



# **District 181 Food Allergy Management Plan**

*With important information, guidelines and resources to manage food allergies in  
District 181 schools*

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## Foreword

In March 2018, a committee of District 181 parents and staff met with the goal of developing a food allergy management plan that would positively influence the learning environment in all District 181 schools.

In creating this plan, the committee reviewed the [ISBE guidelines](#), the [Center for Disease Control guidelines](#), as well as plans from several peer districts, notably Deerfield District 109.

The committee did not seek to create allergen-free schools -- an impossible task. They sought to develop guidelines that would allow District 181 schools to be allergy friendly, and ensure that:

- Students are safe and able to learn academically and grow socially and emotionally in their schools
- Our school community would gain better understanding of the needs of students with food allergies and other special dietary needs
- Parents of those students would gain comfort in wider understanding of their children's needs, and would be able to easily access resources available to protect the health of children at school
- Staff would have easy-to-follow guidelines for food in classrooms and around the schools

The key to success is open lines of communication. This plan creates formal avenues for starting those discussions. Parents of children with food allergies are encouraged to talk to teachers, administrators, nurses, coaches, activity directors and other school officials about individual needs. Staff are encouraged to reach out to parents of children with food allergies if they have any questions or concerns about helping students manage their allergies in school. This plan will be reviewed annually by a Food Allergy Committee organized by the Superintendent.

### **FOOD ALLERGY PLAN DEVELOPMENT COMMITTEE MEMBERS**

#### Hinsdale Middle School

Sue Pyrz, HMS School Nurse; Sue Wachowski, Teacher; Laurel Luczak, Teacher; Susie Woerner, Health Teacher; Danielle Scacco, Teacher; Dave Johnson, Teacher; Denise DesLaurier, FACS Teacher

#### Clarendon Hills Middle School

Mary Youngman, CHMS School Nurse; Mario Castillo, Teacher; Anna Szymczak, FACS Teacher; Theresa Doering, Teacher

#### District 181 Building Nurses

June Zogas (Walker); Charity Richardson (Monroe); Kim Pavich (Elm); Laura Spagnoli (Oak); Cathy Siracusa (Prospect); Barbara Luchette (The Lane); Peg Bellich (Madison)

#### District 181 Parents

Deb and Dan Levinthal (HMS and The Lane); Carol Witteman (CHMS); Cristina Kowalczyk (The Lane); Amy Choe (The Lane); Jen and Brad Parkins (HMS and The Lane); Artemis Anos (Madison and HMS)

#### District Staff:

Dr. Don White, Superintendent  
Kristin Katsenes, District Nurse  
Elena Hildreth, Food Service District Manager

## Food Allergies in Schools

In implementing this Food Allergy Management Plan, District 181 recognizes the necessity to create clear and consistent District-wide guidelines to help our administrators, teachers, students and parents protect those with food allergies. Food allergies can be life-threatening. They occur when the body's immune system reacts to the protein component in certain foods as if it were harmful. A reaction can occur within minutes or hours after exposure to an allergen. Some individuals may react to just touching or inhaling the allergen; for others, consumption of just a miniscule amount of allergenic food -- be it peanuts, milk, wheat, or some other food -- can cause death. The severity of a reaction is not predictable; every allergic reaction can become a life-threatening reaction. In many cases, based on the determination of an educational team, students with life-threatening food allergies are protected by federal laws prohibiting discrimination on the basis of disability. [The American Academy of Pediatrics issued a position statement for the treatment of anaphylaxis in schools.](#)

### WHAT IS ANAPHYLAXIS?

Anaphylaxis, sometimes called allergic shock, is a potentially life-threatening medical condition occurring in allergic individuals after exposure to an allergen. It occurs when the body's immune system reacts to harmless substances as though they were harmful invaders. During an anaphylactic reaction, the body releases chemical mediators, such as histamine, that trigger an inflammatory reaction in the tissues of the skin, respiratory system, gastrointestinal tract and cardiovascular system. When the inflammatory symptoms are widespread and systemic, the reaction is termed anaphylaxis. Symptoms include:

Organ	Symptoms
Lungs	Short of breath; wheezing; repetitive cough
Heart	Pale, blue or flushed skin; faint; weak pulse; irregular heartbeat; dizzy
Throat	Tightness or closing of throat; hoarseness, other voice change; trouble swallowing; feeling that something is stuck in throat; not talking
Mouth	Swelling of the tongue and/or lips
Nose	Itchy/runny nose; sneezing
Skin	Hives or rash; widespread redness; swelling of any body part
Gut	Stomach/abdominal cramps; vomiting; severe diarrhea
Brain	Feeling anxiety, confusion, that something bad is about to happen

When these symptoms appear, follow the charts on the following page for treatment. Studies (*Sampson, 1992, and Bock 2001*) show that fatal and near-fatal anaphylactic reactions are sometimes associated with not using epinephrine auto-injector ("EpiPen/AUVI-Q") or delaying its use.

***When in doubt, medical advice indicates that it is better to give the student's prescribed epinephrine auto-injector and then call 911. Fatalities occur when epinephrine is withheld. In addition, never send a student to the nurse's office alone.***

FOR **ANY** OF THE FOLLOWING:

## SEVERE SYMPTOMS

			
<b>LUNG</b>	<b>HEART</b>	<b>THROAT</b>	<b>MOUTH</b>
Short of breath, wheezing, repetitive cough	Pale, blue, faint, weak pulse, dizzy	Tight, hoarse, trouble breathing/ swallowing	Significant swelling of the tongue and/or lips
			<b>OR A COMBINATION</b> of symptoms from different body areas.
<b>SKIN</b>	<b>GUT</b>	<b>OTHER</b>	
Many hives over body, widespread redness	Repetitive vomiting, severe diarrhea	Feeling something bad is about to happen, anxiety, confusion	

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1. **INJECT EPINEPHRINE IMMEDIATELY.**
2. **Call 911.** Tell them the child is having anaphylaxis and may need epinephrine when they arrive.
  - Consider giving additional medications following epinephrine:
    - » Antihistamine
    - » Inhaler (bronchodilator) if wheezing
  - Lay the person flat, raise legs and keep warm. If breathing is difficult or they are vomiting, let them sit up or lie on their side.
  - If symptoms do not improve, or symptoms return, more doses of epinephrine can be given about 5 minutes or more after the last dose.
  - Alert emergency contacts.
  - Transport them to ER even if symptoms resolve. Person should remain in ER for at least 4 hours because symptoms may return.

## MILD SYMPTOMS

			
<b>NOSE</b>	<b>MOUTH</b>	<b>SKIN</b>	<b>GUT</b>
Itchy/runny nose, sneezing	Itchy mouth	A few hives, mild itch	Mild nausea/ discomfort

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**FOR MILD SYMPTOMS FROM MORE THAN ONE SYSTEM AREA, GIVE EPINEPHRINE.**

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**FOR MILD SYMPTOMS FROM A SINGLE SYSTEM AREA, FOLLOW THE DIRECTIONS BELOW:**

1. Antihistamines may be given, if ordered by a healthcare provider.
2. Stay with the person; alert emergency contacts.
3. Watch closely for changes. If symptoms worsen, give epinephrine.

