

## **MANAGEMENT GUIDELINES FOR STUDENTS WHO HAVE LIFE-THREATENING ALLERGIES**

The Massachusetts Department of Education recommends that all school districts have policies and protocols regarding the care of students with life threatening food allergies. This is in addition to [St. 2012, c.77](#), An Act Relative to Medical Emergency Response Plans for Schools (Michael's Law), requiring local school districts to develop efficient written medical response plans for responding to life-threatening emergencies.

The following eight foods (peanut, tree nut, milk, soy, egg, wheat, fish, shellfish) are the most common of the serious allergic reactions, although any food has the potential for doing so. Other causes of anaphylactic reactions are insect stings, medications, latex, cold and exercise. Although much of the emphasis in these guidelines is on food based allergies, there are a number of guidelines which apply to other kinds of allergies, as well as exercise induced anaphylaxis.

In order to minimize the incidence of life-threatening allergic reactions and to enable school staff to provide appropriate treatment if an allergic reaction occurs, the following management guidelines have been developed.

### **EDUCATION OF SCHOOL STAFF, STUDENTS, AND FAMILIES**

- 1. Informing School Staff:** In the elementary schools, the nurse will inform appropriate school staff about students who have life threatening allergies at the beginning of the school year and as needed thereafter. At the high school, the nurses will add health alerts directly into X2 for all students with life threatening allergies. It is incumbent on staff to look at alert list and follow up with nursing staff with specific questions
- 2. School wide Education for Staff:** Education for school staff about life-threatening allergies will be provided by the school nurse. Classroom teachers will be expected to share this information with pertinent classroom staff on a need to know basis. This presentation/information sheet may include (but not limited to):
  - Information about life threatening allergies,
  - Risk reduction procedures regarding food in school, school events/trips, snack policies, handwashing, and classroom education
  - Emergency response procedures, the recognition and treatment of allergic reactions, and anaphylaxis
  - Field trip planning in elementary schools: planning to allow parent/guardian participation if indicated and safety considerations
  - Awareness of bullying potential for students with life threatening allergies

### **3. Education for Families and Students**

some cases, it may be necessary to provide information to families in the school about life threatening allergies, risk reduction and specific school practices regarding severe allergies. (See attachment II.)

In our elementary schools, information may be sent home to all families in a specific classroom in which there is a child with a severe food allergy with parent approval.

This information will describe the specific allergy, food practices in the classroom, and a request for families to support these preventative practices. Some parents/guardians may wish to have their child identified in which case parental/guardian permission is required. The nurses through the Office of School Health will provide letters home to families.

Parents/guardians of high school students with life threatening allergies are encouraged to meet with the school nurse to set up an appropriate plan.

## **PREVENTIVE MEASURES**

### **1. Latex Free Gloves**

Latex free gloves should be worn for all school activities or programs for which gloves are used. This includes food preparation and food handling.

### **2. Food in K-8 Schools**

School staff will adopt measures to reduce the presence of food in classrooms. This is to include:

- Eliminating food from classroom parties and celebrations (use treats such as stickers, special pencils, extra recess may be substituted for food for younger students.)
- Eating should be permitted only during snack, and lunch times, unless student specific plans are in place.
- Allowing nuts, peanuts, shellfish, and possibly other allergenic foods which contain these or other specific products, to be eaten or opened only in school in the cafeteria (or in other specified dining areas.
- Before using food for science/craft activities, teacher will review class allergies, get approval from principal, discuss with school nurse and notify family and obtain written permission from families of all students with life threatening allergies.

### **3. Allergen Free Tables in the Cafeteria**

In the elementary school cafeterias, peanut free/nut free tables will be created, if necessary. This will be in consultation with the parent/guardian, the staff person who manages the cafeteria, the school nurse, and the principal. Reasonable efforts will be made for tables to be free of other allergens on a case by case basis. Tables should be cleaned thoroughly after use, and persons who have food allergies should not participate in clean up activities.

