209.1 FOOD ALLERGY MANAGEMENT

Purpose

The Board of Education (“Board”) is committed to providing a safe and healthy environment for students with severe or life-threatening food allergies. The purpose of this policy is to:

1. Reduce and/or eliminate the likelihood of severe or potentially life-threatening allergic reactions;
2. Ensure a rapid and effective response in the case of a severe or potentially life-threatening allergic reaction; and
3. Protect the rights of students with severe or life-threatening food allergies by providing them, through necessary accommodations when required, the opportunity to participate fully in all school programs and activities, including classroom parties and field trips.

Definitions

For purposes of this policy, terms are defined as follows:

Anaphylaxis: An allergic reaction that is rapid in onset and may result in death. It involves several body systems and signs and symptoms may involve the mouth, throat, nose, eyes, ears, lungs, stomach, skin, and heart.

Food allergy: An abnormal, adverse reaction to a food that is triggered by the body's immune system.

Medical Plans of Care: Written documents individualized for a particular student with a severe or life-threatening food allergy to address the student's needs throughout the school day, including:

1. Emergency Care Plan (ECP): A medical plan of care based on the information provided in the student’s Individualized Healthcare Plan (IHP) and distributed to all school personnel who have responsibilities for the student which specifically describes how to recognize a food allergy emergency and what to do when signs or symptoms of these conditions are observed. The electronic distribution through the District's student information system (SIS) will flag the student's food allergy(ies) and indicate the proper
actions to be taken by school-based staff.

2. **Individualized Healthcare Plan (IHP):** A medical plan of care that provides written directions for school health personnel to follow in meeting the individual student’s healthcare needs. The plan describes functional problem areas, sets goals for overcoming problems, and lists tasks/interventions to meet the goals. The IHP shall include a Food Allergy Medical Management Plan developed by a student’s personal healthcare team and family, which shall outline the student’s prescribed healthcare regimen and be signed by the student’s board-certified allergist or health care provider. Symptoms of anaphylaxis typically occur within 5-30 minutes of exposure to the allergen and involve two of the three following body systems: respiratory, digestive and/or skin. Any combination of vomiting, diarrhea, abdominal pain, shortness of breath, wheezing, cough, difficulty swallowing, skin welts, itching, a pale or flushed face, and feelings of impending doom can occur.

3. **Related Services Component in Individualized Education Program (IEP):** That part of an IEP for a student receiving special education and related services which includes reference to development and implementation of an IHP and ECP for students with a documented severe or life-threatening food allergy as well as identifying the medical accommodations, educational aids, and services to address the student’s needs.[1]

4. **Section 504 Service Agreement:** An individualized plan for a qualified student, which sets forth the specific related aids, services, or accommodations needed by the student, which shall be implemented in school, in transit to and from school, and in all programs and procedures so that the student has equal access to the benefits of the school’s educational programs, nonacademic services, and extracurricular activities.[2]

5. **Individualized Transportation Plan (ITP):** This plan provides a standardized approach to identify accommodations needed for students while traveling to and from school.

**Authority**

State and federal laws and regulations, and the guidelines established jointly by the Pennsylvania Department of Education and Pennsylvania Department of Health, provide guidance to help prevent allergic reaction emergencies and deaths from anaphylaxis in schools. In accordance with those laws, regulations, and guidelines, the Board adopts this policy in order to ensure effective management of food allergies in schools. [3]

**Delegation of Responsibility**

The Board directs the Superintendent or their designee, through the Office of Student Health Services, in coordination with Food Services and other pertinent offices, to develop administrative procedures to implement this policy on managing severe or life-threatening food allergies in District schools, including all classrooms and instructional areas, school cafeterias, outdoor activity areas, on school buses, during field trips, and during school activities held before the school day and after the school day. [4][5][6][7]
Administrative procedures should address the following components:

1. Identification of students with food allergies and provision of school health services;
2. Development and implementation of individual written medical plans of care;
3. Medication protocols, including methods of storage, access, and administration;
4. Development of a comprehensive and coordinated approach to creating a healthy school environment;
5. Communication and confidentiality;
6. Emergency response;
7. Professional development and/or training for school personnel;
8. Awareness education for students;
9. Awareness education and resources for parents/guardians; and
10. Monitoring and evaluation.

