

Chicago Public Schools Policy Manual

Title: FOOD ALLERGY MANAGEMENT

Section: 704.8

Board Report: 11-0126-PO2

Date Adopted: January 26, 2011

Policy:

THE CHIEF EXECUTIVE OFFICER RECOMMENDS:

That the Board adopt a food allergy management policy.

PURPOSE: The purpose of this policy is to promote the prevention and management of life-threatening allergic reactions during school and related activities. This policy also establishes training requirements for school personnel on how to identify signs of food allergic reaction and undertake emergency response measures.

POLICY TEXT:

I. SCOPE

This policy covers all life threatening food allergies as well as life threatening allergies to insect venom/stings, medications, latex. For purposes of this policy, references to food allergies herein shall also include food intolerances that may affect a student's ability to participate in school or school activities. Identification of students at risk of anaphylaxis cannot be predicted as it is possible that a student could have his or her first allergic reaction at school. Therefore, this policy applies to all schools regardless of whether the school has any current students identified with food allergies or other life threatening allergy. Further, this policy applies where a student is receiving special education services only at the Chicago Public School and who is otherwise enrolled in a non-public school.

II. IDENTIFYING STUDENTS WITH FOOD ALLERGIES

A. Request for Allergy Information: In order to effectively plan for and manage student allergy risks at school, parents/guardians are asked to promptly notify the school upon their child being diagnosed with a food allergy or of their suspicions of a food allergy or other life threatening allergy. At least annually at the beginning of each school year, Principals shall request parents/guardians to report information about their child's known or suspected food allergies. The Office of Special Education and Supports (OSSES) shall make food allergy disclosure forms available to schools for this purpose.

B. Parent Submissions: When a parent/guardian reports that their child has a diagnosed food allergy or other life threatening allergy, the school shall request the parent/guardian to provide the following:

- (1) Written authorization to obtain detailed medical information on the child's condition from the physician;
 - (2) Written consent to share diagnosis and other information with school personnel;
 - (3) Written consent to administer or self administer medications during the school day, as applicable in accordance with in the Board's Administration of Medication Policy;
 - (4) An Emergency Action Plan and Treatment Authorization ("Emergency Action Plan") completed and signed by their child's licensed health care provider and signed by the parent;
 - (5) Any medications necessary to prevent or treat allergic reactions along with relevant prescription and dosage information. Replace medications after use or expiration;
 - (6) A description of the student's past allergic reactions, including triggers and warning signs;
 - (7) Current emergency contact information and prompt notice of any updates;
 - (8) A description of the student's emotional response to the condition and the need for intervention;
- and

(9) Recommendations on age-appropriate ways to include the student in planning or care and implementing their 504 Plan.

C. Suspected Allergies: In the event the School Nurse or other principal-designated school personnel suspect that a student has a food allergy or other life threatening allergy, the school shall provide the parent with written notification and request for the student to be evaluated by a physician.

D. Non-Cooperation: If the parent/guardian of a student with a known or suspected food allergy or other life threatening allergy fails or refuses to cooperate with the school for an evaluation or implementation of an appropriate 504 Plan or any documentation required to offer a 504 Plan, the school shall implement a simple Emergency Action Plan (EAP) stating to call 911 immediately upon recognition of symptoms along with sending written notification to the parent/guardian of the student's EAP.

III. 504 PLAN/IEP

A. Plan Establishment: Every child with a documented allergy that may effect the student's ability to participate in school or school activities must be offered a 504 Plan to address the prevention and management of allergic reactions while in school and at school events. In the event the student has an Individualized Education Program (IEP), the IEP shall address the prevention and management of allergic reactions while in school and at school events. The 504 Plan, or IEP (collectively referred to herein as the "plan"), shall include an Individual Health Care Plan that will identify what the school will do to accommodate the individual needs of the student with the food allergy or other life threatening allergy. The plan should include, but not be limited to, allergen exposure risk reduction, emergency response during the school day, while traveling to and from school, during school funded events and while on field trips. Any meal substitution requirements shall be coordinated with the CPS Department of Nutrition Support Services. The child's allergy Emergency Action Plan must be attached to the 504 Plan or IEP. An identification of which school personnel are trained in administering the epinephrine auto-injector or other emergency medication, where the emergency medication is stored who is monitoring medications for expiration shall be attached to the 504 Plan or IEP.

B. Plan Updates: 504 Plans and IEP's are updated annually in accordance with Section 504 of the Rehabilitation Act of 1973 and the Individuals with Disabilities Education Improvement Act of 2004. Notwithstanding the annual update requirement, in the event the parent/guardian furnishes information on a newly diagnosed allergen or new medical response instructions for known allergens, the 504 Plan or IEP will be promptly updated to address the new information in accordance with the CPS Food Allergy Guidelines.