This plan strives to address and respect the emotional as well as the physical needs of students. Fear of allergic reactions can drastically alter a student’s behavior or academic performance. School social workers are important

members of the team, who, along with school nurses, work with families with food-allergic or food-sensitive students.

The District 181 Food Allergy Management Plan strikes a balance between the right and convenience of all students to eat what they like and the food-allergic student's health, safety and social normalcy in the school setting. These guidelines also foster developmentally-appropriate increased independence so that students will reach the long-term goal of self-management of their allergic conditions.

### ALLERGY STATISTICS

The following statistics were compiled by [Food Allergy Research & Education, Inc. \(FARE\)](#):

- Up to 15 million Americans have food allergies, including 1 in every 13 children under age 18 or ***roughly two students in every classroom***
- Food allergies among children increased approximately 50% between 1997 and 2011
- The annual economic cost of children's food allergies is nearly \$25 billion
- The U.S. Centers for Disease Control reported that food allergies result in more than 300,000 ambulatory-care visits a year among children under the age of 18
- Eight foods account for 90 percent of all reactions: milk, eggs, peanuts, tree nuts, soy, wheat, fish and shellfish
- ***Peanuts and tree nuts account for about 90% of fatal and near-fatal reactions, but other foods can cause fatal or very serious reactions as well***

Another important statistic to note: Of the allergic reactions happening at school, 79% occurred within the classroom (The Journal of School Nursing, Vol. 20, Number 5, page 268).

#### ***Best Practices in District 181:***

The following practices will be followed in District 181 schools:

- Address life-threatening allergic reaction prevention in all classrooms and other instructional areas, lunchrooms, outdoor activity areas, school buses or school vehicles; during field trips; and with all classroom projects and crafts.
- Adapt curriculum by substituting non-food items, and replace food awards and rewards in the classroom with non-food items.
- Hold elementary holiday parties that are food free or only include Outshine Fruit Bars (lemon, grape, and/or tangerine), Annie's Fruit Snacks, or Original Skinny Pop brand popcorn
- Establish and enforce facility guidelines, in place 24/7, that limit snacks brought by students (or those who rent the facilities) into classrooms to:
  - fruits and vegetables in elementary classrooms
  - fruits and vegetables, as well as cheese, Goldfish crackers, Original Skinny Pop brand popcorn, meat jerky, meat sticks, and lunch meat in middle school classrooms.

See **Appendix A: Food in the Classroom** for more specific information about snacks.

- Establish designated areas (in addition to the peanut/tree-nut free table in the lunchroom) where potentially allergenic food can be eaten, sold for fundraisers, and provided for events/activities. Create signage for those designated areas.
- Develop protocols for appropriate cleaning methods for lunch time, snack, and following events in designated areas that involve food.
- Communicate with PTOs, the Park Districts, and any organizations renting space to ensure they are aware of food allergy issues and the policies and procedures in place for food use in District 181 facilities.
- Determine who should be familiar with an individual student's 504 Plan, Individual Health Care Plan, and Emergency Action Plan.
- Teach all staff about signs and symptoms of anaphylaxis. Training will include: how to recognize symptoms of an allergic reaction; review of high-risk areas; steps to prevent allergen exposure; how to

respond to an emergency; how to administer an epinephrine auto-injector; how to respond to a student with a known allergy as well as a student with a previously unknown allergy.

## Overview of Laws

**Federal Legislation:** Certain federal laws may be relevant to District 181’s responsibilities for meeting the needs of students with severe food allergies.

**Section 504 of the *Rehabilitation Act of 1973*** prohibits all programs and activities receiving federal financial assistance, including public schools, from discriminating against students with disabilities as defined in the law. A student with a disability under Section 504 is defined as one who has a physical or mental health impairment (in this case, life-threatening food allergy) that “substantially limits a major life activity.” (29 U.S.C. 794 § 504; 34 C.F.R. § 104 *et. seq.*).

### WHAT ARE MAJOR LIFE ACTIVITIES?

Major life activities covered by the Section 504 definition as amended by the ADAAA include, but are not limited to: caring for one’s self, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating, and working. Major life activities also include the operation of major bodily functions, including, but not limited to: functions of the immune system; normal cell growth; digestive, bladder, neurological, brain, respiratory, circulatory, endocrine, and reproductive functions.

“Substantially limited” is not defined in Section 504 regulations but generally means an individual is unable to perform a major life activity that the average person in the general population could perform.

In order to determine eligibility criteria as outlined in the regulations, an individual assessment of the student is required.

***Americans with Disabilities Act of 1990 (ADA)*** also prohibits discrimination against any individual with a disability, and extends the Section 504 requirements to the private sector. The ADA contains a definition of “individual with a disability” that is almost identical to the Section 504 definition. The ADA also provides a definition of “substantially limits” (42 U.S.C. § 12101 *et. seq.*; 29 C.F.R. § 1630 *et. seq.*).

***Americans with Disabilities Act Amendment Act of 2008 (ADAAA)*** made several changes to both the ADA and the Rehabilitation Act that impacted students with food allergies. The amendments created a list of major life activities that could be limited by a disability. Eating and breathing are on this list. The amendments added wording to include impairments that are episodic and require schools to ignore the ameliorative effects of medication when determining eligibility (PL 110-325 (S 3406)).

***Individuals with Disabilities Education Act of 2004 (IDEA)*** provides financial assistance to state and local agencies for educating students with disabilities that significantly interfere with learning. Children are eligible if they fit into one or more of the 13 categories of disability defined in the law and if, because of their disability, they require specialized instruction (20 U.S.C. § 1400 *et. seq.*; 34 C.F.R. § 300 *et. seq.*).

### ***Illinois State Legislation:***

**Public Act 094-0792** allows for self-administration of medication by a pupil with asthma or the use of an epinephrine auto-injector by a student, provided that the parents or guardians of the student provide to the school written authorization for the self-administration of medication or use of an epinephrine auto-injector; and a written statement from the student’s medical provider.

**House Bill 5892** was signed into law on July 30, 2014 and effective August 1, 2014. The law allows trained school personnel to administer epinephrine to quell an allergic reaction, even if the staff member is not a nurse.

## Student Safety Plans

When District staff 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 safety plan. There are three different plans applicable for students with allergies. Parents begin the process for developing a plan by following the steps below:

1. Notify the District of their child's allergy:
  - *When entering the District for the first time*, indicate the presence of an allergy or other food-related medical condition on the online registration form under "Medical/Dental" information, and check that it is a critical condition that staff should be aware of.
  - *When a student already enrolled in the District is diagnosed for the first time*, contact the school nurse.
2. Provide the school nurse with the following (which must be updated yearly or when there is a change):
  - Emergency Action Plan
  - Individualized Care Plan
  - Medication authorization form (one form for each medication needed at school).
  - At least one up-to-date epinephrine auto injector (it is recommended that you provide two or more, based on your child's activities and travel throughout the school day).

### EACH YEAR, TAKE ACTION

Every year, before the first day of student attendance, parents should provide the following updated information to the school nurse, including:

- Emergency Action Plan
- Individualized Health Care Plan
- Permission to Administer Medication forms

They also should bring the nurse at least one up-to-date epinephrine auto injector and any other medications the student needs at school to manage his or her allergies or related health issues.

Once the nurse has all necessary information, school staff will work with parents/guardians to develop the appropriate plan or plans for the child.

