

THE GENERAL ASSEMBLY OF PENNSYLVANIA

SENATE BILL

No. 509 Session of
2007

INTRODUCED BY ORIE, ERICKSON, KITCHEN, STACK, FONTANA, BOSCOLA,
COSTA, RAFFERTY, LOGAN, WASHINGTON, M. WHITE, O'PAKE, WOZNIAK
AND STOUT, MARCH 19, 2007

REFERRED TO EDUCATION, MARCH 19, 2007

AN ACT

1 Amending the act of March 10, 1949 (P.L.30, No.14), entitled "An
2 act relating to the public school system, including certain
3 provisions applicable as well to private and parochial
4 schools; amending, revising, consolidating and changing the
5 laws relating thereto," further providing for school health
6 services.

7 The General Assembly finds and declares as follows:

8 (1) Diabetes is a serious, chronic disease that impairs
9 the body's ability to use food. Diabetes must be managed 24
10 hours a day in order to avoid the potentially life-
11 threatening, short-term consequences of blood sugar levels
12 that are either too high or too low, and to avoid or delay
13 the serious long-term complications of high blood sugar
14 levels which include blindness, amputation, heart disease and
15 kidney failure. In order to manage their disease, students
16 with diabetes must have access to the means to balance food,
17 medications and physical activity level while at school and
18 at school-related activities.

19 (2) The school nurse is the most appropriate person in

1 the school setting to provide care for a student with
2 diabetes. Many schools in Pennsylvania, however, do not have
3 a full-time nurse. Moreover, even when a nurse is assigned to
4 a school full time, he or she will not always be available
5 during the school day, during extracurricular activities or
6 on field trips. Because diabetes management is needed at all
7 times, additional school personnel need to be prepared to
8 provide diabetes care at school and all school-related
9 activities in order for students with diabetes to be
10 medically safe and to have the same access to educational
11 opportunities as do all students in Pennsylvania.

12 (3) There is a significant number of students with
13 diabetes, the effects of which may impact a student's ability
14 to learn and cause serious long-term and short-term medical
15 complications.

16 The General Assembly of the Commonwealth of Pennsylvania
17 hereby enacts as follows:

18 Section 1. The act of March 10, 1949 (P.L.30, No.14), known
19 as the Public School Code of 1949, is amended by adding sections
20 to read:

21 Section 1414.2. Training of School Employes in Diabetes Care
22 and Treatment.--(a) Within ninety days (90) of the effective
23 date of this act, the Department of Education, in cooperation
24 from at least the Department of Health, the American Diabetes
25 Association and the American Association of Diabetes Educators,
26 shall develop and make available to schools guidelines for the
27 training of school employes in diabetes care and treatment. At
28 the minimum, the training guidelines shall include instruction
29 in:

30 (1) recognition and treatment of hypoglycemia and

1 hyperglycemia;

2 (2) understanding the appropriate actions to take when blood
3 glucose levels are outside of target ranges;

4 (3) understanding physician instructions concerning diabetes
5 medication drug dosage, frequency and the manner of
6 administration;

7 (4) performance of finger-stick blood glucose checking,
8 ketone checking and recording the results;

9 (5) the administration of glucagon and insulin and the
10 recording of results; and

11 (6) recommended schedules and food intake for meals and
12 snacks, the effect of physical activity upon blood glucose
13 levels and actions to be implemented in the case of schedule
14 disruption.

15 (b) The governing board of each school entity shall direct
16 the school nurse or school physician to select at least three
17 (3) school employees from each school in which a diabetic student
18 is enrolled to receive the training as described in subsection
19 (a) and determine by whom the training is to be provided. School
20 employees may not be subject to any penalty or disciplinary
21 action for refusing to serve as trained diabetes personnel.
22 Training required under this section may be provided by a local
23 health agency, subcontractor, school nurse, school physician or
24 any other person skilled in providing diabetes care and
25 treatment training required under this section.

26 (c) Training shall take place prior to the commencement of
27 each school year or as needed when a diabetic student is newly
28 enrolled or a student is newly diagnosed with diabetes.

29 (d) For the purposes of this section, "school" means any
30 elementary or secondary public charter or nonpublic school,

intermediate unit or area vocational-technical school. "School entity" means any school district, intermediate unit, area vocational-technical school, charter school or nonpublic school located in this Commonwealth.

Section 1414.3. Diabetes Medical Management Plan.--(a) At the beginning of each school year, upon enrollment or diagnosis, a diabetic student who seeks diabetes care in school shall submit to the school nurse or school physician a diabetes medical management plan, which outlines the health services needed by the student while at school. This plan shall be developed by the student's parent or guardian along with the student's physician, certified registered nurse practitioner or physician assistant and include, at the minimum, written authorization allowing:

(1) trained diabetes personnel to perform diabetes care and treatment upon the child, including, but not limited to, responding to blood glucose levels that are outside of the student's target range; administering glucagon; administering insulin or assisting a student in administering insulin through the insulin delivery system the student uses; providing oral diabetes medications, checking and recording blood glucose levels and ketone levels or assisting a student with such checking and recording; and following instructions regarding meals, snacks and physical activity; and

(2) the child to conduct independent monitoring and treatment in school, if the parent or guardian so requests. If this request is made, the physician, certified registered nurse practitioner or physician assistant shall provide a written statement in the plan indicating the student has successfully demonstrated capability of independent monitoring and

responsible behavior in self-administering treatment or
prescribed medication.

(b) Notwithstanding any authorization granted pursuant to
subsection (a)(1), a school nurse shall be the primary provider
of diabetes care and treatment and responsible for any
delegation of care.

(c) Any diabetic student unable to or prevented from
submitting a diabetes medical management plan to his or her
school nurse or school physician shall not be precluded from
receiving school nurse services, including the care and
treatment of diabetes.

(d) For purposes of this section, "trained diabetes
personnel" means a school employe, other than a school nurse or
school physician, or a nonhealth care professional trained in
accordance with section 1414.2. Functions performed by these
professionals shall not constitute the practice of nursing and
shall be exempted from all applicable statutory and/or
regulatory provisions that restrict what functions can be
performed by a person who is not a licensed health care
professional.

Section 1414.4. Independent Monitoring and Treatment.--The
governing board of each school entity shall develop a written
policy allowing diabetic students to possess on their person at
all times all necessary supplies, equipment and prescribed
medication to perform self-monitoring and treatment. The policy
may revoke or restrict a student's independent monitoring and
treatment privileges if school policies are abused or ignored.

Section 1414.5. Required Care.--(a) At least one trained
diabetes personnel shall be on site and available to provide
treatment and care to diabetic students during regular school

1 hours and at all school-sponsored activities, including, but not
2 limited to, extracurricular activities and field trips, where a
3 student with diabetes is a direct participant. No student shall
4 be required to attend another school solely because she or he
5 has diabetes.

6 (b) The governing board of each school entity shall develop
7 a written policy that requires the distribution of information
8 to school bus drivers that identifies diabetic students, the
9 potential emergencies that may occur as a result of the
10 student's diabetes and the appropriate responses to such
11 emergencies and emergency contact information for students with
12 diabetes.

13 Section 1414.6. Immunity from Civil Liability.--No
14 physician, nurse, school employe, trained diabetes personnel or
15 school entity shall be liable for civil damages as a result of
16 the activities authorized by this legislation when such acts are
17 performed as an ordinary reasonably prudent person would have
18 acted under the same or similar circumstances.

19 Section 2. This act shall take effect as follows:

20 (1) The addition of section 1414.5 of the act shall take
21 effect in 150 days.

22 (2) The remainder of this act shall take effect
23 immediately.