

## STUDENTS

### Anaphylaxis Prevention and Response

For students with a medically diagnosed life-threatening allergy (anaphylaxis), the district will take appropriate steps for the student's safety, including implementing an individual health plan. The district will utilize the Guidelines for the Care of Students with Anaphylaxis published by the Office of the Superintendent of Public Instruction.

### Parent/Guardian Responsibility

Prior to enrolling a student, the parent/guardian will inform the school in writing of the medically diagnosed allergy(ies) and risk of anaphylaxis. School districts will develop a process to identify students at risk for life-threatening allergies and to report this information to the school nurse. Upon receiving the diagnosis, school nursing staff will contact the parent/guardian to develop an individual health plan. An individual health plan will be developed for each student with a medically diagnosed life-threatening allergy.

### Individual Health Plan

The written plan will identify the student's allergies, symptoms of exposure, practical strategies to minimize the risks and how to respond in an emergency.

The school nurse may arrange for a consultation with the parent/guardian prior to the first day of attendance to develop and discuss the individual health plan. The plan will be developed by the parent, school nurse and appropriate school staff. If the treatment plan includes self-administration of medications, the parents, students and staff will comply with policy and procedure 3416, Medication At School.

Annually and prior to the first day of attendance, the school will have: 1) a current, completed individual health plan; 2) a written description of the treatment order, signed by a licensed health care provider; and 3) an adequate and current supply of auto-injectors (or other medications). The parents/guardians are responsible for notifying the school if the student's condition changes and for providing the medical treatment order, appropriate auto-injectors and other medications as ordered by the prescriber.

Students who have a medically diagnosed life-threatening allergy and no medication or treatment order presented to the school, will be excluded from school to the extent that the district can do so consistent with federal requirements for students with disabilities under the Individuals with Disabilities Act and Section 504 of the Rehabilitation Act of 1973, and pursuant to the following due process requirements:

- A. Written notice to the parents, guardians or persons in loco parentis is delivered in person or by certified mail;
- B. Notice of the applicable laws, including a copy of the laws and rules; and
- C. The order that the student will be excluded from school immediately and until medications and a treatment order are presented.

#### Communications Plan and Responsibility of School Staff

After the individual health plan is developed, the school nurse will inform appropriate staff regarding the affected student. The school nurse (registered nurse) will train appropriate staff regarding the affected student and the individual health plan. The plan will be distributed to appropriate staff and placed in appropriate locations in the district (class room, office, school bus, lunchroom, near playground, etc.). With the permission of parents/guardian and the student, (if appropriate), other students and parents may be given information about anaphylaxis to support the student's safety and control to exposure to allergens. The lead teacher will ensure that all medications are brought on field trips, as applicable.

#### All School Staff Training

Annually, each school principal will provide an in-service training on how to minimize exposure and how to respond to an anaphylaxis emergency. The training will include a review of avoidance strategies, recognition of symptoms, the emergency protocols to respond to an anaphylaxis episode (calling 911/EMS when symptoms of anaphylaxis are first observed) and hands-on training in the use of an autoinjector. Training should also include notifications that more than one dose may be necessary in a prolonged anaphylaxis event.

Student-specific Training

Annually, before the start of the school year and/or before the student attends school for the first time, the school nurse will provide student-specific training and additional information to teachers, teacher's assistants, clerical staff, food service workers, and bus drivers who will have known contact with a diagnosed student and are implementing the nursing care plan.

Controlling the Exposure to Allergens

Controlling the exposure to allergens requires the cooperation of parents, students, the health care community, school employees and the board.

Storage/maintenance/expiration/disposal

School staff will comply with all manufacturer's instructions as to storage, maintenance, expiration and disposal of epinephrine autoinjectors. School staff will also comply with district medication policy and procedures related to safe, secure management of medications.

Employee Opt-Out

School employees (except licensed nurses) who have not previously agreed in writing to the use of epinephrine autoinjectors as part of their job description may file a written letter of refusal to administer epinephrine autoinjectors with the districts. The employee's refusal may not serve as grounds for discharge, non-renewal or other action adversely affecting the employee's contract status.

No Liability

If the school employee or school nurse who administers epinephrine by autoinjector to a student substantially complies with the student's prescription (that has been prescribed by a licensed health professional within the scope of the professional's prescriptive authority) and the district's policy on anaphylaxis prevention and response, the employee, nurse, district, superintendent and board are not liable for any criminal action or civil damages that result from the administration.

Adopted: June 28, 2017