### ***Food Allergy & Anaphylaxis Emergency Action Plan***

**All students with allergies must have an emergency action plan on file.** For some children this information is the only plan necessary. The food allergy action plan form must be completed by a licensed health care provider. This plan (which sometimes is referred to as an Emergency Action Plan) also requires the signature of the child's parent or guardian.

### ***Individual Health Care Plan (IHCP)***

Parent or guardian will complete an Individual Health Care Plan (IHCP), which lists strategies for managing the student's food allergy(ies). An IHCP indicates, in writing, what the school will do to accommodate the individual needs of the student.

The IHCP includes an ***Emergency Action Plan*** (see above), which details the specific steps staff must take in the event of an allergic reaction. The IHCP should include student's name, grade, allergies, medication and location of medication as well as hand cleansing procedure prior to meals and lunchroom seating arrangement. It will be signed by the parent/guardian and nurse.

### ***504 Plan***

The District and parents shall collaborate to determine if the child qualifies as a person with a disability under Section 504 of the *Rehabilitation Act of 1973*. The District assembles 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. Usually one person is responsible for coordinating the 504 Plan to make the process more efficient. This process takes place prior to entry into school, or immediately after diagnosis. The 504 Plan is updated annually or as needed. More information on 504 procedures can be found on the District website. See page 7 for a description of the law that governs qualification for a Section 504 plan.

The 504 plan is done on an individual basis for each student, according to their needs. It will be signed and updated by a multidisciplinary team of whom are most aware and work closely with the student, which will include a variety of school staff and the parents.

#### **QUICK LOOK: WHICH PLAN SHOULD A STUDENT HAVE?**

Adequate plans to handle allergic reactions can save a child's life! Students who have food allergies must have an Emergency Action Plan, Individual Health Care Plan, and/or 504 Plan. The team will work together to determine which plan is right based on each individual student needs, and what the plan includes.

### **First Allergic Reactions - Responding to Students with Undiagnosed Allergies**

Identification of students at risk of anaphylaxis cannot be predicted, and it is possible that a student who has not been identified could have his or her first reaction at school. That is why all staff are trained to recognize the symptoms of an allergic reaction (see page 4), and on the use of epinephrine auto-injectors. Students with any symptoms should be evaluated by the nurse as quickly as possible and should remain with an adult at all times. There should be no hesitation to administer epinephrine. There are undesignated epinephrine auto injectors at each school, in the nurse's office for this situation.

## General Guidelines and Role Responsibilities

In District 181, staff has a range of responsibilities concerning students with life-threatening food allergies. Each student's team ultimately determines the responsibilities of individual staff members. This guide will help teams determine which accommodations are necessary and options that are beneficial for a given student, based on factors including the student's age, allergens involved, and the facilities at the school.

### WE'RE ALL INVOLVED

All students, regardless of whether they are capable of epinephrine self-administration, need help from others when they have an allergic reaction - and we all play a role in preventing reactions from occurring. The severity of the reaction may hamper their attempt to self inject. Adult supervision is mandatory. The American Academy of Allergy, Asthma & Immunology (AAAAI) says, "All individuals entrusted with the care of children need to have familiarity with basic first-aid and resuscitation techniques. This should include additional formal training on how to use epinephrine devices..." All District 181 nurses have first aid and CPR training that is routinely updated and current.

### *Checklists: Specific Guidelines for Different Roles*

The District has established best practices for individuals who interact with or are involved in caring for students who have food allergies. These guidelines include specific checklists that will help all stakeholders understand their roles and responsibilities. [See Appendix B: Checklists to view expanded checklists.](#)

1. [Parent/Guardian](#)
2. [Student with Food Allergies](#)
3. [Nurse](#)
4. [Classroom Teacher](#)
5. [Substitute Teacher](#)
6. [School Administrator](#)
7. [Custodial Staff](#)
8. [Lunchroom Supervisor/PTO Lunch Volunteers](#)
9. [Transportation](#)
10. [Coach/Activity Sponsor](#)
11. [PTO/Event Organizer](#)

## Forms and Letters List

The following documents will be compiled for any child with a food allergy. Many of these documents will help ensure that the school has the correct medical information on the student's condition and will be used to educate staff and others as necessary, to establish necessary avoidance precautions for risk-reduction, and to create appropriate emergency-response procedures. Documents include:

[D181 Food Allergy Action Plan](#)

[D181 Individual Health Care Plan \(IHCP\)](#)

[D181 Medication Authorization Form](#)

The following document is provided for teachers/staff who are field trip organizers, and should be completed prior to each trip, and submitted to parents.

[D181 Allergy Field Trip Questionnaire](#)

The following documents are provided for teachers, staff and parents who wish to use food in D181 facilities for fundraising or for school special events (including before and after school clubs, activities and sports).

Before food related events can occur in D181 facilities, they require the completion of the appropriate form and approval by building administration, the district nurse, and in some circumstances, superintendent approval.

[D181 Application for Fundraising Exemption](#)

[D181 Special Event Food Request Form](#)

## Appendix A: Food in Classrooms

**Daily Snacks:** In focusing on overall health of students and creating the optimal teaching and learning environment during school hours, the District establishes the following guidelines for food in classrooms:

### *Elementary:*

Teachers have the option to determine if there will be snacks allowed during class. If snack is allowed, students may bring fruits and vegetables (including dried fruits such as raisins, and applesauce). No additions, toppings or mix-ins (such as dips or spreads) shall be included. If teachers allow drinks, the only drink in the classroom shall be water.

### *Middle School:*

Teachers have the option to determine if there will be snacks allowed during class. If snack is allowed, students may bring fruits, vegetables, cheese, Goldfish crackers, Original Skinny Pop brand popcorn, Annie's fruit snacks, meat jerky, meat sticks and lunchmeat. Dried fruits and applesauce are allowed. No additions, toppings or mix-ins (such as dips or spreads) shall be included. If teachers allow drinks in the classroom, the only drink in the classroom shall be water.

### **Elementary Classroom Parties:**

Classroom holiday parties as well as other celebrations in the classroom, shall be food free or may include Outshine Fruit Bars (lemon, grape, and/or tangerine), Annie's fruit snacks, and Original Skinny Pop brand popcorn. Students shall not bring food to give as gifts or share with other students (such as with Valentine's cards, on Halloween, or as holiday gifts).

### **Other Food in Classroom:**

- Students shall not bring food to share in the classrooms.
- Teachers shall not provide food as a reward in the classroom.
- Whenever possible, teachers should adapt curriculum by substituting non-food items\*. If there is an educational benefit to using food in the curriculum teachers must contact their building principal, who will send the teacher a form to request the use of food in the curriculum. The request should be approved before parental contact is made.
  - Once approved, teacher must:
    - Send a permission slip and ingredient list to all students' parents,
    - Track receipt of signed forms, and
    - Provide safe alternatives.

\*With the exception of Family and Consumer Science courses (foods) courses in Middle School.

- Teachers' desks are considered their work space; teachers who work in their classroom without students present shall, before students return to the classroom, thoroughly clean their desk and other workspace touched while eating (with approved cleaning wipes), and wash their hands before returning to work with students.
- In the event that a teacher hosts lunch in the classroom (e.g. quiet lunch, homework help, study hall, or other special circumstance approved by the principal and district nurse), no peanuts or tree nuts will be allowed.

