

# STATE COLLEGE AREA SCHOOL DISTRICT

Current SCASD policy [209.1](#)

Key:

Red font = new language

Purple font = discussion items

**SECTION:** 200 Pupils  
**TITLE:** Severe Allergy  
**NUMBER:** 209.1  
**ADOPTED:** November 8, 2010  
**STATUS:** Draft Revisions - June 2019

## **Purpose**

The SCASD Board recognizes that some students will have severe allergies. To maintain a safe school environment for students with severe allergies, the school district depends upon the cooperation of parents/guardians, health professionals, students, and staff to **develop a plan for awareness, education, and training of allergens, minimize exposure to allergens, and prepare a plan of action in the event a student or staff member is exposed to the allergen.**

## **Authority**

The Board authorizes the Superintendent to prepare detailed administrative procedures to ensure the safety and well being of students and staff. The purpose of this policy is two fold: to safeguard the health and well being of students and employees and concurrently, to protect the rights of the individual.

## **Definitions**

**Allergen** - a substance inducing an allergic state or reaction.

**Anaphylaxis (Severe Allergy)** - ~~a condition of hypersensitivity to proteins and other substances in which exposure to or injection of the foreign matter results in a severe allergic reaction that occurs rapidly and causes a life threatening response involving the whole body.~~ **A serious allergic reaction that is rapid in onset and might cause death. It can be caused by food, insect stings, medications, arts and crafts**

materials, and latex. Food allergy is the leading cause of anaphylaxis outside of the hospital setting.

**Food Allergic Reaction** - A food allergic reaction might begin with a tingling sensation, itching, or a metallic taste in the mouth. Other symptoms can include hives, a sensation of warmth, swelling of the mouth and throat area, coughing, wheezing or other difficulty breathing, vomiting, diarrhea, cramping,, a drop in blood pressure, and loss of consciousness. A food allergic reaction might begin within minutes to two hours after exposure to the allergen, and life-threatening reactions might increase in severity over a period of several hours. Not all food allergic reactions result in anaphylaxis.

**Food Allergy** - a food allergy is any reaction to an otherwise harmless food or component that involves the body's immune system. A reaction occurs when the body's immune system responds abnormally to the protein or proteins in that particular food. The body reacts by flooding the system with histamines and other chemicals to fight off what is perceived as an invader in the body. Reactions to food or food ingredients that do not involve the immune system are called food intolerance or sensitivities. *Occurs when the immune system: 1) identifies a food protein as dangerous and creates antibodies against it; and 2) protects against the danger by releasing substances, such as histamine, tryptase, and other mediators, into our blood when that food is eaten. The release of these substances results in the symptoms of a food allergy reaction*

**Food Intolerance** - food intolerance is a metabolic disorder and does not involve the immune system. Lactose intolerance is one (1) example of food intolerance. A person with lactose intolerance lacks an enzyme that is needed to digest milk sugar. When the person eats milk products, symptoms such as gas, bloating, and abdominal pain may occur. *An adverse reaction to food that is not life-threatening. Symptoms might include abdominal cramps, bloating, and diarrhea. A common example is lactose intolerance which is the inability to digest milk sugar* **Common Food Allergens**—common foods that are associated with food allergy are milk, eggs, peanuts, tree nuts, fish, shellfish, wheat, and soy.

**Food bullying** - Physically, verbally, or emotionally abusive behavior toward a person known to have a food allergy (e.g., smearing peanut butter on the face of a child who is allergic to peanuts). The bullying of children with food allergies takes on greater urgency due to the life-threatening nature of the condition.

**FARE** - Food Allergy Research and Education. **FARE's mission** is to improve the quality of life and the health of individuals with food allergies, and to provide them hope through the promise of new treatments.

