. Parents/Guardians are responsible to make sure that medication is sent along for field trips outside of the school.
- I. To 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 adults they may have an allergy related problem: how to read food labels (age-appropriate). Education efforts should promote self-advocacy and competence in self-care.

II. School's Responsibility in management and Emergency Planning

- A. To be knowledgeable about and follow applicable state and federal laws including Americans with Disabilities Act (ADA), Individuals with Disabilities Education Act (IDEA), Section 504, and Family Education Rights and Privacy Act (FERPA) as well as district policies that apply.
- B. To include food allergic students in school activities.
- C. To designate school personnel who are properly trained to administer medications in accordance with laws governing the administration of emergency medication.

If there is no nurse available have a plan in place where a team for each school are trained in the recognition of early symptoms of anaphylaxis and in medication administration.

- D. To determine methods of effective communication between essential personnel in the event of a medical emergency. This may include intercom systems or other response team in the event of an emergency. Communication systems should also be established during off-site activities such as field trips.
- E. To discuss field trips with the family to decide appropriate strategies for managing the food allergy. The classroom teacher should give the child's parents ample notice and request that they come along. If this is not possible the teacher will keep the student with him/her and review foods to be avoided and precautions to be taken.
- F. See Minnesota Statutes 121A.2207 regarding the use of Epinephrine in the school setting.
- G. The school nurse will continually develop, implement, monitor, and review and revise the plan to manage life-threatening food allergies effectively. The policy will be reviewed at least yearly as well as all incidents of allergy reactions and treatment in the school setting.
- H. To provide opportunities for professional development for nurses to update clinical knowledge and skills related to severe food allergy in school settings.

III. Students Responsibility in management and emergency planning.

- A. To be proactive in the care and management of their food allergies and reactions based on their developmental level by learning to recognize symptoms of an allergic reaction.
- B. To not trade or share food with others.
- C. To not eat anything with unknown ingredients or known to contain any allergen.
- D. To notify an adult immediately if they eat something they believe may contain the food to which they are allergic.
- E. The student may be allowed to carry his/her own Epinephrine auto-injector or Inhaler on his/her person at all times if their doctor, nurse and parent/guardian deem the child competent in doing so.
 - 1. The student must agree to keep the emergency medications on their person or immediately under their control and supervision at all times. In addition, students must be responsible for keeping control of their

medications so that other students cannot have access to them and inadvertently harm themselves.

IV. Classroom/Teacher Guidelines:

- A. Classroom teachers should participated in the development of the student's IHP and ECP.
- B. Students who are suspected of having a reaction should never be allowed to walk to the school nurse alone.
- C. Classroom teachers should leave information for sub teachers in an organized, prominent and accessible format for substitute teachers (AESOP).
- D. Classroom teachers should consider coordinating with the parent and the school nurse lesson plan about allergies and anaphylaxis in age appropriate terms for the class.
 - a. Watch the video "Binkie Goes Nuts" for food allergies.
- E. To be aware of how the student with allergies is being treated; use this opportunity to teach community caring, and inforce school rules/policies about bullying.
- F. Parents of other children in the classroom should receive written information that there is a child in the classroom with an allergy. Safe snack lists and foods to be avoided should be distributed to the parents.
- G. Food used for class projects should be limited. The teacher should be responsible for ensuring that the foods are safe for all students. Ingredients for all items should be checked for allergens.
- H. Children should be encouraged to wash their hands prior to entering the classroom after lunch.
- I. If age appropriate anaphylaxis should be discussed with the class.
- J. To encourage students not to share foods or utensils.
- K. To plan for celebrations as well as classroom reward and incentives, which should include alternatives to food.
- L. To collaborate with the nurse prior to planning a field trip to plan ahead for risk avoidance at the destination and during transportation to and from the destination. Ensure that the child with an allergy is assigned to staff who are trained in early recognition and use of an epinephrine auto-injector (EpiPen) and that the auto-

injector is with the student or with the trained adult as per doctor recommendation.

V. Lunch Room Guidelines:

- A. Parents may be given advance copies of the cafeteria's lunch menu in the event that the child wishes to purchase lunch. Parents may contact Food Services for information regarding ingredients used.
- B. A "peanut free" table can be designated in the cafeteria for the child and friends who wish to be peanut free. If possible, that table should be used exclusively as a peanut free table throughout the day. An adult will be assigned to monitor this table. The table will be cleaned with its own cleaning materials determined to break down food proteins.
- C. Students, staff and visitors are encouraged to wash their hands after eating snacks and lunch.
 - a. Note: Hand sanitizer does NOT remove peanut proteins.
 - b. Please use soap and water.
- D. A picture of each student and their allergy will be posted for the kitchen staff.
- E. Review and follow handling guidelines to avoid cross contamination with potential food allergens.
- F. Kitchen staff will notify the school administrative assistant as well as the school nurse when a change has been made on the menu.

