

Whiteface CISD

Food Allergy Management Plan

Background

In response to the increase in students with diagnosed food allergies at-risk for anaphylaxis, Senate Bill 27(2011, 82nd Legislative session) amends Chapter 38 of the Texas Education Code by adding Section 38.0151. Whiteface CISD has developed a student food allergy management plan to comply with these regulations.

Definition of Food Allergy and Anaphylaxis

A *food allergy* is a potentially serious immune-mediated response that develops after ingesting or coming into contact with specific foods or food additives. A life-threatening allergic reaction to food usually takes place within a few minutes to several hours after exposure to the allergen. School settings may contain non-food items that contain trace amounts of food allergens. Cross contamination can occur when an allergen is transferred from one item (utensils, pots, pans, countertops, surfaces, etc.) to another. Allergic reactions can occur with trace exposure to food allergens. There is no cure for food allergies.

Anaphylaxis is defined as “a serious allergic reaction that is rapid in onset and may cause death”. Anaphylaxis includes a wide range of symptoms that can occur in many combinations and is highly unpredictable. Common examples of potentially life threatening allergies are those to food or stinging insects. The emergency treatment for anaphylaxis is epinephrine.

Identifying and Treatment of students with Food Allergies

Annually, parents/guardians are to complete the Whiteface CISD Student Health Information Form that specifically asks to list any “life threatening” allergies, reactions and treatment. When a parent/guardian report that their child has a diagnosed food allergy or other life threatening allergy, the school shall request the parent/guardian to provide the following:

- *Consent to share diagnosis and other information with school personnel;
- *Food Allergy Action Plan/Emergency Action Plan completed and signed by the child’s licensed health care provider and the parent/guardian;
- *Any medications necessary to prevent or treat allergic reactions along with relevant prescription and dosage information. The parent/guardian will be responsible for replacing medications after use or expiration;

IHP(Individual Health-Care Plan) and/or 504 plans will be developed and implemented as appropriate. Care plans and procedures will be reviewed periodically and after an anaphylactic reaction at school or school related activity. In the event school personnel

suspect that a student has a food allergy or other life-threatening allergy, the school shall provide prompt notification to the parent/guardian and request for the student to be evaluated by a physician. 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 Student Management Plan, the school shall implement a simple Emergency Care Plan stating to call 911 immediately upon recognition of symptoms.

Emergency Response

In the event of an emergency, response measures outlined in a 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, school personnel shall verbally notify the student's parent/guardian as soon as possible.

Training for Staff

Online awareness training will be provided for all staff. Epinephrine Auto-Injector Training will be provided for selected staff.