**Individual Written Management Plan** - An Individual Healthcare Plan (IHP or IHCP) is recommended by the National Association of School Nurses (NASN) for students whose healthcare needs might affect their ability to safely attend school and perform academically. State nurse practice acts advise registered nurses to provide plans of care regardless of the setting. An individual healthcare plan incorporates a separate emergency care plan (ECP) for use by school personnel. The Food Allergy Action Plan (FAAP), developed by the Food Allergy & Anaphylaxis Network ([www.foodallergy.org](http://www.foodallergy.org)), can serve as an emergency care plan for addressing food allergies in schools.

~~**Non-Food Triggers**—includes insect venom, medications, latex, and rarely vigorous exercise and cold.~~

**Section 504** - Part of the federal Rehabilitation Act of 1973, Section 504 prohibits discrimination based on disability in any program or activity receiving Federal financial assistance. An "individual with a disability" protected under Section 504 includes persons with food allergies. Under the Section 504 regulations, schools are required to evaluate students to determine if they are protected under the law and to provide any accommodations that may be necessary for the student to participate in the educational program. Often, schools develop "Section 504 plans" or Individual Healthcare Plans to describe how the food allergy will be accommodated. See also Americans with Disabilities Act.

Legal

24 P.S. 510

22 PA Code 12.41

**Related Policies and Resources:**

141, Coordinated School Health and Wellness Policy

209.1 - R, Severe Allergy Regulations

*249, Anti Harassment and Anti Bullying Policy*

*NSBA - Safe at School and Ready to Learn*

*Food Allergy Research and Education (FARE)*

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## **STATE COLLEGE AREA SCHOOL DISTRICT**

**SECTION:** 200 Pupils  
**TITLE:** Severe Allergy  
**NUMBER:** 209.1 - R  
**ADOPTED:** January 31, 2012  
**STATUS:** Draft Revisions - June 2019

### **Guidelines**

Protecting the individual with severe allergy/anaphylaxis involves educating and training students and staff regarding management of allergens in school, which includes:

- Avoiding the allergen trigger
- Recognizing the occurrence of an allergic reaction
- Providing immediate appropriate treatment

While the Board of School Directors cannot guarantee an allergen-free environment, the Board will make every reasonable accommodation to ensure a safe environment *by developing guidelines to complete the following:*

- 1. Define appropriate health services for students with food allergies and train school personnel in the provision of services.*
- 2. Collect information on students with life threatening food allergies including acquiring current student information from healthcare providers and parents.*
- 3. Implement and follow procedures for medication administration including self administration of medication.*

4. Implement and follow procedures for stock epinephrine in school including parental option to opt-out of epinephrine.

5. Review standard operating procedures to identify students and revise as needed.

6. Disseminated information to students, staff, and parents/guardians annually.

## **Delegation of Responsibility**

### Students

1. Never take food allergies lightly. Students should not joke or tease other students about allergies.
2. Never try to trick someone into eating food to which they are allergic. *This is considered a form of bullying and will be treated as such.*
3. Do not share food with other students.
4. Wash/sanitize hands before and after eating.
5. Educate yourself regarding allergies and food intolerances.
6. Notify an adult immediately *if an allergic reaction is suspected*, or if someone has a spill or makes a food mess.

### Parents/Guardians

1. Contact the school nurse each year to complete and/or update all medical records, including specific information pertaining to any and all known allergies. Provide prompt updates. :0)
2. Contact the food service department directly each year if the child has a food allergy and intends to purchase meals at school.
3. Provide a medical statement, including the Allergy Action Plan, completed by a physician, physician's assistant, or nurse practitioner to include: the allergen of concern and the requested accommodations at the start of each school year.
4. *Participate in any meetings or discussions regarding the student's Individual Health Plan and/or Allergy Action Plan, and maintain a line of communication with the school nurse.*
5. Provide an appropriately labeled supply of medication prescribed by the physician and immediately replace expired or used medication.
6. When providing snacks and/or treats for classroom parties or events, consideration should be given for students with food allergies.