\*With the exception of Family and Consumer Science courses (foods) courses in Middle School.

### **Family and Consumer Science courses (FACS, Nutrition and Wellness, Advanced Foods, Culinary Arts)**

- 6th grade: Introduction to Family and Consumer Science, "FACS". Foods is a required unit for part of the trimester.
- 7th & 8th grades: Foods, Nutrition & Wellness (Elective), Advanced Foods, Nutrition & Wellness (Elective) and Culinary Arts (Elective).
  - All Family and Consumer Science courses are peanut, tree nut and seafood-free courses.

- FACS courses are held in designated rooms in each building. Please contact your building principal for exact location.
- Recipes vary per class. Raw ingredients are handled in any food preparation course.
- All unopened ingredients for recipes will be available for students to view prior to the lab.
- Students are responsible for documenting/recording ingredients, in order to make substitutions for their allergies, prior to the lab.
- A course syllabus is discussed at the beginning of each course that specifies what recipes will be prepared and what culinary equipment will be used.
- Students are responsible for bringing home recipes for each lab prior to working with that food.

**Other Events Held in District 181 Facilities:**

When PTOs or other organizations hold events in District 181 facilities, the following shall apply:

- After-school enrichment, before-school care, or other programs held in school classrooms must follow the daily snack guidelines.
  - In the elementary schools, fruits and vegetables are allowed in classrooms.
  - In the middle schools, fruits and vegetables, as well as cheese, Goldfish crackers, Original Skinny Pop brand popcorn, meat jerky, meat sticks, and lunchmeat are allowed in classrooms.
  - Other food items that deviate from approved snacks require approval from the Building Principal and District Nurse.
  - Other food items (once approved by the Principal and District Nurse) shall be eaten in designated areas (lunchroom, gym, or other as determined by building administration)
  - Food desired to be used for fundraising purposes may also be subject to Superintendent approval.
  - Terms of District 181 facility rental agreements will include information about the restrictions on food in classrooms.

## Appendix B: Checklists

### Parents of Children with Allergies Guidelines

Parents are their children's first teachers. It is important for parents and guardians to educate their food allergic child in an age-appropriate manner, as well as to communicate information received from doctors, etc. Preparing, role-playing and practicing procedures in advance will help everyone feel prepared in case of an emergency.

#### Parent General Checklist

	Inform the nurse of your child's allergies prior to the first day of student attendance (or as soon as possible after a diagnosis).
	Complete and return all necessary forms: The Emergency Action Plan (EAP), Individualized Health Care Plan, and medication forms.
	Provide the school with up-to-date epinephrine auto-injectors; give them to the school nurse before the first day of student attendance, noting their expiration dates to replace when necessary.
	Consider a meeting with the classroom teacher in the fall or upon new allergy diagnosis. At the meeting, you will discuss development and implementation of EAP, IHCP or 504 Plan and establish a prevention plan.
	Decide if additional antihistamine and epinephrine auto-injectors will be kept in the school, aside from the one in the nurse's office or designated area, and if so, where.
	In the event of a field trip, coordinate with the classroom teacher to ensure coverage of epinephrine (e.g., you may send an additional "field trip" epinephrine auto-injector). Provide clear, complete information on the Field Trip Permission Form.
	Periodically (perhaps halfway through the year) review prevention and EAP with the nurse, teacher and other staff.
	Consider providing a medical alert bracelet for your child.
	Be willing to go on your child's field trips, if possible and if requested.
	Provide the nurse with the licensed medical provider's statement if student no longer has allergies.
	Review transportation requirements/situation for student.
	After an allergic reaction, participate in a Return to School Review. If the reaction occurs outside of school, inform the school nurse to initiate this review (which includes a meeting with the nurse, school administrator, and any teachers involved, and if necessary, replacement of epinephrine auto-injector or other rescue medications).
	When your child signs up for a school sponsored activity, inform coaches and activity supervisors of your child's allergy, location of epinephrine during the activity, and EAP.
	If you have questions or concerns about food at PTO-sponsored events, contact your school's PTO president or the building principal.

#### Parent Checklist: Working with Your Child

Help your child be able to become self advocates and accomplish the following tasks:

	Recognize the first symptoms of an allergic/anaphylactic reaction.
	Know where the epinephrine auto-injector is kept and who has access to the epinephrine.
	Communicate clearly as soon as he/she feels a reaction is starting.
	Carry his/her own epinephrine auto-injector when appropriate.
	Avoid sharing or trading snacks, lunches or drinks.
	Understand the importance of washing hands before and after eating.
	Report teasing, bullying and threats to an adult authority.
	Request ingredient information for any food offered. If food is not labeled or if the child is unsure of the ingredients, the child should politely decline the food being offered.

### ***Student with Food Allergies Guidelines***

The student with food allergies is the most important member of the safety team. The student having age-appropriate education should be able to tell what their food allergies are. It is important to make the student aware of what accommodations they are or should be receiving so that they might assist appropriately.

### **Student Checklist**

	Recognize the first symptoms of an allergic/anaphylactic reaction.
	Know where epinephrine auto-injectors are kept and who has access to the epinephrine auto-injector(s).
	Inform an adult as soon as exposure occurs or symptoms appear.
	Carry your own rescue medications when appropriate and approved.
	Do not share or trade snacks, lunches or drinks.
	Do not eat food on the school bus or school vehicle.
	Wash hands before and after eating.
	Report teasing, bullying and threats to classroom teacher, principal or other adult authority.
	Do NOT take or eat food offered to you.
	Learn to become a self-advocate as you get older (refer to parent guidelines.)
	Develop a relationship with the nurse and/or another trusted adult in the school, to assist in identifying issues related to the management of the allergy in school.

## Nurse Guidelines

When it comes to the school care of students with food allergies in District 181, our nurses may carry the largest responsibility. They assist the school team in both prevention and emergency care of students with food allergies and reactions. They are encouraged to foster student independence, based on their developmental level. To achieve this goal, nurses consider these guidelines when supporting parents and the school team in developing an Individual Health Care Plan or 504 Plan for a student with a food allergy.

### Nurse General Checklist

	Make sure you are familiar with all areas of the Food Allergy Management Plan and implement the plan with fidelity.
	Ensure that a blank EAP, IHCP, medication authorization form(s) and parent checklist are shared with all parents of students with newly diagnosed or identified food allergies.
	Collaborate with the building 504 coordinator and IEP administrator regarding students with identified food allergies.
	Ensure that annually, a blank EAP, IHCP, and medication authorization form(s) are sent to all parents of students with currently identified food allergies.
	Review the Food Allergy Emergency Action Plan (EAP), IHCP and/or 504 Plan for every student with allergies. Distribute final copies of these forms to classroom teachers, other teachers, and other staff as needed.
	Ensure that appropriate personnel know the location of epinephrine auto-injectors and emergency plans.
	Ensure epinephrine auto-injectors and antihistamines are stored in a secure, unlocked designated area.
	Establish a contingency plan in the case of a substitute nurse.
	Utilize walkie talkie device as a means of communication with playground staff and physical education teacher.
	In the event of a 911 call, ensure that any necessary student information is sent with Emergency Medical Service (EMS).
	Assist building principal in the identification of designated areas in the building where potentially allergenic food can be eaten, sold for fundraisers, and provided for events/activities.
	<p>Prior to the first day of student attendance, and as directed by the building principal, provide training for school personnel about how to prevent, recognize and respond to food allergy reactions. Training should include:</p> <ul style="list-style-type: none"><li>• How to recognize symptoms of an allergic reaction (foods, insect stings, medications, latex).</li><li>• Review of high-risk areas.</li><li>• Steps to take to prevent exposure to allergens.</li><li>• How to respond to an emergency.</li><li>• How to administer an epinephrine auto-injector.</li><li>• How to respond to a student with a known allergy as well as a student with a previously unknown allergy.</li></ul>
	Ensure that student emergency medications are quickly and readily accessible in the event of an emergency.

