



CHANNING HALL

Allergies Policy

Guidelines for protecting students with life threatening allergies and food intolerances.

Severe allergies can be life threatening. Severe food intolerance (i.e. celiac disease) can be damaging and can produce chronic long term health effects. The risk of accidental exposure to food allergens can be reduced in the school setting if schools partner with students, parents and physicians to minimize risks and provide a safe educational environment for severely allergic and food-intolerant students.

The foods most likely to cause allergic reactions are: peanuts, tree nuts, dairy, eggs, soy, wheat, fish and shellfish. Students affected by celiac disease must avoid wheat, rye, barley and oats. However, any food can cause an allergic reaction in an affected student. Allergic reactions can produce mild reactions such as watery eyes or an itchy nose, moderate reactions such as hives, or the life threatening reaction called anaphylaxis wherein multiple body systems are affected.

Severe food intolerance (i.e. celiac disease) reactions are varied in nature and time of onset, and may include severe stomach/gastrointestinal pain, diarrhea, vomiting, and skin rash. In celiac disease, ingestion of gluten from wheat, rye, most oats and/or barley causes severe damage to the small intestine resulting in malabsorption of vital nutrients and other major health concerns.

Channing Hall cannot guarantee that a student will never experience an allergy-related event while at school. Because the school is committed to student safety, it has created these guidelines to reduce the risk that children with life threatening allergies/food intolerances will experience an allergy-related event.

Family Responsibilities

1. Notify the school (head of school/front office/teacher) of the child's allergies/intolerance as soon as possible prior to the first day of attendance.
2. Allow sufficient time to secure physician signatures on all necessary forms, including the [Student Medication Authorization Form](#).
3. Work with the school team – which may include the head of school, counselor, classroom teacher, school nurse, and others – to determine the appropriate health care plan that accommodates the child's needs throughout the school including in the classroom, in the cafeteria, in after-care programs, during school-sponsored activities and on the school bus.
4. Provide a letter from a health care provider that states your child's diagnosis, any history of allergic reactions, especially whether your child has experienced anaphylaxis, and any medically advisable accommodations.
5. Provide written medical documentation, instructions, and properly labeled, current medications as directed by a physician using the appropriate health care plan (Severe Allergy Care Plan) as a guide to the school. Include a photo of the child on the written form. Provide replacement medications after use or upon expiration. Pick up medication at the end of every school year.
6. Provide a list of foods/ingredients to avoid.
7. Provide emergency contact information.
8. Educate the child in the self-management of their food allergy/intolerance including:
 - Safe and unsafe foods

- Strategies for avoiding exposure to unsafe foods
 - Symptoms of allergic reactions
 - How and when to tell an adult he/she may be having an allergy-related problem
 - How to read food labels (age appropriate)
 - Review weekly lunch menu together and contact Food Service Director for ingredient listings
 - No trading of foods with anyone at school
 - No accepting foods from anyone unless designated by family
9. Should a reaction occur, review policies/procedures with the school staff, child's physician and the child (age appropriate) following the incident.
 10. Provide safe snacks if the family determines the likelihood of accidental exposure is too great when other parents provide birthday treats, party treats, etc.
 11. Strongly consider participating in the classroom as a volunteer and/or room parent to organize parties where food may be present.
 12. If you observe a student not following these guidelines at school or on a field trip, request a school staff member to intervene.

Student Responsibilities

1. Attend appropriate Health Care Plan and/or 504 Plan meetings so that self-advocacy and food allergy/intolerance knowledge will continue to increase with age.
2. Agree to not trade food with anyone.
3. Agree to not eat anything with unknown ingredients or anything with a known allergen.
4. Agree to be proactive in the care and management of their food allergy/intolerance and reactions based on their developmental level. This may include educating their classmates about their allergy/intolerance or mentoring other severely allergic students about their allergy/intolerance.
5. Notify an adult immediately if they eat something believed to contain a food allergen.
6. Notify an adult immediately if they believe they are experiencing an allergic reaction.
7. Carry their epinephrine at all times once they are approved to self-carry.
8. Channing Hall cannot guarantee that products with nuts or other food allergens will never be present at school or at school sponsored events.
9. Channing Hall cannot monitor products sold at athletic events or special students sales, products brought for potlucks or celebrations, or served on off-campus trips.
10. Students with severe food allergies/intolerances must carefully monitor their food (and likely provide their own food) in these situations.

School Responsibilities

1. Be knowledgeable about and follow applicable federal laws including ADA, IDEA, Section 504 and FERPA and any state laws and regulations and district policies that apply.
2. Create/review/update policies and procedures regarding how to properly manage severely allergic/food intolerant students for affected schools in the district to follow.
3. Provide training to school administration, substitute teachers, food service workers, and counselors as appropriate regarding life threatening allergies and food intolerances. Training should include how to recognize and respond to a life-threatening allergic reaction, including administration of epinephrine.
4. Review policies/procedures/training on a periodic basis to ensure student's needs are being met.
5. Be knowledgeable about and follow applicable federal laws including ADA, IDEA, Section 504, FERPA and any state law and regulations that apply.
6. Review the health information submitted by parents and physicians to determine whether a health care plan (Severe Allergy Care Plan), Section 504 Plan or both will apply. Create appropriate plan(s) to be reviewed at least on an annual basis. Distribute Plan annually (prior to start of school year) to all teachers/extra-curricular staff of severely allergic/food intolerant child. Ensure that pertinent information be shared with faculty and staff that have contact with the student in accordance with federal and state law, but otherwise kept confidential.

