West Valley School District Food Allergy Management & Prevention Plan (FAMPP)

Purpose:

The West Valley School District believes that the safety and well-being of children who are at risk of anaphylaxis is the responsibility of the entire community. West Valley School District understands the increasing prevalence of life-threatening allergies among school populations. The district also recognizes that the chance of accidental exposure to allergens can be reduced in the school setting by working in cooperation with parents, students, staff, and health care providers. The goal of these collaborative efforts is to minimize risks and provide a safe educational environment for all students.

This Food Allergy Management and Prevention Plan (FAMPP) is designed to limit the risk posed to students with food allergies, and includes:

1. Ensuring the daily management of food allergies for individual children
2. Preparing for food allergy emergencies
3. Providing professional development on food allergies for staff members
4. Educating children and family members about food allergies
5. Creating and maintaining a healthy and safe educational environment

About Food Allergies

A food allergy is defined as an adverse health effect arising from a specific immune response that occurs reproducibly with exposure to a particular food. In some cases, the immune response can be life-threatening. Although the immune system normally protects people from germs, in people with food allergies, the immune system mistakenly responds to food as if it were harmful. This can cause symptoms that can affect the respiratory system, gastrointestinal tract, skin, or cardiovascular system and lead to a life-threatening reaction called anaphylaxis.

Symptoms of anaphylaxis include, but are not limited to:

- Shortness of breath; wheezing; repetitive cough
- Pale, blue or flushed skin; feeling faint or fainting; weak pulse; irregular heartbeat; dizziness
- Tightness or closing of throat; hoarseness; other voice changes; difficulty swallowing; feeling “something is stuck” in throat; not talking
- Swelling of tongue and/or lips
- Itchy/runny nose; sneezing
● Hives or rash; widespread itching or redness; swelling
● Stomach/abdominal cramps; vomiting; diarrhea
● Feeling of anxiety, confusion, or that something bad is about to happen

The epinephrine auto-injector is a disposable drug delivery system with a concealed needle that is spring activated. The active ingredient is epinephrine, which is the treatment of choice during anaphylactic reactions. Once injected, epinephrine quickly works to constrict blood vessels, relaxing smooth muscle in the lungs to improve breathing, stimulates the heartbeat and works to reverse the signs or symptoms of anaphylaxis.

For more detailed information see Voluntary Guidelines for Managing Food Allergies in Schools and Early Care and Educational Programs (Center for Disease Control and Prevention. Pages 17-21). Food Allergies | Healthy Schools | CDC

Identifying Students with Food Allergies

Parents/guardians have the responsibility to inform the school of any health condition that may result in anaphylaxis. Parents/guardians are encouraged to provide this information on school health forms but may also convey this information via written notification. Upon this receipt and annually thereafter, the school will request the parents/guardians obtain and complete an anaphylaxis Emergency Care Plan (ECP) along with corresponding school Medication Authorization Forms. Parents/guardians are encouraged to work actively and directly with the child's healthcare provider to develop a specific emergency plan to manage their individual care and emergency actions while in school.

Student Emergency Care Plans

When the school nurse receives notice that a child has a life-threatening food allergy, they will work with parents/guardians to gather documents, information, and medications to develop and implement an appropriate emergency care plan. The emergency care plan, along with necessary medications, must be in place prior to in-person learning and/or participating in any extracurricular activities.

Every year, before the first day of student attendance, parent/guardian must provide the following updated information to the school nurse:
● “Food Allergy Assessment” form or “Allergy Information for School” form
● “Medical Authorization for Severe Allergy Management at School” signed by the parent/guardian and healthcare provider
● “Agreement for Self-Administration of Asthma and Anaphylaxis Medication” if appropriate for the student and agreed upon by parent/guardian, healthcare provider, and school nurse
● Provide 1-2 up-to-date epinephrine auto-injectors and/or medication as prescribed by healthcare provider
Emergency Care Plan (ECP)

All students with life-threatening allergies must have an emergency care plan on file. The severe food allergy medical authorization form must be completely filled out and signed by a licensed healthcare provider, as well as the child’s parent or guardian. This provides direct orders, as well as consent for medical treatment. For some children this information is the only plan necessary.