### School Nurse

1. The Certified School Nurse (CSN) will review the medical records and documentation from the attending physician regarding the student's allergy.
2. On an as needed basis, an IHP or 504 plan will be developed by the CSN in collaboration with the parent/guardian. The plan and procedures may include provisions recommended by the individual's healthcare provider and FARE. It is understood that due to the ages of students and varying intensity of allergies it is likely that the comprehensiveness of the IHP for an elementary student will be different than for a secondary student.
3. Regardless of the allergy, the district will not support a complete ban of specific or specified foods in the cafeteria that may contribute to the student's allergy, however, staff shall consider specific students' food allergies when planning foods during school. The board will make every reasonable accommodation to ~~ensure~~ *provide* a safe environment for all individuals..
4. The CSN through the use of ~~a confidential list~~ SCASD's Student Information Management System, will create a medical alert that ~~notify key staff within the district, on a need to know basis,~~ identifies about student's *with* allergies. This information will be available through TAC (Teachers Access Center).
5. *The CSN will provide Food Services and Transportation with a list of students who have food allergies.*
6. In the case of unknown severe allergic reactions, treatment will be given according to the school district physician's Standing Orders for Allergic Emergencies.

### Classroom

1. **All school staff will be trained in the use of Epinephrine to treat life-threatening allergic reactions through online course and returned demonstration to CSN.**
2. *Eliminate allergens to the extent possible or designate specific areas and desks to keep free of allergens, as appropriate.*
3. *Avoid using common food allergens in projects/activities and during parties, celebrations, or special events.*
4. *Elicit broad support to limit or reduce identified allergens.*
5. *Implement appropriate hand washing procedures.*
6. *Communicate rules and expectations about bullying related to food allergies.*
7. *Train classroom teachers and other staff on food allergies.*
8. *Train classroom teachers and other staff on food handling and cleaning procedures to prevent cross contamination.*
9. *Food should not be used as a reward for elementary classroom or school activities unless the reward is an activity that promotes a positive nutrition message*

## **Cafeteria**

1. **All school staff will be trained in the use of Epinephrine to treat life-threatening allergic reactions through online course and returned demonstration to CSN.**
2. Enforce responsibilities of cafeteria monitors/paraprofessionals and food service staff.
3. Develop procedures to identify students with life threatening food allergies.
4. Identify specific areas/ tables that will be allergen safe.
5. Promote hand washing before and after meals.
6. Encourage and enforce **no trading of food** or sharing utensils.
7. Be vigilant of "food bullying."
8. Monitor and enforce strict cleaning and sanitation policies and procedures.
9. Provide ready access to epinephrine and functional two-way communication devices.

## **Field Trips**

1. Follow Policy 121
2. Epinephrine Trained Staff will accompany students on field trips.

## **Buses**

1. Enforce no eating policies.
2. Equip all school vehicles with functional two-way communication devices.
3. Include bus drivers as members of the food allergy management team. (Do we have one of these?)
4. Train bus drivers in allergy awareness. (CSN to provide copy of IHP with Attached ECP for awareness)
5. Assign seating to support safety of students.

## **Extracurricular Activities, Before- and After-School, , and Community Use of School Facilities**

1. Delegate responsibilities for carrying necessary medications (epinephrine); provide a copy of the student's individual written management plan and contact information of parent/ caregiver, the licensed healthcare provider, and the nearest hospital(s).
2. Provide access to functioning two-way communication devices.
3. Discourage trading of food and sharing of utensils.
4. Promote and monitor good hand washing practices.
5. Restrict the use of foods that are known allergens.

6. *Train before- and after-school coordinators in allergy awareness.*
7. *Train before- and after-school coordinators in basic food handling procedures.*
8. *Communicate with and permit parents of students with food allergies opportunities to attend field trips/activities and include information on the provisions for food.*
9. *Promote allergy policy awareness and compliance with outside community members and organizations authorized to use school facilities.*

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