Daviess County Public Schools is committed to providing a safe and nurturing environment for students. The Daviess County Public Schools understands the increasing prevalence of life threatening allergies among school populations. Recognizing that the risk of accidental exposure to allergens can be reduced in the school setting, Daviess County Public Schools is committed to working in cooperation with parents, students, and physicians, to minimize risks and provide a safe educational environment for all students. The focus of allergy management shall be on prevention, education, awareness, communication and emergency response.

The goals for allergy management include:

1. To define a formal process for identifying, managing, and ensuring continuity of care for students with life-threatening allergies across all transitions (PreK-12).

2. To maintain the health and protect the safety of children who have life-threatening allergies in ways that are developmentally appropriate, promote self-advocacy and competence in self-care and provide appropriate educational opportunities.

3. To ensure that interventions and individual health care plans (IHCP) for students with life-threatening allergies are based on medically accurate information and evidence-based practices.

4. To develop an internal process where ongoing review, reflection, and improvements can be considered to strengthen and improve the safety of students with life-threatening allergies.

It is the policy of the district to provide all students, through necessary accommodations where required, the opportunity to participate in all school programs and activities. Accordingly, the superintendent shall direct district-level staff and school-level administrators and staff, to act affirmatively and work closely with parents to assure that the needs of children with documented allergies are taken into consideration in planning for district programs. The superintendent/designee shall ensure the district’s guidelines are reviewed and updated annually as deemed necessary.
Life-Threatening Allergy Guidelines (LTFA)

BACKGROUND

Allergic food reactions can span a wide range of severity of symptoms. The most severe and potentially life threatening reaction is anaphylaxis. This protocol is to be used for students who are at risk for anaphylaxis and in circumstances where a previously undiagnosed life-threatening allergic response occurs.

Anaphylaxis refers to a collection of symptoms affecting multiple systems in the body, the most dangerous of which are breathing difficulties and a drop in blood pressure. Foods that most commonly cause anaphylaxis, a life threatening allergic reaction, include but are not limited to: peanuts, tree nuts, shellfish, milk, wheat, soy, fish, and eggs. These severe allergic reactions can occur within minutes of ingestion or a reaction can be delayed for up to several hours later. Some reactions are “biphasic” in nature with an initial period of symptoms, symptom-free period minutes to hours later, followed by severe shock-like symptoms. At present there is no cure for food allergies and strict avoidance is the key to preventing reactions. Exposure may occur by ingestion, contact, or inhaling fumes as advised in a student’s Allergy Action Plan completed by a physician.

MEDICATIONS

The most commonly prescribed medication for the treatment of anaphylaxis is Epinephrine.

CARE PLAN CONSIDERATIONS/OPTIONS

There are a variety of student accommodation and care plans that are appropriate to use for students in our schools that experience health conditions that may impact a student’s school day and academic program. The plans that are most often seen are:

Allergy Action Plan – a plan completed by the student’s licensed physician or physician’s designated licensed extender, i.e., a Nurse Practitioner or Physician’s Assistant that is designed for use by both nursing and school personnel. It outlines the care that a student could need in an emergency situation and used as a guide to respond to a student who is experiencing a potentially critical situation.

Individual Health Care Plan for Accommodations – A document developed by the district’s nursing staff in collaboration with parents and the school team to identify reasonable accommodations for the child’s needs throughout the school day.

Section 504 Plan- The intent of Section 504 of the Rehabilitation Act of 1973 is to provide students with disabilities equal access to educational programs, services, and activities. Students with disabilities may not be denied participation in school programs and activities solely on the basis of disability.

All students medically identified with life-threatening allergies will be recommended for a 504 accommodation plan where the Allergy Action Plan will be developed and monitored.
RESPONSIBILITIES OF THE PARENT/GUARDIAN OF AN ANAPHYLACTIC STUDENT

Each parent/guardian of their child with a Life-Threatening Allergy shall have the following expectations:

1. Teach your child to:
   a. Recognize the first symptoms of a food allergic/anaphylactic reaction.
   b. Communicate with school staff as soon as he/she feels a reaction is starting.
   c. Carry his/her own epinephrine auto-injector, per the allergy action plan, and communicate this with the school nurse and staff.
   d. Not share snacks, lunches, drinks or utensils.
   e. Understand the importance of hand washing before and after eating.
   f. Report teasing and/or bullying that may relate to the child’s allergy.

