

# HOUSE BILL No. 4150

February 2, 2005, Introduced by Reps. Condino, Tobocman, Kathleen Law, Plakas, Bieda, Lipsey, Vagnozzi, Gleason, Sak, Clack, Accavitti, Wojno, Brown, Cheeks, Hunter, Lemmons, Jr., Anderson, Hood, Murphy, Zelenko and Meisner and referred to the Committee on Education.

A bill to amend 1976 PA 451, entitled  
"The revised school code,"  
(MCL 380.1 to 380.1852) by adding section 1180.

**THE PEOPLE OF THE STATE OF MICHIGAN ENACT:**

1           SEC. 1180. (1) NOT LATER THAN 1 YEAR AFTER THE EFFECTIVE DATE  
2 OF THIS SECTION, THE DEPARTMENT OF COMMUNITY HEALTH SHALL DEVELOP  
3 GUIDELINES FOR THE TRAINING OF SCHOOL EMPLOYEES IN THE CARE NEEDED  
4 FOR STUDENTS WITH DIABETES. ALL OF THE FOLLOWING APPLY TO THESE  
5 GUIDELINES AND TRAINING:

6           (A) THE GUIDELINES SHALL BE DEVELOPED IN CONSULTATION WITH THE  
7 AMERICAN DIABETES ASSOCIATION, THE MICHIGAN ASSOCIATION OF SCHOOL  
8 NURSES, AND OTHER ORGANIZATIONS CONSIDERED APPROPRIATE BY THE  
9 DEPARTMENT OF COMMUNITY HEALTH.

1 (B) THE GUIDELINES SHALL PROVIDE FOR ANNUAL TRAINING BY A  
2 LICENSED HEALTH CARE PROFESSIONAL WITH EXPERTISE IN DIABETES.

3 (C) THE TRAINING SHALL INCLUDE INSTRUCTION IN AT LEAST ALL OF  
4 THE FOLLOWING:

5 (i) RECOGNITION AND TREATMENT OF HYPOGLYCEMIA AND  
6 HYPERGLYCEMIA.

7 (ii) UNDERSTANDING THE APPROPRIATE ACTIONS TO BE TAKEN WHEN  
8 BLOOD GLUCOSE LEVELS ARE OUTSIDE THE TARGET RANGES INDICATED BY THE  
9 STUDENT'S INDIVIDUAL HEALTH CARE PLAN.

10 (iii) UNDERSTANDING PHYSICIAN INSTRUCTIONS CONCERNING DIABETES  
11 MEDICATION DRUG DOSAGE, FREQUENCY, AND MANNER OF ADMINISTRATION.

12 (iv) PERFORMANCE OF FINGER-STICK BLOOD GLUCOSE CHECKING AND  
13 KETONE CHECKING AND RECORDING THE RESULTS.

14 (v) ADMINISTRATION OF INSULIN AND RECORDING OF RESULTS.

15 (vi) RECOMMENDED SCHEDULES AND FOOD INTAKE FOR MEALS AND  
16 SNACKS, THE EFFECT OF PHYSICAL ACTIVITY ON BLOOD GLUCOSE LEVELS,  
17 AND ACTIONS TO BE TAKEN IN CASE OF SCHEDULE DISRUPTION.

18 (D) THE DEPARTMENT OF COMMUNITY HEALTH SHALL DESIGNATE 1 OR  
19 MORE CONTACT PERSONS FOR SCHOOLS AND SHALL HAVE A CONTACT PERSON  
20 AVAILABLE TO TRAINED DIABETES PERSONNEL BY TELEPHONE OR IN PERSON  
21 TO PROVIDE ADDITIONAL OR UPDATED TRAINING AS REQUIRED DUE TO  
22 CHANGES IN A STUDENT'S CONDITION OR UPDATED INFORMATION.