Individual Health Plan (IHP)

Depending on the nature and extent of the student’s allergy, and after receiving acceptable notification, the nurse may, in collaboration with the healthcare provider, parent/guardian, and student, develop an Individual Health Plan. These plans should include both preventative measures to help avoid the accidental exposure to allergens, as well as the emergency measures in case of exposure.

504 Plan

The District and parents/guardians may collaborate to determine if the child qualifies as a person with disabilities under the Section 504 of the Rehabilitation Act of 1973. The District shall assemble a multidisciplinary team which will include a variety of school staff and the parents to determine this eligibility. If the child is found eligible, the team works to develop a plan which will include the necessary accommodations, aids, and services. The 504 plan is updated annually or as needed. More information on 504 procedures can be found on the District website. https://www.wvsd208.org/

Prepare for Food Allergy Emergencies

All ECPs will be reviewed by the school nurse and a comprehensive list of students with ECP’s will be filed in a place where staff can easily get to them in an emergency. A copy of the ECP will be provided to all staff involved with the student during the school day as well as stored with the medication provided by the family.

1. Set up communication systems that are easy to use.

   Each school will maintain an internal communication system available at all times in case of emergency. Currently, all West Valley School District schools use walkie-talkies, intercoms, and/or cell phones.

2. Ensure staff can get to epinephrine auto-injectors quickly and easily.

   Quick access to, and immediate availability of, epinephrine to respond to anaphylaxis emergencies are essential. It is the parent’s responsibility to provide at least one or two epinephrine auto-injectors and any emergency medication for a child with food allergies if they are prescribed by a doctor. It is the school’s responsibility to store epinephrine autoinjectors and emergency medication in a place that can be reached
quickly and easily, and to delegate and train staff to give epinephrine in response to allergic reactions. Every school in the district stores stock epinephrine auto-injectors in the health room, an AED box, and in each coach's medical kit.

3. **Ensure that epinephrine is used when needed and someone immediately calls 911.** Delays in using epinephrine have resulted in near fatal and fatal food allergy reactions in schools. In a food allergy emergency, trained staff should give epinephrine immediately. Early and appropriate administration of epinephrine can temporarily stop allergic reactions and provide the critical time needed to get medical help from emergency medical services.

**Emergency Response**

1. In the event of an emergency, response measures outlined in the student’s Emergency Care Plan will be taken. If epinephrine is injected in response to an allergic reaction, 911 will be called. In the event of an episode of anaphylaxis, the principal/school administrator or school nurse shall verbally notify the student’s parent/guardian as soon as possible; they may also delegate other school personnel to notify the parent/guardian. Following the food allergy emergency, the school nurse will complete a written report for the student’s health records and participate in a post-crisis review.

2. Students who can take responsibility for managing their own food allergies, including carrying and using an epinephrine auto injector must have parental and healthcare provider consent to do so indicated on their medical authorization form and ECP. The school nurse will assess the student’s knowledge and skills beforehand to determine the student’s ability to handle this responsibility. If approved to self-carry and/or self-administer, the student must have their epinephrine auto injector with them at all times. Students are also required to alert the nearest adult of symptoms, and if they use the prescribed auto-injector.

3. Identification of students at risk of anaphylaxis cannot be predicted, and it is possible that a student who has not been identified could have their first reaction at school. All employees are trained in the recognition and response to an anaphylactic emergency and every school in the West Valley School District has stock epinephrine auto-injectors. In the event a student with no prior history of anaphylaxis, no ECP, or medications at school exhibits signs and symptoms consistent with anaphylaxis, 911, the school nurse, and parents/guardians will be called immediately. The school nurse may assess and administer the stock epinephrine if deemed appropriate under the standing order protocol. First Aid rendered to the student could include CPR if necessary.

