

Barnstable Public Schools
Managing Life-Threatening Allergies in Schools Protocol

ROLE OF THE SCHOOL

The Barnstable Public Schools cannot guarantee that a student will never experience an allergy related event while at school. The Barnstable Public Schools is committed to student safety, and therefore has created this protocol to reduce the risk that children with allergies will have an allergy related event.

Adequate plans and staff, who are knowledgeable regarding preventive measures and well prepared to handle severe allergic reactions, can save the life of a child. Total avoidance of the substance to which the student is allergic is the only means to prevent allergic reactions.

Barnstable Public Schools has a protocol regarding the care of students with life-threatening allergies. This protocol addresses: a) measures to reduce exposure to allergens, and b) procedures to treat allergic reactions. District protocol requires adherence to this allergy management and prevention plan.

The school nurse will oversee development of an individual health care plan (IHCP) for each student with the diagnosis of a life-threatening allergy, which will be reviewed annually. The school nurse will be responsible for organizing and conducting a meeting with the student's parent/guardians, the student, classroom teacher, school nutrition director/manager, and other personnel as determined by the student's needs. The individual health care plan will be developed before the student begins school or immediately after diagnosis of a life-threatening condition and will include a Massachusetts anaphylaxis emergency care plan. The school nurse will assess each student with severe allergies and depending on their needs will work collaboratively to create a safer environment.

Barnstable Public Schools ensure that all staff entrusted with the care of students receive basic education concerning life-threatening allergies and have training in the prevention and management of allergic conditions. All staff will be trained and know their roles in their school's emergency protocol. Administration will ensure that adequate time is provided for this education.

An effective, life-threatening allergy plan needs the cooperation of parents, teachers, counselors, school nutrition staff, administrators, school nurses, school physicians, primary care physicians, extracurricular advisors, bus/transportation personnel, and any staff that might be present where children can be exposed to the allergens that can trigger their extreme reactions.

Barnstable Public Schools are prepared to manage an anaphylactic emergency by:

1. Having responsible school personnel designated and trained to respond.
2. Clearly identifying the student's needs.
3. Requesting parent/guardian to obtain current physician's orders.
4. Maintaining a current supply of epinephrine auto-injector in secure but unlocked location(s) to allow for immediate availability and/or carried by the student when appropriate. The school nurse assesses whether a student can self-carry and/or self-administer an epinephrine auto-injector. Even with students who self-carry/self-administer, staff is ultimately responsible for ensuring the anaphylaxis emergency care plan is being followed.
5. Having available a municipal emergency response team prepared to respond to a 911 call with epinephrine. It is important to know what the local EMS can provide, as some ambulance services may not be permitted to administer epinephrine.

Barnstable Public Schools are ready to respond to severe allergic reactions in children with no history of anaphylaxis or no previously diagnosed allergies. School personnel will contact the school nurse immediately when any allergic reaction is suspected. If the school nurse is not immediately available, staff will contact emergency services.

The school nurse will have a stock epinephrine auto-injector unlocked on a wall in their health office in cases of unknown allergy anaphylaxis emergencies.

Responsibilities

Individual Health Care Plan and Allergy Action Plan

Prior to entry into school (or for a child who is already in school, immediately after the diagnosis of a life-threatening allergic condition), the parent/guardian should meet with the school nurse to develop an IHCP.

SCHOOL NURSE

- After school nurse is made aware of a student with a life-threatening allergy by the parent/guardian, they will work with them to create a care plan. For a student who is already in school, immediately after the diagnosis of a life-threatening allergic condition, meet with the student's parent/guardian and develop an *individual health care plan* for the student and/or allergy action plan.
- The school nurse will determine the need for a Peanut/Nut Free classroom, as appropriate. Form letter will be shared with parents/guardians in that child's classroom for a child with a life-threatening allergy in the classroom.
- For students or staff in Pre-K- 7th grades with severe food allergies, parents/guardians may be notified there is someone in their child's classroom with a life-threatening allergy and that the classroom is peanut/nut safe with a posted sign outside the door. Students in those classrooms should not be bringing any peanut/nut products in for snack or for a celebration.
- Complete a medication administration plan, which should be in accordance with CMR 105 CMR 210.000.
- Determine the appropriateness for the student to self-carry and/or administer his/her epinephrine and ensure access to unlocked medication at all times, per MA DPH regulations (105 CMR210.000)
- School nurse will obtain from the parent/guardian the epinephrine autoinjector order from health care provider and an epinephrine autoinjector for school.
- Familiarize teachers with their students' *anaphylaxis emergency care plans at the beginning of school year*, or as soon as the plans are written. Other staff members who have contact with students with life-threatening allergies should be familiar with these plans on a need-to- know basis. Educate new staff as needed.
- Consider providing awareness and education to the parents and students without allergies as needed.
- Periodically check medications for expiration dates and arrange for them to be current.
- Provide parents/guardians with Emergency Action Plan (EAP) as requested for before and after school activities for them to share with staff/coaches.
- Provide school kitchen manager with updates on student allergies and let main food service office know of new students with life threatening allergies.

