Food allergies can be life threatening. The focus of the following Food Allergy Management/GSD Plan is to assist an identified allergenic student in avoiding exposure to allergens and increase awareness and planning of students with GSD. These strategies will focus on identification, prevention, education, awareness, communication and emergency response. School-wide bans will not be utilized as it may not render the environment absolutely safe and may give a false sense of security.

The **Goals** for Food Allergy Management/GSD plan include:

1. To maintain the health and protect the safety of children who have life threatening food allergies and GSD in a manner that is developmentally appropriate, promotes self-advocacy and competence in self-care and provides educational opportunities.

2. To ensure that the interventions and Individual Health Care Plans for students with life-threatening food allergies are based on medically accurate information and evidence based practices.

3. To define a formal process for identifying, managing, and ensuring continuity of care for students with life-threatening food allergies and GSD across all transitions (Pre-K through Grade 12).

**IDENTIFYING:** Early identification of students with left-threatening food allergies and/or glycogen storage disease is important. The district encourages parents/guardians of children with a life-threatening food allergy/GSD to notify the school of the condition, providing as much information about the extent and nature of the allergy as it is known, as well as any known effective treatment for the allergy. The Nurse shall review all paperwork in an attempt to promptly identify students with a known allergen/GSD condition.

**MANAGING:**

**Parents/Guardians Responsibility in Management and Emergency Planning:**

The Board of Education encourages families to adhere to the following guidelines for managing food allergies in the school setting:

1. Notify the school of the student's allergies at the prior to the first day of school or as diagnosis is received;
2. Provide written documentation, instructions, and medications as provided by a your licensed health care provider;
3. Collaborate with the school team to develop an Individualized Health Care Plan (IHCP) that accommodates the student’s needs throughout the school including in
the classroom, in the cafeteria, in after-care programs, during school-sponsored activities, and on the school bus;
4. Provide current emergency contact information; including the best way to contact you during school hours
5. Provide the school nurse with at least annual updates on your child’s allergy status;
6. Provide the school nurse with at least two up-to-date epinephrine auto-injectors;
7. Replace medications after use, upon expiration, or upon notification from nurse;
8. Educate the student in the self-management of their food allergy including safe and unsafe foods, symptoms of allergic reactions, how and when to tell an adult they may be having an allergy-related problem, how to read food labels (as age appropriate);
9. Review the Emergency Care Plan with the core team members, the child’s physician, and the child (if age appropriate) after a reaction has occurred;
10. Provide the school nurse with the licensed health care provider’s statement, if student no longer has allergies/requires Emergency Medication such as Epinephrine.

**Student’s Responsibility in Management and Planning:**

The Board of Education encourages students to adhere to the following guidelines for managing food allergies in the school setting:
1. Learn to recognize symptoms of an allergic reaction
2. Do not trade/share food with others.
3. Do not eat anything without a labeled ingredient statement or known to contain any allergen or without parental permission;
4. Notify an adult immediately if they eat something they believe may contain the food to which they are allergic or are experiencing any symptoms;
5. Wash hands before and after eating;
6. Report any instances of teasing or bullying immediately;
7. Carry an epinephrine auto-injector at all times, when documented as appropriate to self-carry.

**School Nurse’s Responsibility In Management**

The child with a severe food allergy may be identified in a variety of ways. It may be noted at Pre-School or Kindergarten registration, on the HAR form, or by notification from the parent.

1. The nurse will make every effort to carefully review the medical records of all new students entering their school or the district. The nurse should consult with the parent to obtain a medical history. This should include a list of foods the child is allergic to and how he/she reacts after exposure or ingesting these foods. An Account of past reactions and their management should be obtained.
2. The nurse shall request to have the child’s physician provide the school with written information regarding the child’s allergies, and if restrictions are recommended, prior to the child starting school. Medication administration forms will be need to be completed by the physician and signed by the parent. The medication must be properly labeled and in the original container and delivered to the school by the parent prior to the child starting school.

3. An Individualized Health Care Plan and Emergency Plan (IHCP) and Emergency Action Plan (EAP) will be established for all children with a known life threatening allergy. The IHCP should be based on the information provided by the parent and students’ medical provider and nurse’s assessment. The plans shall include student’s name, photo, allergen, signs/symptoms of reactions and emergency Medication to be administered, Location of emergency medication, who will administer (including self-administration option), and Follow up procedures (calling 911, parents, documentation). The plan should also consider risk reduction and emergency response during travel to and from school, the school day and before/after school programs, and field trips. This plan should be reviewed yearly, or as medical needs change.