4. In the event a student with a current prescription for epinephrine auto-injector on file at the school experiences an anaphylactic event, the school nurse or designated trained school personnel may use the school stock supply of epinephrine auto-injectors to respond to the student supply is not immediately available.
Professional Development on Food Allergies for Staff

All staff will receive annual training on the management and prevention of food allergies/anaphylaxis, the recognition of signs and symptoms of anaphylaxis, emergency response, and the administration of epinephrine auto-injectors. In-service training will also include procedures for classroom management of students with known food allergies, including lunch and cross-contamination.

Each building will ensure that staff members participate in an emergency response drill each year, to practice how to respond in an anaphylactic emergency situation.

All staff, including substitutes, who interact with a food-allergic student on a regular basis will be trained to understand the food allergy, recognize symptoms, know what to do in an emergency (including epinephrine auto-injector administration) and work to minimize the risk of accidental exposure during meals, classroom and specialist projects, and at classroom related field trips and social events.

Educating Children and Family Members About Food Allergies

To promote the safety, well-being, and acceptance of students who are at risk for anaphylaxis the District will use age appropriate means to ensure all children in a class are aware of food allergies that exist within the School, particularly those that are current within their own class or peer groups. This includes but is not limited to lists of foods that are problematic to some students, preventing cross contact of foods – theory and practice, understanding what to do in an emergency. Education for students will occur twice a year; in the fall/spring, and be age appropriate.

To promote the safety, well-being, and acceptance of students who are at risk for anaphylaxis the district works with families and the Parents Association (PA) to create a school wide awareness of food allergies. Annually the School will use the weekly newsletter to disseminate the FAMPP. School administration will work with the PA to help ensure community understanding of and involvement in the effective management of food allergies.

Creating and Maintaining a Healthy and Safe Educational Environment

West Valley School District will strive to minimize the risk to all students with life-threatening food allergies while also seeking to build student and staff skills regarding the management of food allergies. Prevention measures and mitigation strategies will be tailored to the severity of the allergy and the needs of the individual student.

Elementary grade students (K-5) with known life threatening food allergies - classrooms will be identified as having a student with life-threatening allergies. The classroom will be designated “allergen aware”, meaning that parents/guardians will be strongly advised to avoid
sending life-threatening food items into a classroom where a child has life-threatening allergy, unless an Individual Health Care Plan indicates otherwise. Signs will be posted in a highly visible place at every entrance to the classroom. The school principal, school nurse, and/or classroom teacher will provide information to all students and families in such classrooms to educate on anaphylaxis and how to help mitigate risk for cross contact or potential exposure. Should a known allergen be identified within the classroom, that food will be removed from the vicinity of any student with identified allergies, and proper cleaning protocols will be followed. The school nurse and/or classroom teacher will contact the family who sent the allergen into the classroom to review the FAMPP protocols.

For all classrooms K-12 life-threatening food allergies exist, restrictions will be guided by severity and risk.

Field Trip Guidelines

- Teachers/field trip organizers will notify the school nurse of the date and specifics of the trip in a timely manner; ideally, no less than two weeks prior to the event.
- All conditions relating to the field trip environment should be appropriate for the needs of students with food allergies.
- Ensure rapid access to epinephrine auto-injectors.
- A copy of the Emergency Care Plan, along with prescribed emergency medication will accompany the student when leaving the school grounds.
- Students with life threatening food allergies will travel with parent/guardian or a staff member trained in recognizing symptoms of allergic reactions and epinephrine administration for all field trip transportation.
- Consider ways to wash hands before and after eating (i.e. provision of hand wipes or use of handwashing stations).
- Chaperones shall not provide or purchase food for students while driving for field trips.