Education/Training by School Nurses

- Barnstable Public School nurses will provide education and training to school staff at the beginning of each school year, as well as to parents, and students about life-threatening allergies as appropriate.
- Provide general educational resources about food and other life-threatening allergies to staff, parents, and students. Information about the district allergy management and prevention plan should be shared. Staff will know the signs and symptoms of anaphylaxis, how to activate the medical emergency response plan, and be aware of bullying risk for students with allergies. The importance of not bullying or teasing those with allergies should be emphasized.
- Per nurse discretion at Pre-K-7th grade levels, school nurses to send note home to parents/guardians if classrooms are Peanut/Nut safe regarding snacks, rewards and celebrations.
- Provide more in-depth training to staff in frequent contact with students who have life-threatening allergies as per nurse discretion. In this training, the school personnel authorized to administer epinephrine by auto-injector are trained and demonstrate the skill for competency by the school nurse, in accordance with standards and a curriculum established by the Massachusetts Department of Public Health.

The training, at a minimum, shall include:

1. Procedures for risk reduction

2. Recognition of the symptoms of a severe allergic reaction
 3. The importance of following the medication administration plan
 4. Proper use of the epinephrine auto-injector
 5. Requirements for proper storage and security, notification of appropriate persons following administration, and record keeping
- All contracted staff (e.g., bus drivers/monitors and school nutrition staff) will receive the same life-threatening allergy training as permanent school staff. The Nurse Leader will train the bus drivers/monitors and the Director of Food Services the school nutrition staff.

SCHOOL PHYSICIAN

- Participate in the multidisciplinary team to develop and implement the *allergy management and prevention plan as requested*.
- Sign standing order for Benadryl and epinephrine autoinjector as needed in an emergency administered by a licensed registered nurse in the case of anaphylaxis in an undiagnosed individual.
- Provide education and training to school nurses on any new updates and information related to life threatening allergies.

PARENT/GUARDIAN

- Provide licensed health care provider documentation of life-threatening allergy(s) by providing individual anaphylaxis emergency care plan and order for epinephrine. May request description of student's past allergic reactions, including triggers and warning signs.
- Provide licensed health care provider order for an epinephrine auto-injector as well as other medications needed to be renewed at the beginning of each school year, including parent/guardian signature.
- Parent/guardian and school nurse to collaborate on Individual Health Care Plan (IHCP).
- Parent/guardian to provide nurse with at least 1 EpiPen autoinjector at the beginning of the school year.
- For before and after school program participation, parent should complete the Emergency Action Plan and give copy to extracurricular coordinator or coach. It is the responsibility of the parent/guardian to inform before or after school program coordinators of any medical conditions.
- Provide consent for field trips for delegated staff or student to bring emergency medication.
- Inform bus drivers and/or transportation department of allergies
- The parent/guardian will notify the adult staff member (or coach) in charge with an anaphylaxis emergency action plan for their child with life-threatening allergies.

STUDENTS WITH ALLERGIES

- Participate in allergy management as developmentally appropriate
- Do not trade or share foods
- Wash hands before and after eating
- Learn to recognize symptoms of an allergic reaction
- Promptly inform an adult as soon as accidental exposure occurs or symptoms appear

FOOD SERVICE STAFF

- Annually food service staff will be trained on food allergies- recognition and treatment (epinephrine auto-injector) , and cross contamination, as organized by the Director Food Services.
- Schools with K-7th grade students will have Peanut/Nut free tables in the cafeterias that will be monitored by assigned school staff.
- Food service personnel or assigned staff will have the responsibility for cleaning the allergen free tables between each lunch period. Food service personnel will clean allergen free tables with soap and water and the district approved cleaner.
- The food service point of sale system will have food allergies noted in their NutriKids system and food service staff will look at student's lunch tray and note any items that may cause allergies and address with students.