7. Inform and educate teachers as far in advance as possible that they will be teaching a severely allergic student or a student with food intolerances.
8. Take reasonable efforts to train all staff to identify signs of an allergic reaction and to administer epinephrine. All staff shall include teachers, custodians, playground monitors, cafeteria staff and extra-curricular staff, such as coaches.
9. Identify a core team of, but not limited to, administration, school nurse, counselor, teacher(s), food service personnel to work with the parents and the student (age appropriate) to establish a plan of education, awareness and prevention for the school community.
10. Channing Hall cannot institute a school-wide ban. Food safety and awareness is encouraged.
11. Allergen-free classrooms and allergen-free tables in the cafeteria decrease potential exposure to an allergen, and are vital for the severely food allergic student to remain safe, especially in elementary school. A letter home to classroom parents may be necessary to ensure an allergen-free classroom is maintained. The student's name will remain confidential (unless parents choose to sign waiver). In middle school, it may be easier to designate the student's classrooms as food-free.
12. Take reasonable steps to maintain a playground free of food allergens.
13. Encourage hand washing after lunch especially in the elementary school age group.
14. Wash allergen free cafeteria tables using separate supplies – bucket, water, sponges, rags – than supplies used for other tables.
15. Identify staff in the cafeteria responsible for ensuring food allergy safety by monitoring the allergen free tables and watching for severe allergic reactions.
16. For all teachers of the food allergic or intolerant student, lesson plans that involve food will be reviewed to determine appropriate alternatives.
17. Review supplies to ensure they are non-allergenic. Play-dough, finger paint, art projects, science chemicals, and cleaning solutions can all contain food allergens.
18. Keep medicine in an unlocked cabinet during the school day (locked after hours) with child's health care plan (Severe Allergy Care Plan) (copied in a bright color for the severely allergic) and recent picture to identify all severely food allergic children. Medicine may also be stored in the classroom in a locked cabinet or carried by a staff member for the young child who is severely allergic and not yet able to self-carry.
19. Review policies/prevention plan after a reaction has occurred.
20. Have teachers create a substitute teacher folder with an additional copy of the health care plan (Severe Allergy Care Plan)/504 plan and child's picture identifying all severely allergic/food intolerant children in their classroom.
21. With parent consent, provide listing of children with severe food allergies/intolerance and their pictures to the food services staff to ensure safe meals are fed to those children who choose to eat a school meal.
22. When appropriate, and with permission of student and parent, conduct a lesson for the child's classroom(s) about severe allergies/food intolerances.
23. Consider integrating awareness about severe allergies into the curriculum, where appropriate, e.g. as part of PE, health or science.
24. Discuss field trips of the severely allergic/intolerant child to decide appropriate strategies for managing the food allergy/allergies/intolerance. Determine who is responsible for carrying allergy medications. Ensure access to a phone in case of an emergency.
25. Observe and be aware of how other students are reacting to the allergic/intolerant student to prevent teasing/harassment. Enforce school bullying policy.
26. Ensure that severely allergic/food intolerant students are included in all school activities to the extent that reasonable accommodations can be made to provide for their safety. Students should not be excluded from school activities solely based on their food allergy, nor asked to stay home for a day when a school activity involving food is occurring.

Teacher Responsibilities

1. If possible meet with parent of severely allergic student in the spring to learn about student's food allergies.
2. If necessary distribute letter to other parents informing of students with severe allergies at earliest opportunity.
3. Revisit allergy topic again at back to school night.
4. Review lesson plans involving food and make appropriate safe substitutions for food allergic or intolerant students. Whenever possible, make a substitution that is safe for the whole class.
5. To the best of your ability make sure the classroom is free of substances that cause severe allergic reactions.
6. Review supplies to ensure they are non-allergenic. Play-dough, finger paint, art projects, science chemicals, and cleaning solutions can all contain food allergens.
7. Create a substitute teacher folder with an additional copy of the Health Care Plan /504 plan and child's picture identifying all severely allergic/food intolerant children in their classroom.
8. Encourage hand washing by all students especially after snacks and lunch.
9. When appropriate, and with permission of student and parent, conduct a lesson for the child's classroom(s) about severe allergies/ food intolerance.
10. Consider integrating awareness about severe allergies into the curriculum, where appropriate, e.g. as part of PE, health or science.
11. Discuss field trips with parents of the severely allergic/intolerant child to decide appropriate strategies for managing the food allergy/allergies/intolerance. Consider who is carrying the allergy medications and their proximity to child. Parent of severely allergic students are encouraged to attend to chaperone the field trip. Observe and be aware of how other students are reacting to the allergic/intolerant student to prevent teasing/harassment.
12. Consider non-food rewards for student achievement (e.g., pizza party may not be appropriate for dairy allergic students).
13. Birthday treats or other treats from home must be allergen-free.
14. When planning any class celebration (e.g., holiday parties, Thanksgiving feast), involve the parents of allergic students to ensure that food and crafts are allergen-free.

School Nurse Responsibilities

1. Write health care plan (Severe Allergy Care Plan) for severely allergic/food intolerant child.
2. Designate school personnel who are properly trained to administer allergy medications in accordance with State Nursing and Good Samaritan Laws governing the administration of emergency medications.
3. Coordinate with school to be sure medications are properly stored and proper paperwork is completed for medication to be carried or remain in front office.
4. Review health care plan annually (prior to first day of new school year) and ensure that information related to severely food allergic/intolerant child has been disseminated to the appropriate staff.