23 (2) IF A STUDENT WITH DIABETES IS ENROLLED IN A SCHOOL  
24 DISTRICT, INTERMEDIATE SCHOOL DISTRICT, PUBLIC SCHOOL ACADEMY, OR  
25 NONPUBLIC SCHOOL AND THE STUDENT'S PARENT OR LEGAL GUARDIAN HAS  
26 SUBMITTED AN INDIVIDUAL HEALTH CARE PLAN TO SCHOOL OFFICIALS AS  
27 PROVIDED UNDER SUBSECTION (3), THE BOARD OF THE SCHOOL DISTRICT OR

1 INTERMEDIATE SCHOOL DISTRICT, BOARD OF DIRECTORS OF THE PUBLIC  
2 SCHOOL ACADEMY, OR GOVERNING BODY OF THE NONPUBLIC SCHOOL SHALL  
3 ENSURE THAT THE TRAINING DESCRIBED IN SUBSECTION (1) IS PROVIDED TO  
4 AT LEAST 2 SCHOOL EMPLOYEES WHO WORK IN EACH SCHOOL THE STUDENT  
5 ATTENDS. THE TRAINING SHALL TAKE PLACE BEFORE THE BEGINNING OF EACH  
6 SCHOOL YEAR IN WHICH THE STUDENT IS EXPECTED TO ATTEND THE SCHOOL  
7 OR, IF A STUDENT WITH DIABETES ENROLLS IN THE SCHOOL DURING THE  
8 SCHOOL YEAR OR A STUDENT ATTENDING THE SCHOOL IS NEWLY DIAGNOSED  
9 WITH DIABETES DURING THE SCHOOL YEAR AND THE TRAINING HAS NOT  
10 ALREADY OCCURRED FOR THAT SCHOOL YEAR, AS SOON AS POSSIBLE AFTER  
11 THE STUDENT'S ENROLLMENT OR DIAGNOSIS AND SUBMISSION OF THE  
12 STUDENT'S INDIVIDUAL HEALTH CARE PLAN.

13 (3) FOR A STUDENT WITH DIABETES AND THE STUDENT'S SCHOOL TO BE  
14 SUBJECT TO THIS SECTION, THE STUDENT'S PARENT OR LEGAL GUARDIAN  
15 SHALL SUBMIT AN INDIVIDUAL HEALTH CARE PLAN FOR THE STUDENT TO  
16 SCHOOL OFFICIALS BEFORE THE BEGINNING OF EACH SCHOOL YEAR OR UPON  
17 ENROLLMENT OF THE STUDENT OR DIAGNOSIS OF THE STUDENT WITH  
18 DIABETES. THE INDIVIDUAL HEALTH CARE PLAN SHALL BE DEVELOPED BY A  
19 PERSONAL HEALTH CARE TEAM FOR THE STUDENT THAT INCLUDES A LICENSED  
20 PHYSICIAN. IF AN INDIVIDUAL HEALTH CARE PLAN HAS BEEN SUBMITTED FOR  
21 A STUDENT WITH DIABETES, ALL OF THE FOLLOWING APPLY TO THAT  
22 STUDENT:

23 (A) THE TRAINING DESCRIBED IN SUBSECTION (2) SHALL BE PROVIDED  
24 TO SCHOOL PERSONNEL.

25 (B) IN ACCORDANCE WITH THE REQUEST OF THE STUDENT'S PARENT OR  
26 LEGAL GUARDIAN AND WITH THE INDIVIDUAL HEALTH CARE PLAN, TRAINED  
27 DIABETES PERSONNEL SHALL PERFORM FUNCTIONS RELATED TO MANAGEMENT OF

1 THE STUDENT'S DIABETES, INCLUDING, BUT NOT LIMITED TO, SOME OR ALL  
2 OF THE FOLLOWING:

3 (i) RESPONDING TO BLOOD GLUCOSE LEVELS THAT ARE OUTSIDE OF THE  
4 STUDENT'S TARGET RANGE.

5 (ii) ADMINISTERING INSULIN OR ASSISTING THE STUDENT IN  
6 ADMINISTERING INSULIN USING THE INSULIN DELIVERY SYSTEM THE STUDENT  
7 USES.

8 (iii) PROVIDING ORAL DIABETES MEDICATIONS.

9 (iv) CHECKING AND RECORDING BLOOD GLUCOSE LEVELS AND KETONE  
10 LEVELS OR ASSISTING THE STUDENT WITH THIS CHECKING AND RECORDING.