In the event of an allergic reaction, contact the student's parent or guardian.
After an allergic reaction, initiate a Return to School Review (see information below under <i>Return to School After an Allergic Reaction</i> ).
Review Field Trip needs for food allergic students in attendance.
Adhere to Occupational Safety and Health Administration and Universal Precautions Guidelines for disposal of epinephrine auto-injectors after use.

**STAY WITH THE STUDENT!**

No student should be left alone if an allergic reaction is in progress. In order for the child to receive appropriate care, the emergency response team needs to go to the location of the child having the reaction.

**Other Important Information for Nurses**

**Return to School After an Allergic Reaction:** Students who have experienced an allergic reaction at school may need special consideration upon their return to school. The approach taken by the school is dependent upon the severity of the reaction, the student's age and whether his or her classmates witnessed it. A mild reaction may need little or no intervention other than speaking with the student and parents, and re-examining the student's EAP, IHCP and/or 504 Plan.

In the event that a student has a moderate to severe reaction, initiate a **Return to School Review**. The student (if appropriate) and parent/guardian shall meet with the nurse, classroom teacher, school administrator and any other staff that were involved in the allergic reaction to be reassured about the student's safety and to review and amend the EAP, IHCP and/or 504 Plan as needed. If a student demonstrates anxiety about returning to school, check in with the student on a daily basis until his/her anxiety is alleviated. If a student has a prolonged emotional response to an allergic reaction, social and emotional support may be required. Collaboration with the student's medical provider is required to address any medication changes.

**Food Allergic Students Without an EAP, IHCP or 504 Plan:** Once a school learns that a student has food allergies and does not have an EAP, IHCP or 504 Plan, school officials must discuss the student's individual needs with the student's parents/guardians and put an appropriate management plan in place.

If the student's parent/guardian refuses to consent to an evaluation and implementation of an appropriate management plan (EAP/IHCP/504 Plan), then best practices call for the school to implement a simple EAP stating to call 911 immediately upon recognition of any symptoms along with sending written notification to the parent/guardian of the student's EAP.

## Classroom Teacher Guidelines

Teachers are the student’s first line of defense. You assist the school team in the care and management of students with food allergies, and prevention and treatment of allergic reactions. *See Appendix A: Food in the Classroom for information about food allowed in your classroom.*

### Classroom Teacher General Checklist

	Do not question or hesitate to immediately initiate an Emergency Action Plan (EAP) if a student reports symptoms or exhibits signs of an allergic reaction. See page 4 of the Food Allergy Management Plan for symptoms of a reaction.
	Keep the student's EAP, Individual Health Care Plan (IHCP) and/or 504 Plan accessible in the classroom. Carefully review and follow all plans.
	Leave information for substitute teachers in an organized, prominent, and accessible format. Follow District guidelines for substitute teacher folders.
	Complete the mandated online training modules for food allergy management and anaphylaxis.
	Seek immediate assistance if student has ingested, or is suspected to have ingested, a known allergen.
	In the event of a suspected allergic reaction, make sure the student is always with an adult. Contact nurse to bring epinephrine and evaluate the student immediately.
	Participate in team meetings for the student with food allergies, in-service training or a meeting for a student’s re-entry after a reaction.
	Adapt awards, rewards or prizes by substituting non-food items.
	Whenever possible, adapt curriculum by substituting non-food items. If there is a unique educational benefit to using food in the curriculum, and all students can participate safely and equally based on food allergies: <ul style="list-style-type: none"> <li>• Contact your building principal, who will send you a form to request the use of food in the curriculum.</li> <li>• Upon approval, teacher must communicate with parents about the use of food in the curriculum and send an ingredient list home at least 3 days prior to the event occurring.</li> </ul>
	Other food items that deviate from approved snacks (including food desired to be used for fundraising purposes) desired to be served or eaten in D181 facilities require approval from the Building Principal and District Nurse per the fundraising/special event request form (see Page 11).
	Food desired to be used for fundraising purposes may also be subject to Superintendent approval.
	Avoid isolating students with food allergies. Be aware of how the student with a food allergy is being treated and enforce school rules about bullying and threats.
	Do not send students with food allergies home on the bus or school vehicle if they report any symptoms of an allergic reaction, no matter how minor.

	Teachers' desks are considered their work space; teachers who work in their classroom without students present shall, before students return to the classroom, thoroughly clean their desk and other workspace touched while eating (with approved cleaning wipes), and wash their hands before returning to work with students.
	In the event that a teacher hosts lunch in the classroom (e.g. quiet lunch, homework help, study hall, or other special circumstance approved by the principal and district nurse), no peanuts or tree nuts will be allowed.
	Make sure you have a supply of approved surface wipes. Use approved wipes to clean your desk after eating at desk.
	After an allergic reaction, participate in a Return to School Review as requested, initiated by the school nurse. The review includes a meeting with the student (if appropriate), parent/guardian, nurse, and school administrator, as well as an update of the EAP and, if necessary, replacement of epinephrine auto-injector or other rescue medications.

### Classroom Snack Checklist

	<p>Snacks in classrooms are limited as follows:</p> <p><i>Elementary:</i> Teachers have the option to determine if there will be snacks allowed during class. If snack is allowed, students may bring fruits and vegetables. No additions, toppings or mix-ins (such as dips or spreads) shall be included. If teachers allow drinks, the only drink in the classroom shall be water.</p> <p><i>Middle School:</i> Teachers have the option to determine if there will be snacks allowed during class. If snack is allowed, students may bring fruits, vegetables, cheese, Goldfish crackers, Original Skinny Pop brand popcorn, Annie's fruit snacks, meat jerky, meat sticks and lunchmeat. Dried fruits and applesauce are allowed. No additions, toppings or mix-ins (such as dips or spreads) shall be included. If teachers allow drinks in the classroom, the only drink in the classroom shall be water.</p>
	Do not allow a student who inadvertently brings a restricted food item to the classroom to eat that snack in the classroom.
	Prohibit sharing or trading food at school.
	Encourage students to wash with soap and water or wipe their hands with wipes before and after the handling/consumption of food.
	<p><b>Elementary Classroom Parties:</b> Classrooms holiday parties as well as other celebrations in the classroom, shall be food free or may include Outshine Fruit Bars (lemon, grape, and/or tangerine), Annie's fruit snacks, and Original Skinny Pop brand Popcorn. Students shall not bring food to give as gifts or share with other students (such as with Valentine's cards, on Halloween, or as holiday gifts).</p>

### Field Trip Guidelines

Checklist should be reviewed prior to each planned field trip.

