

Independent School District 742

Latex Allergy Plan

Purpose

This plan is intended to support the implementation of allergy management practices. It includes procedures that strive to promote the prevention of allergic reactions in the school setting, and also to outline how to respond to allergic reactions when they occur.

Background

Latex allergies are a public health concern. The prevalence of latex allergies and allergic reactions to latex can be a cause of anaphylaxis (a serious allergic reaction that is rapid in onset and may cause death). Schools may have one or more students with a latex allergy. Allergic reactions can be life-threatening and have far-reaching effects on students and their families, as well as on the schools they attend.

Program Components

1. Daily Management of Latex Allergies in Individual Students

- A. *Identify Students with Allergies* - Parents are ultimately responsible for communicating a student allergy to the District. A health questionnaire requesting allergy information is completed each fall and when new students arrive. Any new cases of an allergy are to be reported to the health office with health office staff following up with parents/guardians.
- B. *Develop a Plan to Manage and Reduce the Risk of Latex Allergy Reactions in Individual Students* - The school district will make every attempt to have an updated Allergy Action Plan or Individual Health Plan (IHP) in place that includes:
 - Information about the identified allergens, including a confirmed written diagnosis from the student's medical provider or allergist.
 - Information about signs and symptoms of the student's possible reactions to known allergens.
 - Information about the possible severity of reactions, including any history of prior anaphylaxis.
 - A treatment plan for responding to a latex allergy reaction or emergency, including whether an epinephrine auto-injector should be used.
 - Contact information for parents and medical providers, including alternate phone numbers for notification in case of emergency.
 - Provide information addressing field trip activities.

The Action Plan or IHP will be written in partnership with the involved medical providers, the parents/guardians and the Licensed School Nurse (LSN). The documents should be accessible by those who have a need to know its contents, and who are directly involved with the specific student.

If the student's allergy constitutes a disability, a Section 504 plan or an Individualized Education Plan can be developed along with the Action Plan or IHP.

- C. *Help Students Manage Their Own Latex Allergy* - Students who are physically and emotionally able to manage their own allergies may be allowed to carry or store their own medication, such as an epinephrine auto-injector, both at school and at school-related events. It is at the discretion of school health office staff and the medical provider whether a student possesses the physical and emotional capability to manage and administer medication.

2. **Preparing for Emergencies**

- A. *Awareness* - School staff must know which students have allergies so they can respond quickly and appropriately. This information is communicated to staff who are the most likely to have to deal with an emergency, such as the teachers or paraprofessionals of specific students, lunchroom monitors, health services staff, administrative staff, and others.
- B. *Access to Medication and Epinephrine Auto-Injectors* - Medication and Epinephrine auto-injectors are stored in a location that provides quick access in the event of anaphylaxis. In some cases, students may carry them with them, and in others, they may be stored in the health office, or another location. There is to be at least one staff member who is trained on how and when to administer any type of medication.
- C. *Use of Epinephrine Auto-Injectors* - A student's Action Plan or IHP will indicate whether he or she carries an epinephrine auto-injector, and whether he or she is able to use it without assistance. If a person experiencing anaphylaxis is incapable of deploying an epinephrine auto-injector, or may not be able to communicate the need to do so to someone else, health office staff, lunch room staff, and certain other staff will receive information regarding specific students on how to recognize the symptoms of anaphylaxis, where the medication is kept, how to administer the medication, and any other relevant information. In a latex allergy emergency, trained staff should give epinephrine immediately to prevent a fatal allergy reaction.

If an epinephrine auto-injector is used, 911 should automatically be contacted without waiting to see if it is effective. Responders should be informed that the emergency is due to an allergic reaction, if epinephrine has been administered, and when it was administered. Staff will contact the student's parents/guardians to inform them of their child's latex allergy emergency.

- D. *Prepare for Latex Allergy Reactions in Students and Staff without a Prior History of a Latex Allergy* - People can have a severe latex allergy reaction even with no history of anaphylaxis or a previously diagnosed latex allergy. Staff trained to recognize symptoms in students or staff with a known allergy should apply the same criteria to any person experiencing similar symptoms. Notify 911

immediately, and use an epinephrine auto-injector from the health office or other storage location if warranted.

- E. *Document the Response to Latex Allergy Emergency* - Document and record each emergency incident and use of epinephrine.

3. Educational Awareness for Staff

- A. *Awareness Information for All Staff* - It is beneficial that each school site is provided a brief session on allergies and anaphylaxis, signs and symptoms of anaphylaxis, basic information regarding epinephrine auto-injectors, the importance of eliminating or reducing known allergens from the school environment, and knowledge of students with specific allergies.
- B. *More In-Depth Training for Staff Who Have Frequent Contact with Students Who Have Latex Allergies* - These employees include the specific teachers or paras of students with known allergies, coaches, bus drivers, lunchroom supervisors, kitchen managers, and potentially other staff as the specific student's situation warrants. This training will cover more specifically how to respond to a latex allergy emergency; how to administer medications and epinephrine; common risk factors and triggers, areas of exposure to allergens in schools; and specific strategies for integrating students with allergies into school activities while reducing the risk of exposure to allergens. Some of these include:
- Latex balloons will not be allowed in any District 742 buildings.
 - Latex free disposable gloves and bandages will be made available to all students/staff.
 - Rubber bands and erasers may be triggers for a reaction and exposure of these items to students with a known allergy should be avoided.
 - Areas that may be contaminated with latex dust (such as upholstery, carpet, ventilation ducts, etc.) will be cleaned frequently.
 - School facilities will be inspected on a regular basis and possible latex items will be replaced with non-latex products.
 - If indicated in a student's plan of care, latex free school supplies should be used and supplied by the student's parent/guardian.

4. Educational Awareness for All Students and Family Members about Allergies

To the extent the District is able, information about latex allergies is folded into curriculum, and is focused on increasing awareness about which items contain allergens; what the health effects can be; how to recognize a reaction; knowledge regarding latex free items; and how and when to get help if a reaction occurs to themselves or someone else.

5. Allergen Reduction and Promoting a Healthy School Environment

The District recognizes a responsibility to promote a safe physical environment that protects students with a latex allergy and a climate that supports their positive psychological and social development.

- A. *Reduce Physical Exposure to Latex Allergens* - Schools can create a safer learning environment by reducing students' exposure to potential allergens. When a child has a documented latex allergy, staff should take active steps to reduce the risk of exposure in the school building (See 3.B. of this document).

The District will create its own procedures to manage allergens based on the individual students and staff that have allergies in the building. While all buildings need to be aware and take measures to limit exposure, those buildings where students or staff have known allergies may take different steps based on the allergens involved, the severity of the allergy, and the unique characteristics or schedules of those with allergies. The LSN, parents, medical provider, and school staff should all be involved in creating the plan for each student.

- B. *Develop Procedures to Reduce the Likelihood of Latex Allergens from Unintentionally Contacting Other Items* - Staff responsible for the management of students with allergies must consider all possible situations where latex items might be found.
- C. *Make Outside Groups Aware of Latex Allergy Policies and Rules When They Use District Facilities Before or After Hours* - Local agencies, community groups, and community members who use school facilities before or after operating hours should be aware of and comply with policies relating to latex safe schools.