11 (v) FOLLOWING INSTRUCTIONS REGARDING MEALS, SNACKS, AND  
12 PHYSICAL ACTIVITY.

13 (C) AT LEAST 1 OF THE TRAINED DIABETES PERSONNEL SHALL BE  
14 PRESENT AND AVAILABLE TO PROVIDE THE CARE DESCRIBED IN SUBDIVISION  
15 (A) TO THE STUDENT AT ALL TIMES DURING REGULAR SCHOOL HOURS AND  
16 DURING SCHOOL-SPONSORED BEFORE-SCHOOL OR AFTER-SCHOOL CARE PROGRAMS  
17 AND EXTRACURRICULAR ACTIVITIES.

18 (D) IF THE STUDENT LEAVES SCHOOL ON A SCHOOL-SPONSORED FIELD  
19 TRIP, TRAINED DIABETES PERSONNEL SHALL BE AVAILABLE BY TELEPHONE OR  
20 OTHER ELECTRONIC COMMUNICATION DEVICE AT ALL TIMES DURING THE FIELD  
21 TRIP.

22 (E) TRAINED DIABETES PERSONNEL SHALL BE PRESENT AT EACH SCHOOL  
23 IN WHICH THE STUDENT IS ENROLLED. A STUDENT'S RIGHTS CONCERNING  
24 SCHOOL CHOICE SHALL NOT BE RESTRICTED IN ANY WAY BECAUSE THE  
25 STUDENT HAS DIABETES.

26 (F) UPON WRITTEN REQUEST OF THE STUDENT'S PARENT OR LEGAL  
27 GUARDIAN AND AUTHORIZATION BY THE STUDENT'S INDIVIDUAL HEALTH CARE

1 PLAN, SCHOOL OFFICIALS SHALL PERMIT THE STUDENT TO PERFORM BLOOD  
2 GLUCOSE CHECKS, ADMINISTER INSULIN TO HIMSELF OR HERSELF USING THE  
3 INSULIN DELIVERY SYSTEM HE OR SHE USES, TREAT HYPOGLYCEMIA OR  
4 HYPERGLYCEMIA HE OR SHE EXPERIENCES, AND OTHERWISE ATTEND TO THE  
5 CARE AND MANAGEMENT OF HIS OR HER DIABETES IN THE CLASSROOM OR ANY  
6 OTHER AREA OF THE SCHOOL OR SCHOOL GROUNDS AND AT ANY SCHOOL-  
7 RELATED ACTIVITY, AND TO POSSESS ON HIS OR HER PERSON AT ALL TIMES  
8 ALL NECESSARY SUPPLIES AND EQUIPMENT TO PERFORM THESE CARE AND  
9 MANAGEMENT FUNCTIONS.

10 (4) A SCHOOL NURSE IS THE PREFERRED DIABETES CARE PROVIDER FOR  
11 A STUDENT WITH DIABETES, BUT TRAINED DIABETES PERSONNEL ARE NOT  
12 REQUIRED BY THIS SECTION TO BE LICENSED HEALTH CARE PROFESSIONALS.  
13 IF A SCHOOL NURSE IS ASSIGNED TO A SCHOOL, THE SCHOOL NURSE SHALL  
14 COORDINATE THE PROVISION OF DIABETES CARE AT THAT SCHOOL UNDER THIS  
15 SECTION AND SHALL SERVE AS THE LEAD TRAINED DIABETES PERSONNEL.

