



Bledsoe County Schools

EMERGENCY ALLERGY

RESPONSE PLAN

Prepared by

Michelle DeBord-Rains, RN BSN NCSN

July 2024

Table of Contents

I. Purpose and Scope

II. The Emergency Allergy Response Plan

- General School Procedures
- Employee Training and Education
- Student Responsibility
- Parent / Guardian Responsibility
- School Nurse Responsibility
- School Principal / Designee Responsibility
- School Counselor Responsibility
- Classroom Teacher Responsibility
- School Field Trips
- School Bus
- Cafeteria / Food Staff
- Coaches / Extracurricular Activity

III. Record Keeping / Documentation

IV. Evaluation

Forms (attached)

Allergy Action Plan

Directions for Devices: (*emergency devices refer to any prescribed device used to administer epinephrine in an emergency situation for an allergic reaction).

Epi-Pen and Epi-Pen Jr Directions for Use

Auvi-Q Directions for Use

Symjepi Directions for Use

Authorized Generics:

Adrenaclick by Amneal Pharmaceuticals (formally Impax Laboratories),
Viatris (formally Mylan), and Teva Pharmaceuticals

I. Purpose and Scope

Emergency Allergy Response Plan

In order to minimize the incidence of life-threatening allergic reactions, Bledsoe County Schools will maintain a system-wide procedure for addressing life-threatening allergic reactions and maintain an Individualized Health Care Plan (IHP) for any student(s) whose parent/guardian and licensed health care provider have informed the school in writing that the student(s) has a potentially life threatening allergy (LTA).

II. Procedure for Implementing Emergency Allergy Response Plan

In order to minimize the incidence of life-threatening allergic reactions, Bledsoe County Schools will:

Provide training and education to Bledsoe County School employees who have students with LTA; EpiPen and/or AuviQ (or other approved device) training is to be provided to school staff members by the school nurse. The school nurse is responsible for maintaining training records.

Develop an IHP for any student with an identified LTA in collaboration with the student's parent/guardian and licensed health care provider.

Encourage parents/guardians to participate in the development, support of, and implementation of the plan.

A. General School Procedures

The School Nurse will collaborate with the student's parent/guardian and licensed health provider as possible to prepare an IHP for any student with a LTA.

The IHP will be developed annually and revised as needed by the school nurse, parent/guardian, and the healthcare provider as necessary.

The IHP will include the student's name, the allergen(s), the signs and symptoms, steps to follow in the event of an emergency, phone numbers of parent/guardian, and licensed healthcare provider. Supplemental documentation / physician orders will be requested.

The IHP will be available in the nurse's office, and should accompany a student on any field trip.

Photographs of the student with a LTA can be included on the Allergy Action Plan (AAP) with permission of the parent/guardian as available.

Any changes in the student's medical condition, classroom, and action plan should involve the school nurse and parent/guardian.

Epi-pens (including stock Epi-pens) are stored in the nurse's office unless the student's IHP indicates with parent/guardian permission that the student carries the Epi- pen with them at all times (which may be necessary for after-school care, extracurricular activities, etc.)

In the event that a trained staff member or school nurse is unavailable during an episode of anaphylaxis, 911 will be called.

The school nurse will be responsible for notifying classroom teachers about the nature of the student LTAs. Training will include, at minimum, a description of the signs and symptoms to observe for and what allergen (food, material, etc.) to avoid.

Information about the child's LTA will be distributed to the designated staff members. Staff will be reminded that all medical information is confidential and shared on a need-to-know basis; however, awareness saves lives where LTAs are concerned.

School Nurses and classroom teachers will be responsible for keeping an updated substitute folder containing information that needs to be shared.

B. Employee training and education

Training regarding LTAs will be provided to school employees including food service staff and coaches. Training will be available to bus drivers who transport students with a LTA and recommended to the Bledsoe County Schools Transportation Supervisor.

Initial employee training and education will include, but not limited to the following:

A description/definition of severe allergies and discussion of commonly known foods to cause allergic reactions, latex, insect stings, and medications;

The signs and symptoms of anaphylaxis

The correct use of an epinephrine injector

Specific steps to follow in the event of an emergency

Proper use of the 911 Emergency Response System

Location of the students prescribed emergency device

Location of stock Epi-pens available

C. Student Responsibility

Learn to recognize symptoms and take them seriously in early stages.

Take as much responsibility for avoiding allergens as possible, based on developmental level, including participation in planning the allergy action plan.

Learn to read labels.

Trading or sharing foods is prohibited.

Wash hands before and after eating.

Promptly inform an adult if you suspect that you have come in contact with an allergen.

Develop trusting friendships with peers and ask them for help if needed.

Share educational information and assist with training peers in the allergy action plan.

Report teasing or harassment immediately.

Carry own emergency device and demonstrate competency if age appropriate. Competency is to be documented on the IHP by the school nurse.

D. Parent/Guardian Responsibility

Inform the school nurses and administrators of the child's allergies as soon as possible after diagnosis and before the start of each school year.

Provide the school nurse with medication orders from the licensed health care provider (or their contact information) to assist in the development of the student IHP. Medication orders should include a list of foods /ingredients that the child should avoid.

Provide school nurse permission to consult with the medical provider to assist in the development of the student IHP.

Explain what the student is allergic to, triggers, warning signs of allergic reaction and emotional responses of the student if history of prior reaction.

Participate in team meetings and development of the IHP or communicate with individual school personnel who will be in contact with the child.

Provide the school with emergency contact information (cell phone, work number) and update as needed.

Provide the school nurse signed consent forms to administer medications and share health information on a need-to-know basis.

Provide the school with up-to-date prescribed emergency devices to be stored in secure locations according to school policy and replaced upon expiration.