The Superintendent or designee, through the Office of Student Health Services in conjunction with principals, shall annually notify students, parents/guardians, staff, and the public about the District's food allergy management policy by distributing the policy in handbooks, newsletters, on the District's website, through posted notices, or other efficient methods.

**Mandatory Regulatory Procedures**

Prior to enrollment in the District or immediately after diagnosis of a food allergy, appropriate medical plans of care shall be developed for each student identified with a severe or life-threatening food allergy. Plans shall be developed by the school nurse, in collaboration with the student’s healthcare provider, the student’s parents/guardians, District or school nutrition staff, the student, if appropriate, and any other appropriate persons.

Where a medical plan of care is developed, it should carefully describe the plan for coverage and care of a student during the school day as well as during school-sponsored activities, which take place while the student is under school jurisdiction during or outside of school hours. Medical plans of care shall include a component which provides information to the school nutrition service regarding each student with documented severe or life-threatening food allergies.

Medical plans of care should include both preventative measures to help avoid accidental exposure to allergens and emergency measures in case of exposure, including administration of emergency medication.

A complete set of a student’s current medical plans of care related to food allergies shall be maintained by the school nurse. Information or copies of the different components of a student’s medical plans of care shall be provided to appropriate personnel who may be involved in implementation of the medical plans of care.

**Accommodating Students With Disabling Special Dietary Needs**

Students with food allergies may be identified, evaluated, and determined to be disabled, in which case the District shall make appropriate accommodations, substitutions, or modifications in accordance with the student’s medical plans of care.
The District must provide reasonable accommodations, substitutions, or modifications for students with disabling dietary needs. The student’s physician shall determine and document if the student has a disabling dietary need. Examples of a dietary disability under this policy would include metabolic conditions (e.g., diabetes), severe food allergies, or cerebral palsy.

Students who fall under this provision must have a written medical statement signed by a licensed physician, which shall be included with the student’s IHP. The medical statement must identify: [15]

1. The student’s special dietary disability.
2. An explanation of why the disability restricts the student’s diet.
3. The major life activity(ies) affected by the disability.
4. The food(s) to be omitted from the student's diet.
5. The food or choice of foods that must be provided as the substitute.

**Accommodating Students With Non-disabling Special Dietary Needs**

The District may, at its discretion, make appropriate accommodations, substitutions, or modifications for students who have a special dietary need but who do not meet the definition of disability, such as a food intolerance or allergy that does not cause a reaction that meets the definition of a disability. The decision to accommodate such a student shall be made on a case-by-case basis.

Students who fall under this provision must have a written medical statement signed by a physician, physician assistant, or certified registered nurse practitioner identifying the following:

1. The medical or other special dietary condition, which restricts the student's diet.
2. The food(s) to be omitted from the student's diet.
3. The food or choice of foods to be substituted.

**Confidentiality**

The District shall maintain the confidentiality of students with food allergies, to the extent appropriate and as requested by the student’s parents/guardians. District staff shall maintain the confidentiality of student records as required by law, regulations, and Board policy. [11][12][13]

**Legal References**

1. Policy 113 - Special Education
2. Policy 103.1 - Nondiscrimination-Qualified Students With Disabilities/Protected Handicapped Students
3. 24 P.S. § 14-1422.3
4. Policy 121 - Field Trips, Social Events, and Class Trips
5. Policy 145 - Staff and Student Wellness
6. Policy 808 - Food Services
7. Policy 810 - Transportation
9. Policy 210 - Administration of Medication/Medical Technology
11. Policy 113.4 - Confidentiality of Special Education Student Information
12. Policy 209 - Health Examinations/Screenings
13. Policy 216 - Student Records
15. 7 CFR 15b.40

Related Information

24 P.S. 1422.1
22 PA Code 12.41
55 PA Code 3270.133
55 PA Code 3270.17
20 U.S.C. 1232g
20 U.S.C. 1400 et seq
29 U.S.C. 794
42 U.S.C. 12101 et seq
7 CFR Part 15
28 CFR Part 35
34 CFR Part 99
34 CFR Part 104
34 CFR Part 300
Policy 103 - Nondiscrimination in School and Classroom Practices
Safe at Schools and Ready to Learn: A Comprehensive Policy Guide for Protecting Students
with Life-Threatening Food Allergies – National School Boards Association
Pennsylvania Guidelines for Management of Food Allergies in Schools: Recommendations and
Resource Guide for School Personnel – Pennsylvania Departments of Education and Health