

PROPOSED REVISION



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STUDENTS

Students with Diabetes, Life-Threatening Allergies, Asthma and Seizures

The board recognizes that diabetes and life-threatening allergies imposes significant health risks for students enrolled in district schools. The board also recognizes the need to provide a safe learning environment and access to school-sponsored activities for students with diabetes and life-threatening allergies.

All students with diabetes and life-threatening allergies shall have an Individual Health Care Plan (IHP), including an emergency care plan, which shall be updated annually or sooner if needed. The IHP shall include provisions for the following:

- a. Parent/guardian requests and instructions,
- b. Treatment orders from the student's (LHCPs) prescribing within the scope of their licensed authority,
- c. Legal use of parent/guardian-designated adults (PDAs) if designated,
- d. Medical equipment and medication storage and ready access for students,
- e. Staff training,
- f. Emergency plans, and
- g. For students with diabetes, diabetic monitoring and treatment functions to be performed by the student and information regarding student access to meals, snacks, water, and bathrooms.

Accommodating Students with Seizure Disorders or Epilepsy

The district will develop and follow an individual health plan for each student with seizure disorder or epilepsy. Each individual health care plan will include an individual emergency plan element. The health plans will be updated annually, and more frequently as needed.

The board of directors shall designate a professional person licensed under [Chapter 18.71 RCW](#), [Chapter 18.57 RCW](#), or [Chapter 18.79 RCW](#) as it applies to registered nurses and advanced registered nurse practitioners, to consult and coordinate with the student's parents and health care provider, and train and supervise the appropriate school district personnel in proper procedures for care for students with epilepsy or other seizure disorders to ensure a safe, therapeutic learning environment. Training required may also be provided by a national organization that offers training for school nurses for managing students with seizures and seizure training for school personnel.

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Anaphylaxis Prevention and Response

Anaphylaxis is a life-threatening allergic reaction that may involve systems of the entire body. Anaphylaxis is a medical emergency that requires immediate medical treatment and follow-up care by a LHCP.

Parents/guardians are responsible for informing the school about their student's potential risk for anaphylaxis and for ensuring the provision of ongoing health information and necessary medical supplies. The district will take reasonable measures to reduce the risk of a student having an anaphylactic reaction to known allergens.

The district will train all staff in the awareness of anaphylaxis and prepare them to respond to emergencies. Additionally, student-specific training will be provided for appropriate personnel.

Even with the district's best efforts, staff and parents/guardians need to be aware that it is not possible to achieve a completely allergen-free environment. However, the district will take precautions to reduce the risk of a student with a history of anaphylaxis coming into contact with the offending allergen in school.

Self-Administration of Asthma and Anaphylaxis Medications

Students with asthma and students who experience anaphylaxis and who have the skill level necessary to use the medication and any device that is necessary to administer the medication will be afforded the opportunity to self-administer medications prescribed for use by the student during school hours. The student's parent/guardian will submit a written request and other documentation required by the school, including a written treatment plan from the student's prescribing LHCP.

Administration of Nasal Sprays

A nasal spray that is a legend drug or a controlled substance must be administered by the school nurse if he or she is on the premises. If no school nurse is on the premises, such nasal spray may be administered by a PDA and/or trained unlicensed assistive personnel (UAP). After a school employee who is not a school nurse administers such nasal spray, the employee shall summon emergency medical assistance as soon as practicable.

In consultation with school nurses, the superintendent will establish procedures to implement this policy.

Cross references:

[Board Policy 2210](#)

[Board Policy 2211](#)

[Procedure 3409P](#)

Special Education and Related
Services for Eligible Students
Education of Students with
Disabilities Under Section 504
of the Rehabilitation Act of
1973

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	Board Policy 3416 Board Policy 5430	Medication at School School and Program Volunteers
Legal references:	RCW 28A.210.260	Public and private schools— Administration of medication—Conditions
	RCW 28A.210.270	Public and private schools— Administration of medication— Immunity from liability— Discontinuance, procedure
	RCW 28A.210.330	Students with diabetes—Individual health plans—Designation of professional to consult and coordinate with parents and health care provider—Training and supervision of school district personnel
	RCW 28A.210.340	Students with diabetes— Adoption of policy for inservice training for school staff
	RCW 28A.210.350	Students with diabetes <u>or</u> <u>epilepsy or other seizure</u> <u>disorders</u> —Compliance with individual health plan— Immunity
	RCW 28A.210.370 RCW 28A.210.380	Students with asthma Anaphylaxis—Policy guidelines— Procedures—Reports
	OSPI, March 2009	Guidelines for the Care of Students with Anaphylaxis
	42 U.S.C. 12212	Section 512 Americans with Disabilities Act of 1990
	34 CFR Part 104	Section 504 of Rehabilitation Act of 1973

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