### Field Trip Checklist

	Field trip coordinator should provide timely notification of field trips to the nurse and parents/guardians.
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	Field trip coordinator should check in with the building nurse at least 2 weeks prior to the trip, to determine medications, accommodations and/or special instructions are necessary for food allergic students and other students with health conditions prior to the trip.
	Field trip coordinator should ensure that Field Trip Assessment Questionnaire is completed and sent to parents 2 weeks prior to the trip (see Page 11).
	Field trip coordinator should acquire medications, EAP, 504 accommodation plan (if student has) from the school nurse the morning of the trip, and give to designated staff member. Emergency or rescue medication must be labeled appropriately, and follow school district policy and IHCP or EAP for dispensing medicine.
	A student experiencing a reaction must be accompanied by an adult at all times. A designated adult is required to remain with the student being transported by EMS when parent/guardian is not present.

### CLASSROOM AND SUBSTITUTE TEACHERS: COORDINATE EFFORTS

**Substitute Teachers:** In addition to understanding the checklist items for classroom teachers, substitute teachers make sure to review any emergency action plans (EAPs) in the substitute teacher subfolders.

**Classroom Teachers:** Make sure EAPs are in the folders for your subs. The folder must include instructions for the substitute teacher to immediately contact the nurse/health aide for education and instruction.

### Substitute Teacher Guidelines

Teachers are the student's first line of defense - even if you are only leading the classroom on a substitute basis! It's important that substitutes familiarize themselves with information about students with food allergies who are in their classrooms, and learn the proper procedures for preventing allergic reactions and taking appropriate action when those reactions occur. *See Appendix A: Food in the Classroom for information about food allowed in your classroom.*

### Substitute Teacher General Checklist

	Review the substitute folder for information about any student's Emergency Action Plan (EAP), Individual Health Care Plan (IHCP) and/or 504 Plan. Carefully review and follow all plans.
	Do not question or hesitate to immediately initiate an EAP if a student reports symptoms or exhibits signs of an allergic reaction. See page 4 of the Food Allergy Management Plan for symptoms of a reaction.
	Take the District training for substitutes provided on food allergy management and anaphylaxis.
	Seek assistance if student has ingested, or is suspected to have ingested, a known allergen.
	Ensure students with suspected allergic reactions are accompanied to the nurse's office by an adult.
	Do not offer food to students. Adapt curriculum, awards, rewards, or prizes by substituting non-food items.
	Take all complaints seriously from any student with a life-threatening allergy. Contact principal, other school administrator or school nurse/health aide immediately if you receive a complaint or hear a concern from a student.

	Avoid isolating students with food allergies. Be aware of how the student with a food allergy is being treated and enforce school rules about bullying and threats.
	Do not send students with food allergies home on the school bus or school vehicle if they report any symptoms of an allergic reaction, no matter how minor.
	Teachers' desks are considered their work space; teachers who work in their classroom without students present shall, before students return to the classroom, thoroughly clean their desk and other workspace touched while eating (with approved cleaning wipes), and wash their hands before returning to work with students.
	In the event that a teacher hosts lunch in the classroom (e.g. quiet lunch, homework help, study hall, or other special circumstance approved by the principal and district nurse), no peanuts or tree nuts will be allowed.
	Use approved wipes to clean your desk after eating at desk.

### Classroom Snack Checklist (Included with Substitute Teacher General Checklist)

	<p>Snacks in classrooms are limited as follows:</p> <p><i>Elementary:</i> Teachers have the option to determine if there will be snacks allowed during class. If snack is allowed, students may bring fruits and vegetables. No additions, toppings or mix-ins (such as dips or spreads) shall be included. If teachers allow drinks, the only drink in the classroom shall be water.</p> <p><i>Middle School:</i> Teachers have the option to determine if there will be snacks allowed during class. If snack is allowed, students may bring fruits, vegetables, cheese, Goldfish crackers, Original Skinny Pop brand popcorn, meat jerky, meat sticks, and lunchmeat. Dried fruits and applesauce are allowed. No additions, toppings or mix-ins (such as dips or spreads, granola or cookie crumbles) shall be included. If teachers allow drinks in the classroom, the only drink in the classroom shall be water.</p>
	Do not allow a student who inadvertently brings a restricted food item to the classroom to eat that snack in the classroom.
	Prohibit sharing or trading food at school.
	Encourage students to wipe their hands with approved wipes before and after the handling/consumption of food.
	<p><b>Elementary Classroom Parties:</b></p> <p>Classrooms holiday parties as well as other celebrations in the classroom, shall be food free or may include Outshine Fruit Bars (lemon, grape, and/or tangerine), Annie's fruit snacks, and Original Skinny Pop brand popcorn. Students shall not bring food to give as gifts or share with other students (such as with Valentine's cards, on Halloween, or as holiday gifts).</p>

## School Administrator Guidelines

As leaders in your building, school administrators play an important role in creating a safe and healthy learning environment for all students, and in supporting other staff with their responsibilities in working with students who have food allergies.

### School Administrator Checklist

	Principal should supervise and implement the District’s Food Allergy Management Plan.
	Principal should ensure all building staff receive a copy of the Food Allergy Management Plan, checklist specific to their position, understand their role, and understand how to implement an EAP, IHCP and/or 504 Plan.
	Principal should communicate with PTO leadership regarding Food Allergy Management Plan and review PTO/Special event guidelines and checklist and fundraising/special event forms prior to first PTO food related event being held.
	Prior to the first day of student attendance, building principal should ensure nurse provides training and education for staff, including food service personnel, on policy and procedures for food allergies.
	Principal should ensure that relevant health concerns, EAP, IHCP and/or 504 Plans are disseminated to appropriate staff prior to the first day of student attendance, or upon receipt of new information.
	Principal should ensure that emergency communication devices are available for all school activities that involve a student with food allergies.
	Principal should notify parent/guardian when a new nurse is hired or changes position.
	Principal should reinforce “no food on bus/school vehicle” policy with bus/vehicle drivers and transportation company management.
	Principal should ensure that custodial staff and lunchroom supervisors coordinate efforts to support cleaning procedures in the lunchroom.
	Principal should inform parent/guardian if any student experiences an allergic reaction.
	In the event of first allergic reaction at school, Principal should suggest resources to parents. Recommend EAP, IHCP or 504 Plan to parents. If parents are not cooperative, implement a simple EAP stating to immediately call 911 upon recognition of any symptoms, along with informing the parent/guardian of the student’s plan.
	After an allergic reaction, Principal should participate in a Return to School Review, initiated by the school nurse, which includes a meeting with the student (if appropriate), parent/guardian, nurse, and any teachers involved, as well as an update of the Allergy Action Plan and, if necessary, replacement of epinephrine auto-injector or other rescue medications.
	Principal should review applications for food used in the curriculum and for fundraising, and collaborate with the District and building nurses, and Superintendent, when necessary.
	<b>HR Administrator:</b> Provide online training module for all staff on food allergy management and anaphylaxis.

