

## **Students**

**BP 5141.27 (a)**

### **Food Allergies/Special Dietary Needs**

The Governing Board desires to prevent exposure of students to foods to which they are allergic and to provide for prompt and appropriate treatment in the event that a severe allergic reaction occurs at school.

The Superintendent or designee shall develop guidelines for the care of food-allergic students. Such guidelines shall include, but not be limited to, strategies for identifying students at risk for allergic reactions, avoidance measures and other means to manage allergies, education of staff regarding typical symptoms, and actions to be taken in the event of a severe allergic reaction.

*(cf. 3550 - Food Service/Child Nutrition Program)*

*(cf. 3554 - Other Food Sales)*

*(cf. 5030 - Student Wellness)*

*(cf. 5141 - Health Care and Emergencies)*

*(cf. 5141.21 - Administering Medication and Monitoring Health Conditions)*

Parents/guardians shall be responsible for notifying the Superintendent or designee, in writing, regarding any food allergies or other special dietary needs of their child in accordance with administrative regulation.

*(cf. 5125 - Student Records)*

According to guidance from the U.S. Department of Agriculture, “*Accommodating Children with Special Dietary Needs in the School Nutrition Programs: Guidance for School Food Service Staff*,” students with food allergies or intolerances are not generally considered to have a "disability" as defined under Section 504 of the Rehabilitation Act or the Individuals with Disabilities Education Act. However, if a licensed physician determines the food allergy is so severe as to substantially limit one or more major life activities, the student may be considered “disabled” in accordance with Section 504. Such students require an accommodation plan.

Students with serious dietary needs that qualify as a disability under Section 504 of the federal Rehabilitation Act or the Individuals with Disabilities Education Act shall be provided reasonable accommodation or services, as appropriate, in accordance with his/her accommodation plan or individualized education program.

*(cf. 6159 - Individualized Education Program)*

*(cf. 6164.6 - Identification and Education Under Section 504)*

Students shall not be excluded from school activities based solely on their food allergy.

*(cf. 0410 - Nondiscrimination in District Programs and Activities)*

**Food Allergies/Special Dietary Needs**

*Legal Reference:*

*EDUCATION CODE*

*49407 Liability for treatment*

*49408 Emergency information*

*49414 Emergency epinephrine auto-injectors*

*49423 Administration of prescribed medication for student*

*CODE OF REGULATIONS, TITLE 5*

*600-611 Administering medication to students*

*15562 Reimbursement for meals, substitutions*

*UNITED STATES CODE, TITLE 20*

*1232g Family Educational Rights and Privacy Act of 1974*

*1400-1482 Individuals with Disabilities Education Act*

*UNITED STATES CODE, TITLE 29*

*701-795a Rehabilitation Act, including:*

*794 Rehabilitation Act of 1973, Section 504*

*UNITED STATES CODE, TITLE 42*

*1751-1769h National School Lunch Program*

*1771-1791 Child nutrition, especially:*

*1773 School Breakfast Program*

*CODE OF FEDERAL REGULATIONS, TITLE 7*

*210.1-210.31 National School Lunch Program*

*220.1-220.21 National School Breakfast Program*

*225.16 Meal programs, individual substitutions*

*Management Resources:*

*CALIFORNIA DEPARTMENT OF EDUCATION PUBLICATIONS*

*Training Standards for the Administration of Epinephrine Auto-Injectors, December 2004*

*FOOD ALLERGY AND ANAPHYLAXIS NETWORK (FAAN) PUBLICATIONS*

*School Guidelines for Managing Students with Food Allergies*

*U.S. DEPARTMENT OF AGRICULTURE PUBLICATIONS*

*Accommodating Children with Special Dietary Needs in the School Nutrition Programs: Guidance for School Food Service Staff, Fall 2001*

*WEB SITES*

*American Dietetic Association: <http://www.eatright.org>*

*American School Food Service Association: <http://www.asfsa.org>*

*California Department of Education, Health Services and School Nursing: <http://www.cde.ca.gov/ls/he/hn>*

*Food Allergy and Anaphylaxis Network: <http://www.foodallergy.org>*

*International Food Information Council: <http://ific.org>*

*National School Boards Association, School Health Programs: <http://www.nsba.org>*

*U.S. Department of Agriculture: <http://www.fns.usda.gov>*

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### **Food Allergies/Special Dietary Needs**

#### **Definitions**

Special dietary needs include food intolerances, allergies, and other medical needs that may require avoidance of specific foods.

Food allergies are abnormal responses of the body's immune system to certain foods or ingredients.

Anaphylaxis is a potentially life-threatening hypersensitivity to a substance and may be caused by a food allergy. Symptoms may include shortness of breath, wheezing, difficulty breathing, difficulty talking or swallowing, hives, itching, swelling, shock, or asthma. (Education Code 49414)

In severe cases, anaphylaxis may result in lowered blood pressure, loss of consciousness, or even death. Symptoms typically appear immediately after exposure to a certain food or substance but in rare cases may occur after a few hours.

Epinephrine auto-injector is a disposable drug delivery system with a spring-activated concealed needle that is designed for emergency administration of epinephrine to persons suffering a potentially fatal reaction to anaphylaxis. (Education Code 49414)

#### **Life-Threatening Peanut Allergies**

In the Fountain Valley School District, staff will follow a process so that children with dangerous peanut allergies have minimized exposure to peanut products, although the District cannot guarantee that it shall be “peanut free.”

