

BURLINGTON SCHOOL DISTRICT PROCEDURE

PROCEDURE CODE F20PA: ALLERGIES AND ANAPHYLAXIS PROCEDURE

Summary

This procedure relates to the care and response to anaphylaxis and the use of epinephrine in the school setting. The Vermont State Board of Education, as stated in [Act 68 of 2013](#), requires a District-wide school procedure that adheres to Federal, state, and local guidelines and limits risk of exposure to allergens in school and coordinates a planned response in the event of an anaphylactic emergency. This includes preparation for adequate response for students and staff with or without a prior hypersensitivity to food, insect venom, a drug, latex, or other allergens.

Procedure Guidelines

1. Prepare for allergy emergencies through staff training around anaphylaxis and the use of epinephrine.
2. Create and maintain a healthy and safe environment.
3. Respond promptly to recognized signs and symptoms.
4. Administration of appropriate medication, see.
5. Provide education and support for students and family members as needed.

Procedures

Student and Allergen Identification

1. Identify students who have a diagnosed hypersensitivity that can potentially lead to anaphylaxis.
 - a. Review Emergency Health Forms
 - b. Receive Allergy and Anaphylaxis Emergency Protocol from parents/guardians/health care providers
 - c. Consult with parents/guardians, prescribing primary care provider, and a nurse from the previous school, if applicable.
2. For identified students and families.
 - a. Obtain emergency plan, medication orders, and medication for identified students.
 - i. Healthcare provider and parent/guardian signature is required on all forms.
 - b. In collaboration with healthcare providers, parents/guardians, and school nurses, develop health care plans and revise annually, and as needed. ([Emergency Allergy and Anaphylaxis Health Care Plan](#))
 - c. Inform necessary staff working with students with allergies and those at risk of anaphylaxis (ie. administrators, teachers, paraeducators, cafeteria workers, afterschool staff, special ed. and bus drivers). Include student name, known allergens, any available medications, and necessary classroom protocols to protect the student.
 - i. Assess knowledge and level of compliance regarding prevention of allergy exposure and response; provide training and education as needed.

Food Allergy Kitchen Safety Plans

The School Nurse will fill out a [Student Allergy Information Facesheet](#) for every student who has a food allergy at school and go over allergies with kitchen staff at the beginning of the year or when a new student starts mid-year. This will allow for increased awareness and an added level of safety to prevent food allergy reactions at school.

Classroom Protocols

Develop classroom protocols using the following guidelines.

- Identify allergen-safe areas.

- Consider allowing only prepackaged foods with a complete ingredient list or request that families provide safe alternatives to be stored in the classroom.
- Implement appropriate hand washing procedures (avoid hand sanitizer, which does not remove allergens).
- Be aware of the potential for bullying. Set expectations for appropriate student conduct and potential consequences.
- Identify student and allergy information plans for substitute teachers.
- Shelter in Place (Lockdown) protocol to include ensuring that safe foods are available to all students, and an action plan in place to address any physiological reactions. (F.A.R.E, 2003(2017))

Activities Outside the Classroom

For activities outside the classroom (field trips, PE bike rides/walks, etc.):

1. The person leading the activity shall notify the school nurse of the time and date of activity as outlined in the [Field Trip Procedure](#).
2. Emergency Epinephrine will be carried by an employee trained in its administration by the school nurse.
3. All student Emergency Care Plans, including parent/guardian contact information and health care provider information, shall be given to designated staff members to carry.
4. Staff should strongly discourage any sharing of food for those with food allergies.

Sports and Afterschool Activities

In the case of extracurricular sports and afterschool programs:

1. Families are responsible for communicating about allergy/anaphylaxis plan and if their students self-carry Emergency medications.
2. Student's Emergency Care Plan, parent/guardian contact information, and health care provider information should be shared with extracurricular personnel responsible for the student in after-school hours.
3. Staff should strongly discourage any sharing of food for those with food allergies.
4. Staff will maintain an unassigned, school-provided emergency epinephrine (with healthcare provider order) in a readily available, secure but unlocked location.
 - a. This information should be shared with administration and others as appropriate.

Training and Preparedness

The District will provide annual, District-wide training for school personnel, including administration, teachers, cafeteria workers, and special education bus drivers, as applicable. Training should include the definition of anaphylaxis, signs and symptoms, prevention/risk reduction strategies, including basic food handling and cleaning procedures, and emergency response to exposure.

Resources

- [Food Allergies](#) (CDC)
- The Vermont Department of Health Standards of Practice: [School Health Services Manual](#)
- "[Shelter-In-Place](#)" (www.foodallergy.org)

Clerical Information

BSD Version:	BSD F20 Procedure Allergies
Date Adopted:	May 18, 2020 May 12, 2022 September 10, 2025
Legal Reference(s):	VT Act 68
Policy Reference:	https://www.bsdrv.org/wp-content/uploads/2017/07/F-20-Administering-of-Medicines-to-Students.pdf