4. The Emergency Health Care Plan should be distributed to all staff with daily interaction with the child. The nurse shall familiarize teachers and appropriate staff of their students with IHCPs/Emergency Action Plans.

5. Conduct and document annual education and training for appropriate qualified school personnel for anaphylaxis and allergy management including, symptoms, risk reduction procedures, desired side-effects, when and how to administer medications including Epi Pens, potential unwanted side-effects and the emergency response plan. This education shall be renewed annually, or as status changes. Student specific orders and medications shall be reviewed with appropriate Qualified school personnel annually or as the students’ needs change.

6. Emergency Medications shall be clearly labeled and readily accessible in a secure location.

7. Nurse shall maintain standing orders from the School Medical Advisor for the nurses to administer epinephrine to students without a known life-threatening allergy, who do not have their own medication order, and have an anaphylactic reaction at school. These orders are to be reviewed and signed by the school medical advisor on an annual basis.

**School Staff and Administration Responsibility:**
Although schools cannot guarantee an allergy-free environment, Granby Public School administration and staff should:
Guidelines for the Management of Children with Peanut or tree Nut Allergies and Glycogen Storage Disease

1. Be knowledgeable about and follow applicable federal laws including ADA, IDEA, Section 504, and FERPA and any state laws or district policies that apply;
2. Identify a core team that may include the school nurse, Health Services supervisor, school medical advisor, teacher, principal, school food services representative, and guidance counselor (if available) to work with parents and the student (age appropriate) to implement an Individual Emergency Care Plan and to communicate that plan to all involved;
3. Develop and implement an Emergency Care Plan for a food-allergic student, on the basis of need, as determined by the school nurse and core team
4. Students shall not be excluded from school activities solely based on their food allergy;
5. Participate (core team) in changes made to the prevention plan to promote food allergy management;
6. Ensure that all staff, including substitute teachers and paraprofessionals, who interact with the student on a regular basis, understand food allergy management, can recognize symptoms, how to respond in an emergency, and work with other school staff to eliminate the use of food allergens in the allergic student’s meals, educational tools, arts and crafts projects, or incentives;
7. Make accessible the Emergency Care Plan with lesson plans for teacher substitutes;
8. Review the Emergency Care Plans (staff) at the beginning of the school year to assure the efficiency/effectiveness of the plans;
9. Coordinate with the school nurse to be sure medications are appropriately stored, emergency kit is available that contains a physician's standing order for emergency medication and store medications in a easily accessible but secure location central to designated school personnel;
10. Designate qualified school personnel to administer student specific medications, including emergency medications, in the absence of the school nurse pursuant to CT General Statutes and Regulations;
11. Field Trip Planning: To discuss field trips with the family to decide appropriate strategies for managing the food allergy. The classroom teacher shall provide the nurse and parents ample [2 weeks] notice of the trip so that planning and precautions may be completed.
12. Never allow a student you suspect of having an allergic reaction to walk alone to the school nurse- send with an adult or call for medical assistance;
13. Encourage alternatives to food celebrations for birthdays and similar celebrations in the school setting
14. Collaborate with the district transportation administrator to assure that school bus driver training includes symptom awareness and what to do if a reaction occurs;
15. Enforce a “no eating” policy on school buses with exceptions made only to accommodate students with special needs(such as GSD) under federal or similar laws;
17. Food service manager will ensure that all food service staff, their substitutes and cafeteria monitors are trained to recognize the signs and symptoms of an allergic reaction and what to do in the event of a reaction;
18. Food Service Manager shall strictly follow food handling, food preparation, cleaning and sanitation protocols to avoid cross-contact/contamination;
19. to the extent possible, school food service staff should work with parents to provide them with food or product information, in order for parents to identify and approve which foods their child may select for meals in school;
20. Discuss and plan field trips with the family and nurse of the food-allergic child to decide appropriate strategies for managing the food allergy, including procedures for handling emergencies;
21. Follow federal/state/district laws and regulations regarding sharing medical information about the student including but not limited to IDEA,ADA, Section 504, FERPA.

REFERENCES:
PA 05-104 An Act Concerning Food Allergies and the Prevention of Life Threatening Incidents in School
CGS 10-212a Administration of Medications in Schools
CGS 10-220i Transportation of Students carrying cartridge injectors
CGS 52-557b Good Samaritan Law. Immunity from liability for emergency medical assistance, first aid or medication by injection
PA 05-144 and 05-272 An Act Concerning the Emergency Use of Cartridge Injectors
PA 04-224 An Act Concerning Childhood Nutrition in Schools, Recess and Lunch Breaks