#### **Notification by Parent/Guardian**

If their child has a known food allergy, the parents/guardians shall notify the Superintendent or designee in writing. If the food allergy requires food substitutions or modifications in school meals, the written statement shall also describe the specific foods to be restricted and the foods that should be substituted. The parent shall also provide written medical documentation, signed by a physician, that includes the following information:

- The nature of the allergy
- The severity of the allergy
- How the allergy limits the student's ability to learn and participate in school activities
- What triggers the student's allergic reaction?
- The doctor's recommendation for avoiding an allergic reaction
- What action should be taken if the student suffers an allergic reaction at school?

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The school district, after reviewing the parent's written notification with physician's signature, will meet with the parent to determine if the child's disability is determined to be so severe to substantially limit the child's ability to learn or participate in school activities. If it is so determined, a 504 plan will be drafted to reasonably accommodate the child's disabilities. If the child's disability is determined to be not so severe, a less formal plan may be drafted if appropriate.

### **Prevention**

To minimize students' exposure to foods to which they are allergic, the Superintendent or designee shall, at a minimum, implement the following preventive measures:

1. Notification to District Staff

When notified by the parent/guardian that a student has a food allergy, the principal or designee shall inform the student's teacher(s), bus driver, school nurse, office staff, coach, substitute teacher, District Office Food Services Director, food service staff, noon duty aides, Extended School Program staff and/or any other personnel responsible for supervising the student.

The principal, parent, child and designated staff shall meet to discuss the student's individual needs.

The principal or designee shall notify substitute staff of any students with known food allergies and the school's response plan.

*(cf. 5125 - Student Records)*

2. Food Services

The district's food services program shall make food substitutions in breakfasts, lunches, and after-school snacks when students are considered to have a disability under Section 504 of the federal Rehabilitation Act of 1973 that restricts their diet and when a physician has signed a statement of need that includes recommended alternate foods. (7 CFR 210.10, 220.8)

*(cf. 3550 - Food Service/Child Nutrition Program)*

*(cf. 3554 - Other Food Sales)*

*(cf. 5030 - Student Wellness)*

Substitutions may be made on a case-by-case basis for students who do not have a disability under Section 504 but who cannot consume the regular breakfast, lunch, or after-school snack because of medical or other special dietary needs, when supported by a statement of need signed by a recognized medical authority. (7 CFR 210.10, 220.8, 225.16)

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The district's food services staff shall check food labels or specifications to determine if foods being served contain traces of substances to which the student is allergic. Food Service staff will be directed to sell snack items which may contain the allergic substances in a special area with a visible sign stating "Allergen."

Under no circumstances shall food services staff prescribe nutritional requirements or revise a diet order prescribed by a physician.

Food substitutions shall not result in any additional cost to the student.

The Fountain Valley School District shall recommend to the parent/guardian that highly allergic students bring their lunch and snacks from home.

#### 3. Class Parties/School Activities

Without identifying the student, the principal or teacher may notify parents/guardians of other students in the class that a student is allergic to a specific food and may request that the food not be provided at class parties or other school events.

Whenever the ingredients in any food served at class parties or other school activities are unknown, the student shall be instructed to avoid the food.

#### 4. Sanitation and Cleaning

To avoid spreading allergens, cafeteria tables and classroom surfaces shall be cleaned with a fresh cloth or disposable paper towels and cleaning products known to effectively remove food proteins, excluding waterless cleaners or instant hand sanitizers that do not involve a wet-wash step. Cross-contact from a sponge or cloth used to clean allergen-containing tabletops shall be avoided. Staff shall use and promote hand-washing using soap and water before and after food handling. Students shall be notified that exchanging meals or utensils is prohibited.

#### 5. Professional Development

Schoolwide professional development shall be provided to appropriate staff on the identification and management of food allergies, including avoidance measures, typical symptoms, the proper use of epinephrine auto-injectors, documentation and storage of medication, and emergency drills.

*(cf. 4131 - Staff Development)*

*(cf. 4231 - Staff Development)*

*(cf. 4331 - Staff Development)*

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6. Supervision of Students

Staff who are trained and knowledgeable about symptoms of anaphylaxis and actions to take in an emergency shall provide supervision in the classroom and cafeteria and on the playground whenever students known to have a food allergy are on school grounds.

7. Health Education

The district's health education curriculum may include instruction on food allergies in order to assist food-allergic students in taking responsibility for monitoring their diet and to teach other students about the dangers of sharing foods or utensils with others.

*(cf. 6142.8 - Comprehensive Health Education)*

**Emergency Response**

Epinephrine auto-injectors or other medicine provided for use in the event of an anaphylactic shock reaction shall be stored and used in accordance with law and BP/AR 5141.21 - Administering Medication and Monitoring Health Conditions.

*(cf. 4119.43 - Universal Precautions)*

*(cf. 5141.21 - Administering Medication and Monitoring Health Conditions)*

In addition, staff shall call 911 and seek immediate medical attention for a student experiencing an anaphylactic shock reaction. As soon as possible, school staff shall contact the student's parents/guardians or other person identified as an emergency contact.

*(cf. 5141 - Health Care and Emergencies)*