VI. Receipt of Allergy Information

- A. When a school staff member (other than the school nurse) is informed by a student or student's parent or guardian that a student has an allergy, the staff member will record the information and pass it on to the school nurse.
- B. When a school nurse receives information about a student with an allergy, the nurse will contact the student's parent or guardian to determine whether the student's allergy could impair his or her ability to learn and therefore requires special accommodations for the student at school or at school activities.
- C. If special accommodations are required, the nurse will ask the parent or guardian to complete and return the Student Allergy Form
- D. Upon receipt of the completed form, the nurse will work with the student's parent or guardian and/or physician to determine the severity of the allergy, develop an individualized health plan for the student (if needed) and inform school staff about the student's allergy and any special accommodations which are needed.

1. If the student has allergies to a specific type of animal or insect, school employees will make every effort to ensure that type of animal or insect is not kept or brought into classrooms or other school spaces where the student is or will be present.
2. If the student has allergies to a specific food, school employees—working with food and nutrition services employees—will make every effort to ensure the student does not come into contact with that food.
3. If the student has allergies to some other specific substance, such as latex, school employees will make every effort to ensure the student does not come into contact with that substance.
4. If required by the individual health plan, a letter will be sent home to parents in the allergic student’s elementary classroom informing them of the allergy and citing ways they might help; confidentiality of the allergic student will be maintained.
5. Substitute teachers of allergic students shall be informed as outlined in the student’s individual health plan.
6. Efforts will be made to accommodate students with allergies on field trips and school district transportation
7. Epi-pens will be in close proximity to the allergic student at all times as determined by the parents and school nurse.
8. Substitute nurses shall be informed of students with life threatening allergies.

VII. Guidelines for Responding to Students Who Have Allergies:

A. Common Allergens

1. Animals—Cats, dogs, guinea pigs, hamsters, mice, rats, birds.
2. Food (most common)—Cow’s milk, eggs, peanuts, other nuts, soy, shellfish, codfish, seeds, wheat.
3. Food (less common)—Chocolate, barley, rice, citrus fruit, melons. Bananas, tomatoes, spinach, corn, potatoes.
4. Insects—Honey bees, wasps, hornets, spiders, fire ants, yellow jackets, and centipedes.
5. Substances—such as latex or other products determined to cause allergic reactions.

- B. Common Allergy Symptoms: Common signs of an allergic reaction may be a combination of any of the following symptoms.
1. Less severe symptoms—Hives; itching; swelling; red, watery eyes; runny nose; stomach cramps; change of voice; coughing; wheezing; dizziness; change of color; swelling in area of a bite; at any time these may progress to more severe symptoms.
 2. More severe symptoms—Difficulty breathing, vomiting; diarrhea; throat tightness or closing; difficulty swallowing; fainting, decrease in blood pressure or loss of consciousness.
- C. Possible Accommodations for a Student with an Allergy: The accommodations listed below are suggestions and may not be practical or appropriate in all cases. Necessary accommodations will be determined on a case by case basis.
1. Communications
 - a. Develop a good communication channel with the student's parent or guardian. It is the responsibility of the parent or guardian to initially bring the student's allergy to the school's attention. The school shall inform the parent or guardian of any incidents related to the allergy at school and the parent or guardian shall inform the school of any new information regarding the student's allergy.
 - b. Ask the parent or guardian to sign a release of information form to allow in the sharing of information regarding the student's allergy.
 - c. Give information about students with sever allergies on a need-to-know basis to teachers, substitute teachers, coaches, bus drivers, chaperones, food service workers, playground supervisors and others who are in contact with the student at school or a school activity.
 - d. Allergen education may be provided to students as is appropriate.
 2. Emergency Preparedness
 - a. School staff should obtain and have on file written instruction from the student's physician (signed by the parent/guardian) with easy-to-follow steps for recognizing an allergic reaction and administering medication. An individualized health plan should be on file in the school at the beginning of the school year.
 - b. Obtain parent or guardian consent for the administration of medication.

- c. Obtain parent or guardian consent for the administration of medication
- d. Prepare for the possibility of a medical emergency related to student allergies whenever planning outdoor field trips, traveling, physical education and athletic activities, etc.
- e. Keep treatment medications and an allergy action plan in an easily accessible location known to staff and students. This should be in close physical proximity to the student.

3. Prevention Strategies

- a. School staff should work with the student's parent or guardian to develop strategies for avoiding a reaction while allowing the student to participate fully in all activities.
- b. The district will have generic epi-pens available in each school nurse's office. It is also recommended that each student or staff member with a severe allergy have their own epinephrine auto-injector. Epinephrine auto-injectors should be clearly labeled with the name of the student and his or her classroom, and school staff should be aware of the location of the epinephrine auto-injectors (EpiPens).
- c. It is recommended that all epinephrine auto-injectors and inhalers be kept in an unlocked supervised area in or near the nurse's office
- d. Animal Allergies
 - i. Remove animals from classrooms and other student areas in which the student will be present.
 - ii. Keep areas around animals, and where animals are kept, sanitary and clean.
 - iii. Encourage all students and staff to thoroughly wash their hands before and after handling animals, cleaning animal holding areas, and after handling pet food.
- e. Food Allergies
 - i. A separate table declared to be free of allergens may be set up in the cafeteria or other appropriate place for students with allergies and other students whose lunch is free of allergens. An adult will be assigned to monitor this table. The table will be cleaned with its own cleaning materials determined to break down food proteins.