Cafeteria Guidelines

- Provide training to food service personnel that includes the safe food handling procedures and how to avoid cross-contact.
- Provide staff training on proper cleaning and sanitation pertaining to food allergens.
- Implement reasonable accommodations from the approved menu or list of foods to avoid to ensure the child does not receive items they are allergic to.
- Provide training to staff about reading product food labels and food allergens.
- Provide training to custodians on proper cleaning and sanitation pertaining to food allergens to prevent cross-contact.
- Tables will be appropriately cleaned before each group sits down to eat.
- Students will be encouraged to wash/cleanse hands before and after eating.
- Ensure lunchroom monitors are familiar with students that have food allergies, along with their emergency care plan.
● Each lunch room will have a designated allergy aware table that lunchroom monitors are conscious of and will vigilantly supervise.
● For schools that eat in classrooms, the supervising staff member will be trained in recognizing allergic symptoms and epinephrine auto injector administration. The desks will be properly cleaned after students eat at them.

Food Sharing Guidelines

● The district-wide policy is that food sharing between students at lunch and snacks is strongly discouraged.
● Encourage the use of non-food items for birthday parties or celebrations in the classroom. Click here for examples and ideas: https://www.k12.wa.us/sites/default/files/public/childnutrition/healthynon-foodrewards.pdf
● All purchased food items must have a listing of the ingredients displayed on the packaging.
● Teachers shall not provide food as a reward in the classroom unless explicitly included as part of the student’s IEP.
● Parents/Guardians are prohibited from dropping off food for lunch or snack for any student other than their own.

Transportation Guidelines

● Staff will not provide food of any kind to students.
● Staff will be aware of students with food allergies and know how to detect and respond to an allergic reaction if it occurs while the student is being transported to or from school.
● Staff will enforce the district food policies for all students riding the school bus.
● Two-way communication systems between school and transportation vehicles are to be kept in working order.
● All cases of bullying and/or harassment of students, including those with food allergies, will be reported to the Director of Transportation.

Guidelines for Coaches and Supervisors of School Funded Activities

● Review and be familiar with the emergency care plans for each student.
● Participate in training to recognize signs of an allergic reaction and to call 911 if an allergic reaction is suspected.
● Make certain that an emergency communication device is available.
● Identify who will be trained to administer the epinephrine auto-injector and identify where it will be stored. Stock epinephrine will be kept in the coach’s medical kit.
● Reinforce school guidelines on bullying, teasing, or harassment of students with food allergies.
● Never question or hesitate to immediately initiate the emergency care plan if a student reports signs of allergic reaction.
• Offer only non-food items for rewards, incentives, and celebrations.
• If food items are brought from home, they must be store bought, be in its original and unopened packaging, and have a food label listing the ingredients.

District Guidelines

• School administration will direct PA or any outside group using the school before or after operating hours to look for opportunities to provide allergy aware options when using food at any functions. This will include an option(s) free of the top nine allergens: milk, eggs, nuts, fish, crustaceans, shellfish, wheat, soy and sesame.
• The Child Nutrition Department will maintain current ingredient lists and allergen information on their website, as well as display the allergen aware options available.
• The Health Services Department will keep a current copy of the Food Allergy Management and Prevention Plan on its website.
• The Food Allergy Management and Prevention Plan will be updated annually and as needed.

Create a positive psychosocial climate

• Foster a climate that promotes positive psychological and social development; that actively promotes safety, respect, and acceptance of differences; and fosters positive interpersonal relationships between staff members and children and between the children themselves.
• Children with food allergies need an environment where they feel secure and can interact with caring people they trust. Bullying, teasing, and harassment can lead to psychological distress for children with food allergies which could lead to a more severe reaction when the allergen is present, and will not be tolerated.
• A positive psychosocial climate—coupled with food allergy education and awareness for all children, families, and staff members—can help remove feelings of anxiety and alienation among children with food allergies.
• The West Valley School District fosters an environment that promotes safety, respect, and acceptance of differences. All staff and students share the responsibility for preventing bullying and social isolation of children with food allergies.