	<b>HR Administrator:</b> Ensure that all substitute teachers and lunchroom supervisors receive the required training on epinephrine auto-injector use and anaphylaxis.
	<b>HR Administrator:</b> Share guidelines and substitute teacher checklist with all new subs.
	<b>Buildings &amp; Grounds Director:</b> Ensure that all custodial staff are given a copy of the Food Allergy Management Plan, checklist and understand their role and responsibilities.
	<b>Buildings &amp; Grounds Director or Designee:</b> Review rental agreement, when outside groups (non-school related organizations) use school property and food is present to ensure that care is taken not to put students with food allergies at risk.
	<b>Buildings &amp; Grounds Director or Designee &amp; District Nurse :</b> Review roles and responsibilities of transportation providers with regards to Food Allergy safety and emergency response.

### Other Important Information for School Administrators

**Return to School After an Allergic Reaction:** Students who have experienced an allergic reaction at school may need special consideration upon their return to school. The approach taken by the school is dependent upon the severity of the reaction, the student's age and whether his or her classmates witnessed it. A mild reaction may need little or no intervention other than speaking with the student and parents, and re-examining the student's EAP, IHCP and/or 504 Plan.

In the event that a student has a moderate to severe reaction, initiate a **Return to School Review**. The student (if appropriate) and parent/guardian shall meet with the nurse, classroom teacher, school administrator and any other staff that were involved in the allergic reaction to be reassured about the student's safety and to review and amend the EAP, IHCP and/or 504 Plan as needed. If a student demonstrates anxiety about returning to school, check in with the student on a daily basis until his/her anxiety is alleviated. If a student has a prolonged emotional response to an allergic reaction, social and emotional support may be required. Collaboration with the student's medical provider is required to address any medication changes.

**Food Allergic Students Without an EAP, IHCP or 504 Plan:** Once a school learns that a student has food allergies and does not have an EAP, IHCP or 504 Plan, school officials must discuss the student's individual needs with the student's parents/guardians and put an appropriate management plan in place.

If the student's parent/guardian refuses to consent to an evaluation and implementation of an appropriate management plan (EAP/IHCP/504 Plan), then best practices call for the school to implement a simple EAP stating to call 911 immediately upon recognition of any symptoms along with sending written notification to the parent/guardian of the student's EAP.

### Custodial Staff Guidelines

District 181 values our custodial staff as important contributors to the learning environment. That role can be life-saving when dealing with students who have food allergies.

#### Custodial Staff Checklist

	Review the District 181 Food Allergy Management Plan and direct any questions to the principal or school nurse.
	As requested, participate in all in-service training on the identification of food-allergic reactions, risk-reduction and emergency response procedures.
	Take all complaints seriously from any student with a life-threatening allergy. Immediately advise school staff member of any situations.
	Regularly monitor supplies of classroom wipes to ensure sufficient stock. When necessary, request refills. If indicated by building principal; provide additional supplies of wipes where requested.
	Clean tables and chairs routinely after each lunch sitting, using District-approved cleaning agents.
	Use separate wipes specifically for allergen-free eating areas.
	Clean classrooms, desks, doorknobs and lockers routinely with District-approved cleaning agents.

### Lunchroom Supervisor Guidelines

District 181 values our custodial staff as important contributors to the learning environment. That role can be life-saving when dealing with students who have food allergies.

#### Lunchroom Supervisor Checklist

	Review the District 181 Food Allergy Management Plan and direct any questions to the principal or school nurse.
	Ensure that you have a copy of the current building health alert photo list from the school nurse. Review list and familiarize yourself with students who have anaphylactic food allergies. Students with food allergies <b>should NOT</b> wipe tables and/or sweep floors.
	Be aware of where epinephrine auto-injectors are located so that they are accessible for food-allergic students.
	Lunchroom supervisors should coordinate efforts with custodial staff to support cleaning procedures in the lunchroom.
	Never offer food to students. (School office staff must get approval directly with parents for any food changes/unplanned purchases of lunches.)
	Ensure that you receive the required in-service from the building nurse on epinephrine auto-injector use and anaphylaxis. Staff must also complete the online GCN module.

	Take all complaints seriously from any student with a life-threatening allergy. Contact principal, other school administrator or school nurse immediately if you receive a complaint or hear a concern from a student.
	When in doubt about a reaction, administer epinephrine auto-injector and call 911.
	Accompany students with suspected allergic reactions to the nurse from the playground or lunchroom or call for help from the school nurse or administrator. An adult must be with the student at all times. Students experiencing an allergic reaction must not be left alone.
	Recognize specific tables or areas of the lunchroom that have been designated as allergen safe. Reinforce that only students with allergen-free lunches eat at any designated allergen-free tables/areas.

## Transportation Guidelines

A student with food allergies needs a safe environment while being transported to and from school. District 181 provides free transportation for any student in the school district as required by law (see, 105 ILCS 5/29-3 and 23 Ill.Admin. Code § 1.510 (a)). District 181 uses private transportation companies to provide school bus/vehicle service to students, and works with officials from the company to provide information to all school bus/school vehicle drivers on managing life-threatening food allergies.

### **EPINEPHRINE AUTO-INJECTORS ALLOWED ON THE BUS/SCHOOL VEHICLE**

State law allows a student to carry their prescribed epinephrine auto-injector on school transportation.

#### **Transportation Provider Checklist**

	D181 designee will provide transportation company(ies) representatives with a health alert photo list of students on the route including health condition and medication location.
	D181 designee will provide company(ies) food allergy & anaphylaxis emergency response information annually, and company(ies) are asked to give this information to all new drivers, and annually to all current drivers.
	<p>D181 designee will include in the food allergy &amp; anaphylaxis information that:</p> <ul style="list-style-type: none"> <li>● Bus/school vehicle drivers are asked not eat on the bus/school vehicle, while students are present. After eating without students present, bus/vehicle drivers are asked to wipe down their space to dispose of all food particles, before students board.</li> <li>● A student with a suspected allergic reaction, already in progress, must not board the bus/school vehicle.</li> <li>● Bus drivers should prohibit food consumption on school buses or school vehicles, unless medically necessary.</li> <li>● Bus/school vehicle drivers should report any incidents of eating, or food being thrown or spilled to the District communications director or other Superintendent designated person.</li> </ul>
	Bus companies have instructed drivers to pull over the bus/vehicle over and call 911 in case of any emergency.
	Bus companies provide functioning emergency communication device (e.g., cell phone, two-way radio).

## Coach/Activity Sponsor Guidelines

Students participate in many activities outside the classroom. It is critical that a student with food allergies be provided a safe environment both inside and outside the classroom. These activities might include recess, physical education, field trips, school-sponsored events or athletics. Teachers and staff responsible for lunch, recess, coaching or non-classroom activities must be trained to recognize and respond to a severe allergic reaction.