- ii. School staff should provide options to food to which student is allergic. Teachers who use food as part of a lesson plan (i.e., in math, science, crafts, cooking, etc.) should substitute foods that are not allergens (after carefully reading ingredient statements) or use non-food item.
 - iii. Since some people may have an allergic reaction to food particles that become airborne during cooking, foods that students are allergic to should not be prepared or cooked in their presence.
 - iv. Schools should encourage parents to bring in non-edible items for special events as a preferred alternative to food. Foods brought in for special events should be purchased in stores and brought in with their packaging intact and a complete list of ingredients.
 - a. Schools should encourage parents to bring in foods found only on the Allergy Safe List located on the school website.
 - v. Wash eating surfaces clear of contamination foods with appropriate cleaning materials determined to break down food proteins.
 - vi. Encourage students not to share their food, food containers or eating utensils with others, and to thoroughly wash their hands before and after handling food.
 - vii. Distribute information to parents about food products that may be allergens and food products that are safe to send to school.
 - viii. Do not ban any food item from school.
 - a. Banning an item creates a false sense of security.
 - b. For a ban to work, everyone in the school community would have to read ingredient labels and call manufacturers to find out if products contain any offending food. That is not realistic.
 - ix. District purchased soap used in schools should be free of peanut and tree nut substances.
- f. Insect Allergies
- i. Encourage the person with an insect allergy to avoid open footwear and loose-fitting clothes, wear shoes while walking in the grass, avoid insect nests, stay away from refuse containers, and avoid wearing or using perfumes or

- scented cosmetics or bright-colored clothing when outdoors.
- ii. Keep foods, soft drink and juice containers covered outdoors.
- iii. A student with an insect sting allergy may be accompanied outside in case of a need for emergency assistance caused by an insect sting.
- iv. Cover all garbage cans in or around the playground to avoid bees during the school year from the start of the school year to November 1st and during anytime bees are noted to be swarming in the area.
- v. All staff will report to the maintenance staff when insects (i.e. Bees, wasps, hornets) are building nests.
- vi. Maintenance/grounds staff will respond in a timely manner to remove the insect infestation.

4. Education

- a. Information about allergies, including how to administer epinephrine auto-injector and the signs of an allergic reaction, may be reviewed at staff meetings with all school employees and at site council meetings.
- b. Discuss allergies, as needed, with groups of students.
 - i. Encourage teachers to show “Binkie Goes Nuts: A 15 minute video about a student that develops a nut allergy.
- c. After training, an allergy emergency drill may be held for staff.

D. Medical Treatment for a Student Having a Severe Allergic Reaction

1. Anaphylaxis is a severe allergic reaction that affects multiple systems in the body. Symptoms can include severe headache; nausea and vomiting; sneezing and coughing; abdominal cramps; diarrhea; hives; swelling of the lips, tongue and throat; itching all over the body, and anxiety. The most dangerous symptoms include breathing difficulties, a drop in blood pressure and shock—all which can be fatal.
2. To administer epinephrine with an epi-pen to a person who appears to be having a severe allergic reaction, take the following steps:
 - a. Please review instructions on the last page of this policy for administering 2 types of Ephedrine auto-injectors.
 - b. First Type of auto-injector (adult and pediatric dose): EpiPen Auto-Injector and EpiPen Auto-Injector Jr.:

- i. Pull off the blue safety guard and place the Orange tip end against the outer thigh, press firmly and hold for 10 full seconds.

- c. Second Type of auto-injector: Auvi-Q Auto-Injector will speak to you as you pull off the Red safety guard and place the Black end against the outer thigh, press firmly and hold for 5 seconds (it does the counting for you).

- d. Massage the injection area for 10 seconds.

- e. Call 911.

- g. Notify parent or guardian.

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INDEPENDENT SCHOOL DISTRICT 739
Kimball, Minnesota

Parent or Guardian: If your child has one or more allergies which the school needs to know about to help keep your child healthy, please complete and sign this form, and return it to the nurse at your child's school.

TO BE COMPLETED BY STUDENT'S PARENT OR GUARDIAN

Name of Student _____ Grade _____ Birth Date _____

Name of parent or guardian _____

Address _____

Telephone: (day) _____ eve/weekend _____

Describe what the student is allergic to, his or her allergic reaction and what you do to help prevent an allergic reaction: _____

Signature of parent or guardian

Date