2. Take responsibility for his/her own safety. As children get older, teach them to:
   a. Encourage self-advocacy of the seriousness of the allergy to adults and peers.
   b. Communicate symptoms as soon as they appear to the school nurse and teacher.
   c. Encourage education on label reading and ingredient safety.
   d. Administer his/her own epinephrine auto-injector and be able to train others in its use.
   e. Develop awareness of their environments, including allergy-controlled zones and to practice age appropriate behavior regarding health and safety.

3. Inform the school nurse of your child’s allergies prior to the opening of school (or as soon as possible after diagnosis) or enrollment in school. **All food allergies must be verified by documentation from physician or physician’s designated licensed extender (Nurse Practitioner (NP) or Physician Assistant (PA)).**

4. Work with the school team collaboratively to develop the Individual Health Care Plan for Accommodations, in the classroom, in the cafeteria, in after-care programs, during school-sponsored activities, and provide an **Allergy Action Plan.** Medical information from the child’s treating physician must be provided as needed to write the Plans. (A licensed physician is defined as a doctor of medicine (MD) or a doctor of osteopathy (DO) is recognized.)

5. Complete and submit all required medication forms.

6. A physician signature is required on district allergy action plans and self-administration plan. **Sign release for school personnel to consult with family physician/allergist and all medical providers.**

7. **Provide the school with current cell phone, pager, etc and maintain updated emergency contact numbers and medical information.**

8. Provide the school nurse with up-to-date emergency medications (including Epinephrine) so they can be placed in all required locations for the current school year. Medications will comply with the district medication policy of proper labeling and expiration.

9. To consider providing a medical alert bracelet for your child. Nationally accepted bracelets may be found at: Medic Alert, 1-800-432-5378; 2323 Colorado Avenue, Turlock, CA 95382; [www.medicalalert.org](http://www.medicalalert.org)

10. To complete appropriate forms requested by Transportation or other appropriate departments and/or programs.

11. Provide Epinephrine on field trips that will be controlled by a trained school employee.

12. To go on your student’s field trips if possible and if requested.

13. To provide “safe snacks” for your student’s classroom so there is always something your child can choose from during an unplanned special event.

14. Encourage child to wash hands before and after handling food. Encourage child to identify the allergy controlled zone when eating and to utilize easy access to soap in or near classrooms.

15. Inform the school of any changes in the child’s Life-threatening Food Allergy status.

16. Provide the school with the physician’s statement if the student no longer has food allergies.
EXPECTATIONS OF STUDENT
Each student with a Life-Threatening Allergy shall be expected for the following:

1. To develop a relationship with the school nurse and/or another trusted adult in the school to assist in identifying issues related to the management of the food allergy in the school. (Trusted adults are people who respect your feelings and will listen and help work out a solution to any problem you may have. Trusted adults will provide guidance and support).
2. Use proper hand washing before and after eating and throughout the school day.
3. To avoid sharing or trading of foods or eating utensils with others. Take responsibility for avoiding food allergens.
4. To not eat anything with unknown ingredients or known to contain any allergen.
5. To avoid putting objects in mouth such as writing utensils, fingers, or other foreign object.
6. To be proactive in the care and management of their food allergies and reactions based on their developmental level. Learn to recognize personal symptoms.
7. To notify an adult immediately if they eat something they believe may contain the food to which they are allergic.
8. To notify an adult if they are being picked on, bullied, or threatened by other students as it relates to their food allergy.
9. To keep emergency epinephrine with the student, in the nurse’s office or in the classroom. If the student is authorized, per the Allergy Action Plan, to carry the emergency medication with them at all times, he/she will demonstrate responsibility of this practice by completing the skills checklist with the school nurse (found in the appendix within the Epinephrine Self-Administration Authorization packet for Anaphylaxis).
10. To develop an awareness of their environment and their allergy-controlled zones.
11. As developmentally appropriate, know the overall Individual Healthcare Plan and understand the responsibilities of the plan, as developmentally appropriate.
12. As developmentally appropriate, develop greater independence to keep themselves safe from anaphylactic reactions, as developmentally appropriate.
RESPONSIBILITIES OF SCHOOL ADMINISTRATOR
Daviess County Public Schools District/School Administrator shall ensure the following:

1. Follow all applicable federal laws, including ADA, Section 504, and FERPA, as well as all state laws and district policies/guidelines that may apply. Accordingly, school administrators will recommend students with LTFA complete a 504 plan.
2. To have available the appropriate allergy forms to the parent and explain that the required forms must be returned and approved by the school nurse prior to the child attending school.
3. Meet with parents and listen to their needs and concerns.
4. The HIPAA Compliant Authorization for Exchange of Health & Education Information will be presented to parents for signature to provide needed communication between the supervising physician and school for effective implementation of the plan.
5. Establish a core team comprised of Parent, Principal, Teacher, Student, Nurse, Cafeteria Manager, and other personnel deemed necessary to make decisions about food allergies.
6. Create an emergency action plan for addressing life-threatening food based allergic reactions while consulting the school nurse, student's parent(s)/guardian(s), and physician.
7. Ensure district-wide mandatory in-service training and education on reducing life-threatening allergy risks, recognizing food allergy symptoms, and emergency procedures for appropriate staff to include, but not limited to the following topics (sign-in sheet must be maintained on file):
   a. A description/definition of severe allergies and a discussion of the most common foods causing allergic reactions.
   b. The signs and symptoms of anaphylaxis.
   c. The correct use of an Epinephrine device.
   d. Specific steps to follow in the event of an emergency.
8. Reinforce a no-food and no-utensil trading/sharing best practice.
9. Ensure that the School Nurse in consultation with suggestions from student’s parent(s)/guardian(s) and the physician or designated licensed extender will prepare the Individual Health Care Plan for accommodations. The physician will prepare and sign off on the Allergy Action Plan.
10. Establish food allergy safe zones as needed in each school cafeteria. These zones will be designated by a universal symbol. These zones will be cleaned and sanitized as per district protocol.
11. Ensure the Individual Health Care Plan for Accommodations available in the nurse’s office and a student’s homeroom at the elementary levels and in the nurse’s office at the secondary schools.
12. Recommend that parents/guardians attach a photograph of their student with a Life-Threatening Food Allergy to their Individual Care Health Plan for Accommodations. When appropriate, student’s photos will be placed in the kitchen only for kitchen staff to view as an extra protective measure. Pictures will be out of view of other students and carried out in accordance with patient confidentiality regulations.
13. When appropriate, students are allowed and encouraged to carry their Epinephrine on them, as permitted by the Allergy Action Plan/IHCP, district's Administration of Medication Policy and Self-Administration Epinephrine Authorization Plan.
14. Ensure that a copy of student's IHCP is maintained in each teacher's, substitute teacher folder, and posted in the elementary-level classrooms. The folder should be maintained in an organized, prominent and accessible format for a substitute teacher. A bright colored label should be on the outside of sub folders (MEDICAL ALERT:). The student's medical issue will be stated on the label.
15. When appropriate, familiarize teachers with the Individual Health Care Plan for Accommodations of their students and any other staff member who has contact with student on a need-to-know basis.
16. Instruct and reinforce with facilities personnel to develop cleaning protocol to ensure that the threat of allergens is minimized.
17. The school’s emergency protocol on Life-Threatening Allergies will be posted in appropriate locations, i.e. nurse office, main office and other areas as designated by the Building Principal. Communication will also be enclosed in the Back-to-School Newsletter.
18. Notify staff of the locations of Epinephrine devices in the school and maintain records of trained personnel documentation.
19. A contingency plan will be in place using designated building staff and understood by all staff and students in the event the nurse is not in the office or in the building. Staff will call 911 in all instances of Epinephrine administration.
RESPONSIBILITIES OF SCHOOL HEALTH PROFESSIONALS
The school nurse is the primary coordinator of each student’s life-threatening allergy plan.
Each school nurse will have the following responsibilities:

1. Work with school administrator in completion of recommended 504 plan for LTFA students.
2. Meet with parent/guardian(s) of a student with a Life-Threatening Allergy to develop an Individual Health Plan for Accommodations for the student, which may include the use of MEDIC-ALERT bracelets and other methods of identification for students with Life-Threatening Allergies.
3. Maintain updated AAP/Individual Health Plan for Accommodations in the nurse’s office, in the classroom when appropriate. The emergency action plans will also travel with Epinephrine medication on school sponsored field trips.
4. Assist the principal in providing information about students with Life-Threatening Allergies to staff where there is a need-to-know basis.
5. In conjunction with the principal, provide yearly in-service training and education for staff regarding Life-Threatening Allergies, symptoms, risk reduction procedures and emergency procedures including demonstration on how to use the Epinephrine. The school nurse shall retain documentation of those personnel who have received training on a yearly basis.
6. Familiarize teachers/substitutes with the Individual Health Plan for Accommodations of their students and any other staff member who has contact with student on need-to-know basis.
7. The Kentucky Department of Education (KDE) and the Nurse Practice Act govern the administration of prescription medications, and school board policy will be followed in emergency situations. Nurses are responsible for following the regulations that permit registration of non-licensed personnel to be trained and to administer emergency medications such as Epinephrine.
8. Educate with parents the appropriate locations for storing the Epinephrine and the possibility of receiving more than one Epinephrine as necessary. Locations for storage will follow the manufacturer’s guidelines for avoidance of light and extreme temperatures.
9. Inform the school principal and parent/guardian if any student experiences an allergic reaction that has not been previously diagnosed.
10. Contingency plan will be in place in the event the nurse is not in the building utilizing trained and identified back-up personnel.