### Coaches/Activity Leaders Checklist

	Ask an administrator or school nurse to provide you with specific information pertaining to all students with life-threatening allergies, if parent/guardian agrees. Review the Emergency Action Plan (EAP), Individual Health Care Plan (IHCP) and/or 504 Plan with nurse/health aide.
	Identify who is responsible for keeping epinephrine auto-injector(s) during sporting events or activities. Ensure a current epinephrine auto-injector is readily accessible for food-allergic students. An adult staff member, trained in its use, must be onsite.
	Make certain that an emergency communication device (e.g., intercom, cell phone) is always available.
	Get emergency forms and IHCP of participating students with food allergies or other food-related medical conditions from the school nurse/health aide.
	Ensure that before- and after-school activities sponsored by the school comply with school policies and procedures regarding life-threatening allergies. Follow the field trip checklist.
	Cover or tape medical alert identification of student athletes. Medical alert identification is not required to be removed for activities. Illinois High School Association (IHSA) permits the student-athlete to wear the medical alert bracelet and not have it considered jewelry. Medical alert bracelet should be taped to the body (wherever it is usually worn), but parts of it should remain visible for medical personnel to view in case of emergency.
	After-school enrichment, before-school care, or other programs <u>held in school classrooms</u> must follow the daily snack guidelines. <ul style="list-style-type: none"> <li>● In the elementary schools, fruits and vegetables are allowed in classrooms.</li> <li>● In the middle schools, fruits and vegetables, as well as cheese, Goldfish crackers, Original Skinny Pop brand popcorn, meat jerky, meat sticks, and lunchmeat are allowed in classrooms.</li> </ul>
	Other food items that deviate from approved snacks (including food desired to be used for fundraising purposes) desired to be served or eaten in D181 facilities require approval from the Building Principal and District Nurse.
	Food desired to be used for fundraising purposes may also be subject to Superintendent approval.

## **PTO/Special Event Organizer Guidelines**

Students participate in many activities outside the classroom. It is critical that a student with food allergies be provided a safe environment both inside and outside the classroom. These activities might include school-sponsored events and fundraisers. Event organizers are responsible following District 181 guidelines for food in classrooms, in addition to receiving approval from the District before food items that deviate from approved item list are brought in or sold in District facilities. Organizers who volunteer for food related events must receive an in-service from the building nurse prior to the event occurring.

### **PTO/Special Event Organizer Checklist**

	<p>After-school enrichment, before-school care, or other programs held in school classrooms must follow the daily snack guidelines.</p> <ul style="list-style-type: none"><li>● In the elementary schools, fruits and vegetables are allowed in classrooms.</li><li>● In the middle schools, fruits and vegetables, as well as cheese, Goldfish crackers, Original Skinny Pop brand popcorn, meat jerky, meat sticks, and lunchmeat are allowed in classrooms.</li></ul>
	<p>Food items that deviate from D181 approved snacks (including food for fundraising purposes) require approval from the Building Principal and District Nurse per the fundraising, or special event request form (Page 11).</p>
	<p>Food desired to be used for fundraising purposes may also be subject to Superintendent approval.</p>
	<p>For every food item, an up-to-date ingredient list shall be provided to all parents at least three days in advance of the event. One way of notification is providing this information on the activity sign up sheet.</p>
	<p>Food items approved by the Principal and District Nurse shall be eaten in designated areas (lunchroom, gym, or other as determined by building administration).</p>
	<p>Parents who choose to volunteer for food-related events, prior to the event, shall receive the required in-service from the building nurse on epinephrine auto-injector use and anaphylaxis.</p>

## Appendix C: Resources

District 181 relied on many great resources in developing this plan. We encourage parents of children with allergies to access these networks for information and support:

- [Mothers of Children Having Allergies \(MOCHA\)](#): A support group for parents in northern Illinois.
- [Food Allergy Research and Education \(FARE\)](#): A national organization dedicated to advocacy and education.
- [Illinois State Board of Education Guidelines](#)
- [Centers for Disease Control Guidelines](#)
- [Recommended Practices for Reducing the Risk of Exposure to Food Allergens](#): A resource included in the CDC guidelines, this document outlines recommended practices and accommodations for the classroom, lunchroom, transportation, school events, and physical education and recess to reduce the risk of exposure to food allergens and keep children with food allergies safe and included.
- [Food Allergy Awareness](#): A presentation for elementary school students.
- [Discovery Channel Documentary, “An Emerging Epidemic: Food Allergies in America”](#): FARE partnered with the Discovery Channel to produce this one-hour documentary, which explores what it is like to live with life-threatening food allergies, how families and individuals managing food allergies are working to raise awareness in their communities, and the research underway to find effective treatments and a cure.
- [How to C.A.R.E.™ for Students with Food Allergies: What Educators Should Know](#): This free online interactive course teaches educators how to prepare for food allergy and anaphylaxis. It is specifically designed for school personnel – administrators, nurses, teachers, and other staff – in the United States.
- [Food Allergy Bullying \(Video\)](#)
- [Thank You for Keeping Us Safe and Included \(Video\)](#)
- [Other Food Allergy Videos](#)
- [Medic Alert](#)

## Appendix D: Food Allergy Management Plan: Parent Information & Overview

The D181 Food Allergy Management Plan was adopted by the District 181 Board of Education on May 21, 2018. For a copy of the Plan in full, please see [d181>Parents>Health Information>Food Allergy Management Plan](#).

The Plan is aligned with Board policy 7.285, and provides a comprehensive, district-wide plan to prevent or reduce allergen exposure, educate staff, and respond to food allergy emergencies. Following is a summary of action items for District students and parents.

The Plan is communicated to all staff, students and parents prior to the first day of student attendance and includes information on: allergies and anaphylaxis, federal non-discrimination & disability law, classroom food guidelines and resources for parents and staff. The plan will be reviewed annually by a Food Allergy Committee organized by the Superintendent.

Parents play a critical role in ensuring a safe school environment. Please help protect the health and safety of all students by following and encouraging students to follow all established guidelines below:

Elementary Guidelines	Middle School Guidelines
<p>Classroom Snack</p> <ul style="list-style-type: none"> <li>• Fruits or vegetables only (including dried fruits such as raisins and applesauce).</li> <li>• No additions, toppings or mix-ins (such as dips or spreads).</li> </ul> <p>Lunch</p> <ul style="list-style-type: none"> <li>• For any classroom lunch or field trip lunch, the building principal will send an email stating that lunches should contain no peanuts or tree nuts. Please ensure that student lunches do not contain any peanuts or tree nuts on those days.</li> </ul> <p>Elementary Classroom Parties:</p> <ul style="list-style-type: none"> <li>• Classroom parties shall be food free or, at teacher discretion, may include Outshine Fruit Bars (lemon, grape, and/or tangerine), Annie’s fruit snacks, and/or Original Skinny Pop brand popcorn. Students shall not bring food to give as gifts or share with other students (such as with Valentine’s cards, on Halloween, or as holiday gifts).</li> </ul>	<p>Classroom Snack*</p> <ul style="list-style-type: none"> <li>• Students shall not bring any snacks containing peanuts or tree nuts into any classroom.</li> <li>• Students shall abide by the middle school classroom snack guidelines which include: fruits, vegetables, cheese, Goldfish crackers, Original Skinny Pop brand popcorn, Annie’s fruit snacks, meat jerky, meat sticks and lunchmeat. Dried fruits and applesauce are allowed. No additions, toppings or mix-ins (such as dips or spreads) shall be included.</li> </ul> <p>*Teachers will determine whether or not there are snacks allowed in their classroom.</p> <p>Lunch</p> <ul style="list-style-type: none"> <li>• Students shall not bring a lunch that contains peanuts or tree nuts into any classroom.</li> <li>• Students shall not bring a lunch that contains peanuts or tree nuts on a field trip.</li> <li>• Students shall not eat peanuts or tree nuts on the bus (this includes field trips and to/from school).</li> </ul>