

Management Plan and Guidelines for Students with Food Allergies and/or Glycogen Storage Disease

In order to implement the Board policy pertaining to the management of food allergies and Glycogen Storage Disease (“GSD”) properly, the following administrative regulations/guidelines are hereby established.

I. Identifying Students with Life-Threatening Food Allergies and/or Glycogen Storage Disease.

Early identification of students with life-threatening food allergies and/or GSD is important. The District, therefore, encourages parents/guardians of students with life-threatening food allergies to notify the school of the allergy, providing as much medical documentation about the extent and nature of the food allergy as is known, as well as any known effective treatment for the allergy. The District also encourages parents/guardians of students with GSD to notify the school of the disease, providing as much medical documentation about the type of GSD, nature of the disease, and current treatment of the student.

II. Individualized Health Care Plans and Emergency Care Plans.

1. If the District obtains medical documentation that a student has a life-threatening food allergy and/or GSD, the District, under the direction of the school nurse, shall develop an individualized health care plan (IHCP) for the student. Each IHCP should contain information relevant to the child’s participation in school activities and should attempt to strike a balance between individual, school and community needs while fostering the normal development of the student.
2. The IHCP should be developed by a group of individuals, which shall include the parents/guardians, and appropriate school personnel. Such personnel may include but are not limited to, the school nurse, school or food service administrator(s), classroom teacher(s), and the student, if appropriate. The school may also consult with the school’s medical advisor, as needed.
3. IHCP’s are developed for students with special health needs or whose health needs require daily interventions. The IHCP describes how to meet the child’s health and safety needs within the school environment and should address the student’s needs across school settings. Information to be contained in an IHCP should include a description of the functional health issues (diagnosed); student objectives for promoting self-care and age-appropriate independence; and the responsibilities of parents/guardians, school nurse, and other school personnel. The IHCP may also include strategies to minimize the allergic student’s participation in the classroom. IHCP’s for such students may include such considerations:
 - a. classroom environment, including allergy free considerations;
 - b. cafeteria safety;
 - c. participation in school nutrition programs;
 - d. snacks, birthdays and other celebrations;
 - e. alternatives to food rewards or incentives;
 - f. hand-washing;
 - g. location of emergency medication;

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- h. who will provide emergency and routine care in school
 - i. risk management during lunch and recess times;
 - j. special events;
 - k. field trips, fire drills, and lockdowns;
 - l. extracurricular activities;
 - m. school transportation;
 - n. the provision of food or dietary supplements by the school nurse, or any school employee approved by the school nurse;
 - o. staff notification, including substitutes; and
 - p. transitions to new classrooms, grades, and/or buildings.
4. The IHCP should be reviewed annually, or whenever there is a change in the student's emergency care plan, changes in self-monitoring and self-care abilities of the student, or following an emergency event requiring the administration of medication or the implementation of other emergency protocols.
5. For a student with food allergies and/or GSD, the IHCP shall not prohibit a parent/guardian, or a person designated by such parent/guardian, to provide food or dietary supplements to a student with GSD on school grounds during the school day.
6. In addition to the IHCP, the District shall also develop an Emergency Care Plan ("ECP") for each student identified as having a life-threatening food allergy. The ECP is part of the IHCP and describes the specific directions about what to do in a medical emergency. For the student with a life-threatening food allergy, the ECP should include the following information:
- a. the student's name and other identifying information, such as date of birth, grade, and photo;
 - b. the student's specific allergy;
 - c. the student's signs and symptoms of an allergic reaction;
 - d. the medication, if any, or other treatment to be administered in the event of exposure;
 - e. the location and storage of the medication;
 - f. who will administer the medication (including self-administration options, as appropriate);
 - g. other emergency procedures, such as calling 911, contacting the school nurse, and/or calling the parents/guardians or physician;
 - h. recommendations for what to do if the student continues to experience symptoms after the administration of medication; and
 - i. emergency contact information for the parents/guardians/family and medical provider.

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7. In addition to the IHCP, the District shall also develop an ECP for each student identified as having GSD. The ECP is part of the IHCP and describes the specific directions about what to do in a medical emergency. For the student with GSD, the ECP should include the following information:
 - a. the student's name and other identifying information, such as date of birth, grade and photo;
 - b. information about the disease or disease-specific information (i.e. type of GSD);
 - c. the student's signs and symptoms of an adverse reaction (such as hypoglycemia);
 - d. the medication, if any, or other treatment to be administered in the event of an adverse reaction or emergency (i.e. Glucagon);
 - e. the location and storage of the medication;
 - f. who will administer the medication (including self-administration options, as appropriate);
 - g. other emergency procedures, such as calling 911, contacting the school nurse, and/or calling the parents/guardians or physician;
 - h. recommendations for what to do if the child continues to experience symptoms after the administration of medication; and
 - i. emergency contact information for the parents/guardians/family and medical provider.
8. In developing the ECP, the school nurse should obtain current medical documentation from the parents/guardians/family and the student's health care provider, including the student's emergency plan and proper medication orders. If needed, the school nurse or other appropriate school personnel should obtain consent to consult directly with the student's health care providers to clarify medical needs, emergency medical protocol and medication orders.
9. A student identified as having a life-threatening food allergy or GSD is entitled to an IHCP and an ECP, regardless of his/her status as a student with a disability, as that term is understood under Section 504 of the Rehabilitation Act of 1973 ("Section 504"), or the Individuals with Disabilities Education Act ("IDEA").
10. The District shall ensure that the information contained in the IHCP and ECP is distributed to any school personnel responsible for implementing any provisions of the IHCP and/or ECP and that any procedures in the IHCP and/or ECP comply with the District's policies and procedures regarding the administration of medications to students.
11. Whenever appropriate, a student with a life-threatening food allergy and/or GSD should be referred to a Section 504 Team for consideration if/when there is a reason to believe that the student has a physical or mental impairment that substantially limits one (1) or more major life activities, as defined by Section 504. Whenever appropriate, students with life-threatening food allergies and/or GSD should be referred to a Planning and Placement Team (PPT) for consideration of eligibility for special education and related services under the IDEA if there is a reason to suspect that the student has a qualifying disability and requires specialized instruction.
12. When making eligibility determinations under Section 504 and/or IDEA, schools must consider the student's needs on an individualized, case-by-case basis.