At the High School, individual arrangements will be made to accommodate a student's needs when necessary.

## **EPIPENS® IN the ELEMENTARY SCHOOL**

If a student has an EpiPen® prescribed, the following should be in place:

1. An EpiPen® will be requested for the Health Clinic/Nurse's Office.
2. Training will be provided in the use of the EpiPen to staff member volunteers.
3. The Nurse will request that the parent/guardian obtain signed orders from the student's prescribing physician. The order must include the information required by the Massachusetts Department of Public Health Regulation 105 CMR 210.000 regarding the administration of prescription medications in school. The parent/guardian must also complete and sign a medication permission form. These both are part of the student's Emergency Health Care Plan for EpiPen® Administration form noted below. The EpiPens® must be readily available and stored in an unlocked labeled cabinet or container in the clinic.
4. The school nurse and parent/guardian will complete the Emergency Health Care Plan EpiPen® Administration form. This plan will be kept on file and/or the care plan may also be kept with the EpiPen®. The plan will accompany the EpiPen® when a school nurse provides an EpiPen® for a trip away from the school grounds. If an EpiPen® is stored in any area of the school building other than the nurse's office, a copy of the emergency plan will be attached to it. (After school daycare programs have their own policies.)

## **EPI-PENS IN THE HIGH SCHOOL**

In most circumstances, students at the High School who require EpiPens should carry their own medication. An additional EpiPen may be kept in the clinic, if desired. As stated above, an updated *EMERGENCY HEALTH CARE for EPIPEN ADMINISTRATION*, including a physician's order from the student's primary care physician or allergist, parental authorization signatures and permission for the student to self-administer medication will be kept in the clinic. These forms must be updated yearly. The student and/or parent/guardian will be responsible for checking the EpiPen for discoloration and expiration.

### **EpiPens® in Classrooms**

If a parent/guardian requests that an EpiPen® be kept with the student's classroom teacher, the plan must be discussed with the parent/guardian, school nurse, and classroom teacher.

If a classroom teacher is unable to volunteer to be trained in EpiPen® administration, the student should be placed in another classroom, if possible. If not, there should be another designated staff member, who is readily available and trained in EpiPen® administration, to assume this responsibility.

If the EpiPen® is kept in the student's classroom:

- A copy of the student's individual Emergency Health Care Plan for EpiPen® Administration must be kept with the EpiPen®.
- The parent/guardian is responsible for periodically checking the EpiPen®'s expiration date and for any discoloration or loss.

### **EpiPens® in Backpacks or Waist packs**

The placement of EpiPens® in other areas of the school is not encouraged, but will be considered on a case by case basis.

Safety and common sense are the foremost considerations regarding the situation of a student carrying his or her own EpiPen® in a backpack or waist pack, in addition to the one kept in the nurse's office.

- The student's age and his or her ability to take this responsibility must be assessed on a case by case basis.
- When this practice is being considered, input from the student's physician, as well as the parent/guardian, may be requested.
- If the student is carrying his or her own EpiPen®, it will be noted on the emergency health care plan.

## **RESPONSIBILITIES OF THE SCHOOL NURSE**

The school nurse will be responsible for the following:

1. The school nurse will inform school staff about the presence of children with life threatening allergies at the beginning of the school year and as needed throughout the year.
2. The school nurse will initiate and update as needed an individual health care plan (IHCP) for all students who have an EpiPen® prescribed for them. This plan will include: a list of physician documented allergies, signed medication orders according to the Massachusetts Department of Public Health Regulation 105 CMR 210.000, recommendations and restrictions for the school environment and parent/guardian permission for the administration of medication.
3. The school nurse will review emergency response procedures at least once a year with the emergency team in the school and include the treatment of anaphylaxis as part of this.
4. The school nurse will train staff members who are willing to be trained responders in the use of an EpiPen®. A registered nurse or physician, according to 105 CMR 210.000, is the only person authorized to do this. The names of the people trained in the use of an EpiPen® will be available in the nurse's office.
5. The school nurse is responsible for the distribution of the information regarding life-threatening allergies to staff.
6. The school nurse is responsible for the placement of signs designating the location of EpiPens® in the main office and for clearly labeling the location of the EpiPens® in the nurse's office.
7. The school nurse will collaborate with the principal/headmaster of the building, as well as the food service director, to determine the advisability of adopting various food and cafeteria practices.
8. The school nurse will help determine the advisability of a student's carrying his/her own EpiPen®. The nurse will work with a parent/guardian and other school staff members as appropriate.