DIRECTOR OF FOOD SERVICES

- Will make appropriate food/meal substitutions for students with food allergies as requested by parent and documented by health care provider. Be prepared to make lists of all ingredients used in food production and service available.
- Understand the legal protections for a student with life threatening allergies
- Read all food labels and recheck routinely for potential food allergens
- Train all school nutrition staff and substitutes to read product food labels and recognize food allergens.
- Provide approved allergy awareness training and maintain documentation of training.
- Review and follow sound food handling practices to avoid cross-contact with potential food allergens.
- Following cleaning and sanitation protocols strictly to avoid cross-contact.
- Establish other cafeteria policies regarding students with food allergies as needed
- Have a functioning communication system to activate emergency services and call school nurse if needed.

CLASSROOM STAFF

- School staff to participate in annual training regarding allergies and epinephrine auto-injector administration as provided by the school nurse.
- The staff will understand that the school nurse will communicate with parents by sending a standard letter regarding a student(s) in a classroom with a life-threatening allergy in the classroom.
- The school nurse may meet individually with staff members to help them prepare for their responsibilities.
- Review and understand the anaphylaxis emergency care plan of any student(s) in your classroom with life-threatening allergies that the school nurse provides.
- Participate in a multidisciplinary team to develop and implement the allergy management and prevention plan as requested by school nurse.
- For students or staff in Pre-K- 7th grades with severe food allergies, parents/guardians may be notified there is someone in their child's classroom with a life-threatening allergy and that the classroom is peanut/nut safe with a posted sign outside the door. Students in those classrooms should not be bringing any peanut/nut products in for snack or for a celebration.
- All allergy action plans should be kept in teacher substitute folder.
- Classroom animals can be problematic on many levels. If animals are present in the classroom, pay special attention to the ingredients in their food, as many animal feeds contain peanuts.
- As appropriate, educate classmates to avoid endangering, isolating, stigmatizing, or harassing students with food allergies. Be aware of how the student with allergies is being treated; enforce school rules about bullying and threats.
- • Information about life threatening allergies will be provided to volunteers and substitutes by the school nurse as requested.
- Never question or hesitate to act if a student reports signs of an allergic reaction. Implement the emergency plan, which includes alerting the school nurse.
- All schools are LATEX-FREE.
- Prohibit students from sharing or trading any food.
- Encourage handwashing before and after eating.
- Per Wellness Guidelines/Policy use non-food items for classroom activities.
- Staff should have a walkie-talkie, cell phone, or other device for emergency communication if they are bringing students outside of the building.

BEFORE/AFTER SCHOOL ACTIVITIES (Staff/Coaches)

- After-school activities sponsored by the school must be consistent with school protocols regarding life-threatening allergies.
- See school nurse for before/after school activities staff for training; and coaches see athletic trainer.
- During school sporting events, the athletic trainer is responsible for keeping an epinephrine auto-injector.
- A current epinephrine auto-injector is readily accessible unlocked in the school nurse's office, and an adult staff member onsite should be trained on its use, for previously diagnosed students in schools registered with the MADPH.

FIELD TRIP/SCHOOL BUS

- Teachers submit field trip request form with class list to nurse, 30 days ahead of time.
- School nurses will communicate with the teacher regarding students with life threatening allergies and review to determine if a nurse needs to go and review the emergency action plan.
- Staff will be trained to administer epinephrine auto-injector and activate EMS as needed on a field trip. Individual student's epinephrine auto-injector will accompany them on all field trips.
- No food should be eaten on the bus, except for students with medical conditions such as diabetes.

- School personnel will have a system for communicating (e.g., cell phone, walkie-talkies, etc.) any problems per emergency action plan.

TRANSPORTATION

- Eating food is prohibited on school buses.
- School bus drivers shall be trained by appropriate personnel on risk reduction procedures, recognition of allergic reaction, and implementation of bus emergency plan procedures, including the administration of epinephrine (per 540 CMR 8.00 [Registrar of Motor Vehicles] pursuant to M.G.L. c. 90, § 8A). Drivers must receive training relative to administration of an epinephrine auto-injector. Drivers with contracted bus companies should receive the same allergy training as permanent staff.. There are no stock epinephrine auto-injectors on the bus. 911 will always be called.
- The school bus must have a cell phone, walkie talkie or other means of communication for emergency calls.