RESPONSIBILITIES OF TEACHERS
Each teacher shall have the following responsibilities:

1. Knowledge of the signs and symptoms of severe allergic reaction as provided in the student’s health care plan, and be aware of and implement the emergency plan if a reaction is suspected.
2. Review the Individual Health Plan for Accommodations in a setting with the nurse and parent(s)/guardian(s) of any student in your classroom with life-threatening allergies along with relevant staff members.
3. Maintain a copy of the student’s Individual Health Plan on file, keep a copy in the substitute teacher folder, and post in classroom. Make sure a substitute teacher has the Individual Health Plans in a readily accessible, identifiable location in case of absence.
4. Participate in in-service training about students with life-threatening allergies including demonstration on how to use the Epinephrine.
5. In collaboration with the nurse and parent(s)/guardian(s) of the allergic child, set a classroom protocol regarding the management of food in the classroom according to Board Policy 09.2.
6. Participate in the planning of a student’s re-entry into school after an anaphylactic reaction.
7. Notify all parents by written communication of any school related activity that includes the use of food.
8. Reinforce appropriate classroom hygiene practices/hand washing before and after eating.
9. Respond immediately to reports of students being teased or bullied about their food allergies.
10. Follow Allergy Action Plan and call 711 when life-threatening allergy related symptoms occur to alert the school’s front office of emergent need to call 911. The school’s emergency response team will respond to the emergency to assist the teacher/staff member.
RESPONSIBILITIES OF SCHOOL NUTRITION SERVICES:
The following applies to ALL DCPS Elementary Schools. Middle and High Schools will implement guidelines based upon age appropriateness and individual student allergy action plan needs. The nutrition services department shall:

1. Annually, provide professional development/training to nutritional service employees regarding food allergies and safe food handling practices to avoid cross contamination with potential food allergens. This would include annual update training on life-threatening allergies along with demonstration of Epinephrine use.
2. Food service employees will wear non-latex gloves. Gloved hands changed at appropriate times to avoid cross contamination with potential food allergens.
3. Maintain a list of students with food allergies within the food service area with a photo of the student wherever possible along with the child’s specific allergy alert. (not for public viewing)
4. Maintain knowledge of which food products contain allergens identified by product labels, school health coordinator and related health staff.
5. Ensure meal lines are properly labeled where food choices contain common food allergens (i.e. peanuts, tree-nuts, eggs, etc.).
6. Provide allergen-safe zones in schools cafeterias and identify these areas with a universal symbol used in all Daviess County Public Schools. With parental permission, students with a food allergy will eat at the allergen-safe table(s).
7. Student’s allergy information will be entered into the Point of Sale database as a pop-up note on the serving line to assure that the cashier does a last check for allergen food/foods that the student is not supposed to eat. Information will remain confidential and shared on a need-to-know basis in compliance with federal privacy regulations.
8. Cafeterias shall not openly serve peanuts (includes peanut butter), but may serve peanuts as a trace ingredient. An exception can be made on an individual student basis where a student may have a compelling need to eat peanut butter product as approved by the school principal (i.e. dietary need or requirement).
9. We will serve brunch, but will remove eggs from the brunch menu, as appropriate by school level (elementary; middle; and high school).
10. Respond appropriately to all complaints/concerns from any student with a life-threatening allergy, including accompanying a student to see school nurse if complaining of any potential symptoms. A response to complaints/concerns would also include any type of hazing or inappropriate behavior on the part of other students that is reported or observed.
11. Communicate menu/allergens to parents/students as needed or requested by the parents. School shall routinely provide menu information to all parents to enable parents/students to properly plan for school meals. In the case of 24 hour or less menu change, this notice shall be communicated using the One-Call Now notification system and either the lunchroom manager or office staff will send the message to parents.
12. On occasions that an allergen student cannot eat due to the scheduled or changed menu, school nutrition staff will provide an alternate meal for student meeting the requirements of the Allergy Action Plan.
RESPONSIBILITIES OF CUSTODIAL SERVICES and CAFETERIA MONITORS
The custodial services and cafeteria monitors shall be under the direction of the Building Principal:

1. Use a separate wash bucket and cloth with district-approved cleaning agents solely for the cleaning of allergen-safe zones. This will include disinfecting solution and PH7 all-purpose soap as effective cleaning solutions.
2. Receive training and instructions on allergen zone maintenance areas.
3. Participate in in-service training for students with life-threatening allergies including demonstration of Epinephrine use.
4. Respond appropriately to all complaints/concerns from any student with a life-threatening allergy, including accompanying a student to see school nurse if complaining of any potential symptoms. A response to complaints/concerns would also include any type of hazing or inappropriate behavior on the part of other students that is reported or observed.