Notify the school nurse and bus driver of LTA.

Participate in field trips as possible

Provide the school with updates on the student's allergy status as needed.

Consider providing a medical alert bracelet for the student.

Advocate for their student regarding the seriousness of allergies and encourage their student to take more responsibility as the student grows older.

E. School Nurse Responsibilities

Communicate with the parent of the student with life threatening allergies immediately after diagnosis or as soon as possible.

Assure that the IHP includes the student's name, photo if available, allergens, symptoms of allergic reaction, risk reduction procedures, emergency responses and required signatures. Communicate in writing with the cafeteria manager, classroom teachers, and support staff as needed.

Provide copies of the IHP as needed to the student's teachers, cafeteria manager, SRO and bus driver (if applicable).

Arrange and convene a food allergy management team meeting to plan and review IHP. Encourage parental participation.

Document attempts to collaborate with parents who have not participated in the development of the IHP or fail to supply the emergency device (letters or phone calls)

Familiarize assigned school personnel with the IHP on a need-to-know basis.

Coordinate or conduct in-service training and education for appropriate staff.

Include medical alerts list in substitute folder in the school nurse office.

Identify the location of Epi-Pens and check for expiration dates. Location shall be listed in the IHP.

Assist with annual Emergency Allergy Response Plan reviews.

Seek opportunities to increase LTA awareness utilizing newsletters, classroom lessons, health fairs, etc.

F. School Principal/Designee Responsibility

Include in the school's emergency response plan a written plan outlining emergency procedures for managing medical emergencies.

Participate in planning the IHP and support school personnel, the student and parents in its implementation.

Assure a means of communication between appropriate locations (nurse's office, classroom, cafeteria etc.).

Plan and facilitate employee training for use of the emergency device with the school nurse.

Create specific areas that will be allergen safe, if feasible.

Inform parent/guardian if any student experiences an allergic reaction at school.

Monitor strategies to reduce risk of exposure. Monitor overall compliance with the implementation of the Emergency Allergy Response Plan.

G. Guidance Counselor Responsibility

Communicate with the school nurse as needed in the development of the student's IHP.

Act as a resource to parents and students regarding anxiety, stress, and normal development.

Increase awareness of LTAs as it relates to bullying.

H. Classroom Teacher Responsibility

Teachers must be familiar with the signs/symptoms of anaphylaxis and emergency protocol to follow.

In the event of a suspected allergic reaction (where there is no prior allergic history), the school nurse and emergency medical services will be called immediately. Bledsoe County Schools has standing orders for the administration of Epinephrine to be administered for a victim of anaphylaxis with no known history. EMS/911 and parents will be notified.

The classroom will have easy communication with the school nurse by such means as a telephone, walkie-talkie, or cell-phone.

Information will be kept about student's allergies in the classroom and in the substitute folder, accessible by teachers, substitutes or other responsible adults.

Tables will be washed with soap and water or wipes following any food related events held in the classroom.

Sharing or trading of food in the classroom or cafeteria will be prohibited.

Proper hand washing techniques will be taught and encouraged before and after handling/consumption of food.

Substitute teachers should be notified of students with life-threatening allergies in the classroom and should consult with the school nurse, as needed, to ensure the health and safety of the student.

The classroom teacher should maintain a confidential substitute folder for the classroom identifying those students with health concerns.

I. School Field Trips

The school nurse will recommend to the administration the appropriateness of each field trip and consideration of safety of the student with LTA.

Protocols for field trips will include timely notification to the school nurse.

The student's IHP, emergency device, and medications must accompany the student on a field trip.

A cell phone or other communication device must be available on the field trip for emergencies.

In the absence of accompanying parent/guardian or school nurse, a school staff member must be trained and assigned the task of watching out for the student's welfare and for handling any emergency. A trained staff member will carry the emergency device unless the student has been approved to carry it by the licensed health care provider.

J. School Bus

Training by the school nurse will be available to school bus drivers to include exposure reduction procedures, recognition of allergic reactions/anaphylaxis, and implementation of bus/local medical emergency procedures.

Prohibit food consumption on buses.

The school bus must have a cell phone or other communication device for emergency calls.

School bus drivers will be notified by parent of students with LTAs and emergency procedures to follow (call 911)

K. Cafeteria/Food Service

Licensed healthcare provider orders provided by the parent/guardian are required for dietary modifications.

Enter dietary modifications/food allergies/specific health conditions in food service computer for safety alert.

Read food labels and re-check routinely for potential food allergens.

Enforce strict sanitation with staff using commercial cleaning solutions on table tops to avoid cross-contamination.

Provide menus to parent/guardian upon requests.

L. Coaches/Extracurricular Staff

With parent's consent, obtain a copy of the allergy action plan and photo if available of student with LTA.

Ensure access to student's emergency medications and communication devices.

Conduct activities in accordance with all school policies and procedures regarding life-threatening allergies.

Implement emergency procedures at the first sign of anaphylaxis.

III. Record Keeping/Documentation

Each IHP will be initiated by a registered nurse (RN), or an Licensed Practical Nurse (LPN) with RN oversight, per state guidelines in collaboration with the parent/guardian, licensed healthcare provider, and the 504 coordinator as requested

The school nurse will identify students with medical diagnosis or chronic health conditions who are at risk by review of student health history information.

Emergency device location and monitoring of expiration dates will be evaluated by the school nurse or school administrator.

The school nurse will maintain a list of trained personnel and documentation of competency.

IV. Evaluation

Annual review of system-wide policies and allergy management training.

Review and update of individual IHP will be conducted as needed and annually.

The school nurse and school administrator should evaluate any emergency exposure to an allergen, the cause of the exposure, effectiveness of personal responses and suggestions for improvements.

Physician Review: _____ Date 6 / 3 / 24