CUSTODIAL/ENVIRONMENTAL

- Cleaning procedures are the same including warm soapy water or approved district product in areas of the school where allergens may be found per department requirements.
- Each school has their own cleaning schedule.
- Only non-latex gloves will be used in the schools.
- Building staff and/or Nursing to notify principal and maintenance if there is an identified area of concern for students with bee/insect allergies. Prompt removal of any bee/insect nests in buildings or grounds.

EMERGENCY RESPONSE

- The schools have a medical emergency response plan as required by the Emergency Medical Treatment & Labor Act.
- The Director of Health Services registers with the Massachusetts Department of Public Health to train unlicensed personnel on administering epinephrine by auto-injector as required every 2 years.
- All staff will be offered annual training on life-threatening allergies and administration of epinephrine by the school nurse in each building at the beginning of each school year.
- The Massachusetts Department of Public Health regulations require auto-injector training twice a year at a minimum.
- Stock Epi-Pens will be on the wall in each nurse’s office unlocked. Student Epi-Pens will be unlocked in the nurse’s office.

Reference: DESE 2016 “Managing Life-Threatening Allergies in Schools”

***Addendum Added August 17, 2020**

*The CDC guidance outlines important COVID-19 prevention strategies like social and physical distancing in classrooms, buses, and shared spaces. Recommendations include, but are not limited to:

- Wearing masks covering the nose and mouth for all staff members and students Prek-12 (BPS has chosen to add all students in all grades). Exceptions for meals, mask breaks, and medical exemptions are permitted
- Postponing field trips, events, and extracurricular activities until safe to resume
- Social distancing 6 feet apart. Spacing of desks and seating to 6 feet apart with desks facing in the same direction
- As needed, consider staggering arrival and drop-off times or locations, spacing on school buses, as well as staggering movement within buildings

Due to pandemics and communicable diseases, school districts need to make adjustments to keep everyone safe. During these times, it is important we make sure to consider the needs of children and families in the management of food allergies – especially if lunch and dining areas in the school may be changing to allow for social distancing. To help reduce the risk of food allergy exposure, these are the additional CDC recommendations during a time of pandemic:

- Teach and reinforce hand washing – communicable viruses and bacteria like COVID-19 require the use of hand sanitizers and handwashing with soap and water. Research shows that plain water or hand sanitizers are not effective in removing food allergens. Ideally, students should be washing their hands with soap and water before and after handling and eating food
- If classrooms are to be used for lunch and snack, it is recommended that desks are cleaned and disinfected if different students are using the same desk. All students should clean their desk after eating lunch or a snack.
- If cafeterias are able to be used, kitchen staff will plate each child’s meal to limit the use of shared serving utensils. In addition, there will be the peanut/nut free table in the cafeteria.
- If students are eating in the classroom, they will have a lunch bag from home or a lunch bag from the cafeteria
- Serve pre-packaged food instead of buffet-style meals
- Serve packaged food items with ingredient labels
- There will be no sharing of foods and utensils
- Limit the sharing of supplies and objects such as electronic devices, toys, games, and books
- If possible, train all teachers and staff on safety actions – including how to recognize and respond to anaphylaxis
- If students with pollen allergies eat lunch/snack outside, it may be challenging to distinguish between allergic rhinitis symptoms and food allergic reactions. If possible, train all teachers and staff distinguishing features of food allergy reactions (rapid onset after ingestion of allergen and additional symptoms such as hives, facial swelling, coughing, nausea, etc.)
- Symptoms of anaphylaxis triggered by a food allergen are no different from those triggered by an insect sting. Staff should be trained to act quickly whenever an allergic reaction is suspected
- Adult and junior epinephrine should be easily accessible at all times in the event an allergic reaction should occur
- Nurses to work with students and families before school starts regarding any special plans and concerns they may have, such as eating in the classroom
- Parents to keep in mind the specific needs of their child(ren) in relation to the school’s environment and any COVID-19 or communicable diseases that change the routine and usual prevention strategies the school may institute
- Nurses to keep in mind specific student needs in relation to changes in the practices we usually have such as eating lunch in the classroom. For example: Nurses will notify parents of classrooms that are Peanut/Nut safe that they will not be able to send in with their child peanut/nut products for snack or lunch since there will be eating in the classroom.

References:

Food Allergy Research & Education (FARE). (2020, August 5). *Recommended COVID-19 Guidelines Help Schools Navigate.* <https://www.foodallergy.org>

National Association of School Nurses (NASN). (2020, September 14). *Food Allergy and Anaphylaxis in School during COVID-19.* <https://www.nasn.org/nasn-resources/practice-topics/covid19>