## **ROLE OF THE PRINCIPAL/BUILDING ADMINISTRATOR**

The following practices are suggested. If adopted, administrative approval and support is required. The recommendations include:

1. No food or utensil sharing in the elementary schools.
2. Food is to be opened or eaten only during designated snack or lunch.

3. Nuts, peanuts, shellfish, (and possibly some other foods to be included if necessary), and foods containing these, may be eaten or opened only in the cafeteria or other areas specifically designated for eating.

**5.**

4. Annually schedule a short presentation by the school nurse, share power point or watch video about life-threatening allergies. This can be done early in the fall with the presentation of standard precautions.

5. An informational letter may be distributed to the families of students in the class in which there is a student who has a life threatening allergy to alert them to preventive measures, such as food policies and hand washing.

6. Information about life threatening allergies and recommendations may be shared with all families in the school by way of newsletter or letter.

**ROLE OF THE CLASSROOM TEACHER**

1. The classroom teacher should promote hand washing before and after eating, especially in the elementary schools.

2. The classroom teacher, in collaboration with the school nurse, will educate students about food allergies when indicated and be attentive to potential for bullying.

3. The classroom teacher may promote a policy of no food in the classroom or an allergen free table for students with known allergies.

4. The classroom teacher will be familiar with the student's individual health care plan.

**RESPONDING TO EMERGENCIES**

The following practices are recommended:

1. A yearly review of the treatment of anaphylaxis for volunteer responders.

2. The names of school personnel who have had training in the use of an EpiPen will be available in the nurses office.

3. The exact location of the EpiPens® kept in the nurses office will be clearly posted in the nurse's office and will be clearly labeled in an unlocked cabinet.

4. There are standing orders in place for the management by the school nurse of individuals who have an allergic reaction/ anaphylaxis and who do not have medication prescribed or available to treat it.

**FIELD TRIPS**

Field trips should only be planned with the knowledge that a parent /guardian or trained staff person is qualified and willing to administer an EpiPen to a known allergic child in the event of an emergency.

1. School staff members who are planning field trips that include students with life-threatening allergies should consider the following issues:

- Is the parent/guardian willing to attend? If so, it is advisable to plan the trip to accommodate his/her schedule. (A parent/guardian can be responsible for the medical care of only his/her own child.)

- Is this an appropriate trip, considering the possibility of the need to access emergency medical services for all of the trip participants: students, staff members, other adults?

2. It is recommended that the staff member planning the trip establish the trip how emergency medical services will be accessed. It may be advisable that a cellular phone be taken on the trip.

3. It is essential that the school nurse be informed about any day trips 72 hours in advance and one month in advance for an overnight trip. The staff member in charge of the trip will meet with the school nurse to identify and ensure that there is at least one EpiPen® on the trip for each student who has an EpiPen® prescribed for him/her. It is advisable to have two EpiPens® per allergic student if available. An IHCP (individual health care plan) must be attached. A trained staff member (or the student's own parent/guardian) must be present to administer the medication and to follow the emergency plan if necessary.

4. There should be no eating on buses or other types of vehicles, unless there is a medical indication. If there is a deviation from this practice, this should be discussed with the school nurse.

## **STUDENTS WHO RIDE BUS**

Parents are responsible for letting school nurse and guidance counselor know that their child rides a bus to and from school. Guidance counselors will share contact information of transportation department with parents so that parents can convey allergy information. School nurse will share allergy plan with bus driver after parent has contacted transportation department.

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