

Students

Students with Special Health Care Needs

Accommodating Students with Special Dietary Needs

The CREC Council believes all students, through necessary accommodations where required, shall have the opportunity to participate fully in all school programs and activities.

In some cases, a student's disability may prevent him/her from eating meals prepared for the general school population.

Substitutions to the regular meal will be made for students who are unable to eat school meals because of their disabilities, when that need is certified in writing by a physician. Meal service shall be provided in the most integrated setting appropriate to the needs of the disabled student.

The nature of the student's disability, the reason the disability prevents the student from eating the regular school meals, including foods to be omitted from the student's diet, indication of the major life activity affected by the disability, the specific diet prescription along with the substitution(s) needed will be specifically described in a statement signed by a licensed physician. The district, in compliance with USDA Child Nutrition Division guidelines, will provide substitute meals to food-allergic students based upon the physician's signed statement.

An Individualized Health Care Plan (IHCP) and an Emergency Care Plan (ECP) shall be developed and implemented for students that are identified with food allergies and glycogen storage disease. The CREC Council recognizes that students with documented life-threatening food allergies are considered disabled and are covered by The Disabilities Act and Public Law 93-112 and Section 504 of The Rehabilitation Act of 1973. A clearly-defined "504 Accommodation Plan" shall be developed and implemented for all such identified students in which necessary accommodations are made to ensure full participation of identified students in student activities. Such plan shall be signed by the appropriate staff, the parent/guardian of the student and the student's physician.

All schools are also responsible for developing and implementing guidelines for the care of students with food allergies and glycogen storage disease. Such guidelines shall include, but not be limited to, staff development, strategies for identifying students at risk for life-threatening allergic reactions, means to manage the student's allergy including avoidance measures, designation of typical symptoms and dosing instructions for medications.

CREC's plan for managing students with life-threatening food allergies and glycogen storage disease shall be posted on the CREC website and/or on the website of each CREC school.

(cf. 5141 - Student Health Services)
(cf. 5141.21 - Administering Medication)
(cf. 5141.3 - Health Assessments)

(cf. 5145.4 - Nondiscrimination)

Legal Reference: Connecticut General Statutes

10-15b Access of parent or guardian to student's records.

10-154a Professional communications between teacher or nurse and student.

10-207 Duties of medical advisors.

10-212c Life threatening food allergies; Guidelines; district plans, as amended by P.A. 12-198.

Section 504 of the Rehabilitation Act of 1973

Americans with Disabilities Act

FCS Instruction 783-2, Revision 2, Meal substitution for medical or other special dietary reasons.

Policy adopted: June 18, 2003
Policy Revised: November 20, 2013

CAPITOL REGION EDUCATION COUNCIL
Hartford, Connecticut

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In order to properly implement the CREC policy pertaining to the management of food allergies and glycogen storage disease, the following administrative regulations are hereby established:

1. Each school shall establish a method of ensuring that relevant information is transmitted to all supervising persons of an identified student.
2. It is incumbent upon the school to notify any person who may be supervising an identified student with food allergies, especially those which may be life-threatening, such as peanut allergies.
3. The primary concern of the school is the prevention and appropriate treatment of potentially severe allergic reaction, anaphylaxis.
4. Parents with allergic children must provide the school with an individualized action plan prepared by the student's physician. (See EMERGENCY CARE PLAN form)
5. Parents with children with glycogen storage disease must provide the school with an individualized action plan which shall include, but not be limited to, the provision of food or dietary supplements by the school nurse or by any school employee approved by the school nurse, to the student with glycogen storage disease, and which plan shall not prohibit the parent/guardian or a person they so designate, to provide food or dietary supplements on school grounds during the school day.
6. The time or place where a student with diabetes may test his/her blood-glucose level on school grounds shall not be restricted provided the student has written parental/guardian permission and a written order from a physician licensed in Connecticut.
7. At risk students should have some means of identification, such as a medical alert bracelet.
8. Most food-allergic children bring their lunch from home. However, guidelines established by the USDA Child Nutrition Division in charge of school lunches requires school food service staff to provide substitute meals to allergic students if the physician of the student sends in written instructions certifying the child's allergy, what foods are to be avoided and safe substitutions.
9. Consider establishing a no-food trading policy within the school.

10. Permit parents to review/preview menus in order to select safe foods their child may eat.
11. Consider the following avoidance strategies because risk can never be fully eliminated in the school environment:
 - a) Parents should be encouraged to instruct their children in how to avoid contact with substances to which they are allergic.
 - b) Carefully monitor identified children, especially in the younger grades.
 - c) Allergic children should consider eating foods that are only prepared at home.
 - d) Students should be encouraged not to exchange foods or utensils with other students.
 - e) Surfaces, toys and equipment should be washed clean of allergen- containing foods.
 - f) Food personnel should be instructed about necessary measures to prevent cross contamination during handling, preparation and serving of food.
 - g) Check hand soap ingredients to be sure it does not contain peanut oils.
 - h) Establish a buddy system for identified students.
 - i) Provide staff updates at monthly faculty meetings.
 - j) Consider a peanut-free table in the cafeteria.
12. Provide education and training for staff on the management of students with or without life-threatening food allergies and glycogen storage disease, including basic first aid, resuscitative techniques, the use of epinephrine auto injections, the administration of medication with a cartridge injector, and the provision of food or dietary supplements.
13. Epinephrine should be kept in close proximity to students at risk of anaphylaxis and in all cases where it is administered, the student must be sent to the hospital immediately.

Regulation approved: June 18, 2003
Regulation revised: September 18, 2013
Regulation revised: January 20, 2016

CAPITOL REGION EDUCATION COUNCIL
Hartford, Connecticut



Emergency Care

Name of Health Issue

Plan

Student: _____ Grade: _____ School Contact: _____ DOB: _____

Mother: _____ MHome #: _____ MWork #: _____ MCell #: _____

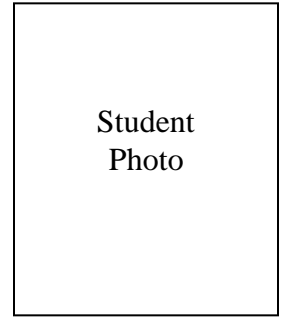
Father: _____ FHome #: _____ FWork #: _____ FCell #: _____

Emergency Contact: _____ Relationship: _____ Phone: _____

SYMPTOMS OF AN EMERGENCY MAY INCLUDE ANY/ALL OF THESE:

- Write symptoms here
- Write symptoms here
- Write symptoms here

SIGNS OF AN EMERGENCY:



STAFF MEMBERS INSTRUCTED:

- Classroom Teacher(s) Special Area Teacher(s)
 Administration Support Staff Transportation Staff

TREATMENT:

STEPS TO FOLLOW FOR AN EMERGENCY:

-

Healthcare Provider: _____ Phone: _____

Written by: _____ Date: _____

- Copy provided to Parent Copy sent to Healthcare Provider

Parent/Guardian Signature to share this plan with Provider and School Staff: _____

This plan is in effect for the current school year and summer school as needed.

Revised 1/08