C. Plan Dissemination: Those portions of the student's plan relevant to allergy management, including the Individual Health Care Plan, Emergency Action Plan and emergency medication identification, shall be disseminated to all school staff who supervise the student during the school day and at school sponsored activities (e.g. extra-curricular activities, field trips, sports, after school programs) or are responsible for the provision of food to the student. Plan distribution includes, but is not limited to, the student's teachers, classroom assistants, food service staff, coaches, transportation staff, school health professionals, school case managers, custodial staff, student aides and the parent(s)/guardian(s) of the student with a food allergy. The plan will be distributed at the beginning of each school year for continuing students or upon enrollment for new students.

IV. PREVENTING EXPOSURE TO KNOWN ALLERGENS

A. School-Wide Evaluation: Based on food allergy information provided by parents/guardians, the school shall annually, at the beginning of each school year, identify the common food allergens (i.e. peanut, milk, egg, etc.) that require school-wide management and risk reduction. The school shall report school-wide food allergy information to the Office of Special Education and Supports and the Department of Nutrition Support Services in accordance with the CPS Food Allergy Guidelines.

B. Multi-Disciplinary Team: The principal or principal designee shall assemble a multi-disciplinary team to undertake school-wide allergen risk prevention and the management of the individual health needs of the students with food allergies or other life threatening allergies. The multi-disciplinary team may include teachers, classroom assistants, food service staff, coaches, transportation staff, school health professionals, school case managers or social workers, custodial staff, student aides and the parent(s)/guardian(s) of the student with a food allergy. The team shall utilize best practices outlined in the CPS Food Allergy Guidelines to identify measures that will promote the prevention of exposure to allergens, promote a familiarity with the signs and symptoms of an allergic reaction and a familiarity with the emergency response plan for each student with a life threatening allergy, including but not limited to emergency medications.

C. School-Wide Exposure Prevention Measures: The multi-disciplinary team shall identify schools areas, events, programs, activities, student travel, art projects, parties and holiday celebrations, student rewards, hidden food ingredients, substitute teacher situations, etc. where there is a high or higher risk of exposure to allergens and develop a plan and procedures to reduce these risks. Plans to reduce instances of allergen exposure may include issuing parent notices that certain food items are restricted from a classroom or the school building. The principal shall ensure that protocols to prevent exposure do not result in the exclusion of students from school activities solely based on their food allergies. The principal shall ensure that protocols and measures are updated during the school year to reflect newly enrolled students with food allergies or new food allergy diagnoses or medical response for current students.

D. Food Services: The principal shall consult with the Office of Special Education and Supports and the Department of Nutrition Support Services to determine what school-wide food service accommodations, if any, are recommended.

E. School Emergency Response Plan: Beginning with the 2011-2012 school year, the principal shall ensure that the school's annual School Emergency Management Plan includes provisions for students with food allergies including a response plan for incidents involving mass allergen exposure. The School Emergency Management Plan shall incorporate provisions to annually practice food/allergy emergency protocols and procedures as part of the school-wide drill program.

V. EMERGENCY RESPONSE

In the event emergency response measures outlined in a student's plan are undertaken but not effective, 911 will be called. If epinephrine is injected in response to an allergic reaction, 911 will be called.

VI. TRAINING

At a minimum, at least every tow (2) years school personnel who work with pupils shall complete an in-service training program on the management and prevention of allergic reactions by students including training related to the administration of medication with an auto-injector. This training will be conducted by persons with expertise in anaphylactic reactions and management. The Office of Special Education and Supports will establish an in-service training program that complies with the Illinois School Code, sections 2-3.148 and 10-22.39(e).

VII. BULLYING

Bullying, intimidation or harassment of students with food allergies or other life threatening allergy is not acceptable in any form and will not be tolerated at school or any school-related activity. Schools shall discipline students who engage in this behavior to the fullest extent permitted under the Board's Student Code of Conduct.

VIII. GUIDELINES

The Office of Special Education and Supports is authorized to develop and implement food allergy management guidelines, standards and procedures for the effective implementation of this policy (CPS Food Allergy Guidelines”). The CPS Food Allergy Guidelines shall conform to the requirements of the Illinois School Code, sections 2-3.148 and 10-22.39(e) as well as the State’s Guidelines for Managing Life-Threatening Food Allergies in Illinois Schools.

IX. VIOLATIONS

Failure to abide by this policy or guidelines will subject employees to discipline up to and including dismissal in accordance with the Board’s Employee Discipline and Due Process Policy.

Amends/Rescinds:**Cross References:****Legal References:**

105 ILCS 5/2-3.148; 105 ILCS 5/10-22.39(e); Individuals with Disabilities Education Act, 20 U.S.C. §1400 et. seq.; Section 504 of the Rehabilitation Act of 1973, 29 U.S.C. §706 et. seq. and 34 C.F.R. 100 et. seq; the food allergy and anaphylaxis management provisions of the FDA Food Safety Modernization Act; the Guidelines for Managing Life-Threatening Food Allergies in Illinois Schools.