III. Training/Education

1. The District shall provide appropriate education and training for school personnel regarding the management of students with life-threatening food allergies and GSD. Training shall include, as appropriate and depending on the specific needs of the individual student, training in the administration of medication with cartridge injectors (i.e. epi-pens), and/or the preventative strategies to minimize the child's risk of exposure to life-threatening allergens, the provisions of food or dietary supplements for students with GSD. School personnel will be also be educated on how to recognize symptoms of allergic reactions and/or symptoms of low blood sugar, as seen with GSD, and what to do in the event of an emergency. Staff training and education will be coordinated by an appropriate administrator and/or school nurse. Any such training regarding the administration of medication shall be done in accordance with state law and Board policy.
2. The school shall also provide age-appropriate information to students about food allergies and GSD, how to recognize symptoms of an allergic reaction and/or low blood sugar emergency and the importance of adhering to the school's policies regarding food and/or snacks.

IV. Prevention

The school will develop appropriate practices to minimize the risk of exposure to life-threatening allergens and the risks associated with GSD. Practices that may be considered may include, but are not limited to:

1. Encouraging hand washing.
2. Discouraging students from swiping food and/or swapping utensils at lunch or other snack/meal times.
3. Encouraging the use of non-food items as incentives, rewards or in connection with celebrations, including birthdays.
4. Training staff in recognizing symptoms of anaphylaxis and hypoglycemia.
5. Planning for school emergencies, to include consideration of the need to access medication, food and/or dietary supplements.
6. Encouraging at-risk students to have some means of identification, such as a medical alert bracelet.
7. Providing parents/guardians with online access to food service menus so that parents may select foods to avoid in advance.
8. Not knowingly making use of peanuts, peanut products, tree nuts, and tree nut products for instructional purposes.
9. Notifying parents/guardians of identified allergic children in grades PreK-6 when classroom activities may include food.
10. Providing the school nurse with a list of participants in advance of a field trip so that the school nurse may identify those students with identified food allergies and/or GSD.
11. Having the School Medical Advisor supply a standing order for the use of emergency epinephrine and Benadryl.

V. Communication

1. As described above, the school nurse shall be responsible for coordinating the communication among parents/guardians, a student's individual health care provider and the school regarding a student's life-threatening allergic condition and/or GSD. School staff responsible for implementing a student's IHCP will be notified of their responsibilities and provided with appropriate information as to how to minimize the risk of exposure and/or alterations in blood sugar levels and how to respond in the event of such emergency.
2. The District will ensure that there are appropriate communication systems available (i.e. telephones, cell phones, walkie-talkies) and for off-site activities (i.e. field trips) to ensure that school personnel is able to effectively respond in case of emergency.
3. The Principal shall develop standard letters to be sent home to parents/guardians, whenever appropriate, to alert them to food restrictions within their student's classroom or the school.
4. All District staff are expected to follow District policy and/or federal and state law regarding the confidentiality of student information, including medical information about the student.
5. The District shall make the Management Plan and Guidelines for Students with Food Allergies and/or Glycogen Storage Disease available on the District's website.
6. The District shall provide annual notice to parents/guardians regarding the Management Plan and Guidelines for Students with Food Allergies and/or Glycogen Storage Disease.

VI. Monitoring the District's Plan and Procedures

The District should conduct periodic assessments of its Management Plan and Guidelines for Students with Food Allergies and/or Glycogen Storage Disease. Such assessments should occur at least annually and after each emergency event involving the administration of medication to a student with a life-threatening food allergy or GSD to determine the effectiveness of the process, why the incident occurred, what worked and what did not work.

The Superintendent shall annually attest to the Department of Education that the District is implementing the Management Plan and Guidelines for Students with Food Allergies and/or Glycogen Storage Disease.

Legal References: Connecticut General Statutes § 10-212a
 Connecticut General Statutes § 10-212c
 Connecticut General Statutes § 10-220i
 Connecticut General Statutes § 10-231c
 Connecticut General Statutes § 19a-900
 Connecticut General Statutes § 52-557b
 Regulations of Connecticut State Agencies §§ 10-212a-1 through 10-212a-7
 Guidelines for Managing Life-Threatening Food Allergies in Connecticut Schools (Includes Guidelines for Managing Glycogen Storage Disease), Connecticut State Department of Education (Updated 2012)
 Section 504 of the Rehabilitation Act of 1973, 29 U.S.C. 794
 Americans with Disabilities Act of 1990 (ADA) 42 U.S.C. § 12101 et seq.
 Individuals with Disabilities Education Act of 1976 (IDEA), 20 U.S.C. § 1400 et seq.
 Public Act 18-185

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