RESPONSIBILITIES OF THE TRANSPORTATION DEPARTMENT
All school bus drivers shall be informed when he/she is transporting a child with a Life-Threatening Allergy. The school bus drivers shall:
1. The transportation department maintains health concern files (district ridership form) separately from those maintained at each school. It is the parent(s)/guardian(s) responsibility to communicate health concerns such as a life-threatening allergy directly to the transportation department by completing the district ridership form (see Transportation Section).
2. Have functioning emergency communication devices (e.g., two-way radios) on each bus.
3. Maintain and reinforce policy of no food/eating on the bus except for those medically documented needs, i.e., diabetes.
4. Bus drivers will not hand out food treats even on special occasions.
5. Identify on driver route sheets the students with health concerns, including anaphylactic risk.
6. Participate in in-service training for students with life-threatening allergies including demonstration of how to use the Epinephrine. It is the parent’s responsibility to provide allergy medication with their child in the event medication needs to be administered. All medication should be stored in a secure location.
7. District School Health Coordinator will furnish Transportation with a list, by school, of students with severe allergies.
RESPONSIBILITIES OF PERSONS IN CHARGE OF CONDUCTING AFTER-SCHOOL ACTIVITIES

Person(s) in charge of extracurricular programs shall have the following responsibilities:

1. The Allergy Action Plan will be available for parents to copy and give to others who assume responsibility for their child. Personnel may include:
   a. Before or After School Program
   b. Coaches
   c. Overnight tournament sponsors or district chaperones
   d. Clubs, programs, or sports will maintain a list of students with severe life-threatening allergies. These individual programs will be responsible for obtaining this information from School Nurse and/or parent(s)/guardian(s).

2. District employees will participate in in-service training about students with life-threatening allergies including demonstration of Epinephrine use at least annually. The training will be documented and kept on file in the principal’s office.

3. After School Program (K-5) will keep the Allergy Action Plan on file with the School ASP Director with a photo of the student, wherever possible, along with the child’s specific allergy alert (not for public viewing). ASP personnel will have swift access to the child’s Epinephrine medication provided by the parent should an emergency occur while in the ASP’s care.

4. Multiple (2 or more) school ASP personnel will receive training on life-threatening allergies and demonstration of Epinephrine annually. School ASP Directors shall ensure that at least one trained employee is present at all times children are under DCPS supervision and care.

5. After School Program (K-5) will provide peanut-restricted snacks in coordination with the School Health Coordinator. The list of peanut-restricted snacks will be reviewed and/or revised annually and provided to participating parents of children with documented life-threatening allergies as requested by the parent/guardian.

RESPONSIBILITIES DURING RECESS AND PHYSICAL EDUCATION CLASSES

During recess and physical education classes for a student with a Life-Threatening Allergy, the school shall have the following responsibilities:

1. Children will be under the supervision of at least one adult. Epinephrine Packet will be taken outside if specified in the child’s Allergy Action Plan/Individual Health Care Plan for Accommodations. The epinephrine device will be carried by a designated, trained district employee or by the student, if authorized, with a completed Epinephrine Self-Administration Packet for Anaphylaxis.

2. Emergency communication device (walkie-talkie, cell phone) will be accessible and functional.

RESPONSIBILITIES ON FIELD TRIPS

The school shall have the following responsibilities when a student with Life-Threatening Food Allergy attends field trips:

1. On field trips, consideration given for avoiding food allergen exposure is paramount, and parental attendance is highly encouraged.

2. District Food Service Director and School Lunchroom Managers will develop a uniform menu that will be used for all field trips, district-wide. The menu will minimize, to the extent possible, the most common LTFA products and meet all requirements of the National School Lunch Program.

3. A trained district employee such as the classroom teacher will accompany the class on the field trip and will maintain each applicable student’s Epinephrine and will follow the child’s Allergy Action Plan/IHCP.

4. Copies of student’s Allergy Action Plan will be carried on all field trips.

5. Staff will call 911 in all instances of Epinephrine use. Parent(s)/Legal Guardian(s) will be notified.