16 (5) A SCHOOL EMPLOYEE, SCHOOL DISTRICT, PUBLIC SCHOOL ACADEMY,  
17 NONPUBLIC SCHOOL, OR MEMBER OF A SCHOOL BOARD, PUBLIC SCHOOL  
18 ACADEMY BOARD OF DIRECTORS, OR NONPUBLIC SCHOOL GOVERNING BODY IS  
19 NOT LIABLE FOR DAMAGES IN A CIVIL ACTION FOR INJURY, DEATH, OR LOSS  
20 TO PERSON OR PROPERTY ALLEGEDLY ARISING FROM A STUDENT NOT  
21 RECEIVING DIABETES CARE OR BEING PROHIBITED BY AN EMPLOYEE OF THE  
22 SCHOOL OR SCHOOL DISTRICT FROM ENGAGING IN DIABETES CARE OR  
23 MANAGEMENT FOR HIMSELF OR HERSELF BECAUSE OF THE EMPLOYEE'S  
24 REASONABLE BELIEF FORMED AFTER A REASONABLE AND ORDINARY INQUIRY  
25 THAT THE CONDITIONS PRESCRIBED IN SUBSECTION (3) HAD NOT BEEN  
26 SATISFIED. A SCHOOL EMPLOYEE, SCHOOL DISTRICT, PUBLIC SCHOOL  
27 ACADEMY, NONPUBLIC SCHOOL, OR MEMBER OF A SCHOOL BOARD, PUBLIC

1 SCHOOL ACADEMY BOARD OF DIRECTORS, OR NONPUBLIC SCHOOL GOVERNING  
2 BODY IS NOT LIABLE FOR DAMAGES IN A CIVIL ACTION FOR INJURY, DEATH,  
3 OR LOSS TO PERSON OR PROPERTY ALLEGEDLY ARISING FROM A PUPIL  
4 RECEIVING DIABETES CARE OR BEING PERMITTED BY AN EMPLOYEE OF THE  
5 SCHOOL OR SCHOOL DISTRICT TO ENGAGE IN DIABETES CARE AND MANAGEMENT  
6 FOR HIMSELF OR HERSELF BECAUSE OF THE EMPLOYEE'S REASONABLE BELIEF  
7 FORMED AFTER A REASONABLE AND ORDINARY INQUIRY THAT THE CONDITIONS  
8 PRESCRIBED IN SUBSECTION (3) HAD BEEN SATISFIED. THIS SUBSECTION  
9 DOES NOT ELIMINATE, LIMIT, OR REDUCE ANY OTHER IMMUNITY OR DEFENSE  
10 THAT A SCHOOL EMPLOYEE, SCHOOL DISTRICT, PUBLIC SCHOOL ACADEMY,  
11 NONPUBLIC SCHOOL, OR MEMBER OF A SCHOOL BOARD, PUBLIC SCHOOL  
12 ACADEMY BOARD OF DIRECTORS, OR NONPUBLIC SCHOOL GOVERNING BODY MAY  
13 HAVE UNDER SECTION 1178 OR OTHER STATE LAW.

14 (6) AS USED IN THIS SECTION:

15 (A) "INDIVIDUAL HEALTH CARE PLAN" MEANS A DOCUMENT DEVELOPED  
16 BY THE PARENT OR LEGAL GUARDIAN OF A STUDENT WITH DIABETES AND THE  
17 STUDENT'S PERSONAL HEALTH CARE TEAM THAT SETS OUT THE HEALTH  
18 SERVICES NEEDED BY THE STUDENT AT SCHOOL AND THAT IS SIGNED BY AT  
19 LEAST THE PARENT OR LEGAL GUARDIAN AND THE LICENSED PHYSICIAN WHO  
20 IS PART OF THE STUDENT'S PERSONAL HEALTH CARE TEAM.

21 (B) "LICENSED HEALTH CARE PROFESSIONAL" MEANS A PHYSICIAN,  
22 NURSE, OR PHYSICIAN'S ASSISTANT LICENSED UNDER ARTICLE 15 OF THE  
23 PUBLIC HEALTH CODE, 1978 PA 368, MCL 333.16101 TO 333.18838.

24 (C) "SCHOOL" MEANS ANY PUBLIC OR NONPUBLIC SCHOOL THAT  
25 OPERATES ANY OF GRADES K TO 12.

26 (D) "SCHOOL EMPLOYEE" MEANS ANY PERSON EMPLOYED BY OR UNDER  
27 CONTRACT WITH A SCHOOL DISTRICT, INTERMEDIATE SCHOOL DISTRICT,

1 PUBLIC SCHOOL ACADEMY, OR NONPUBLIC SCHOOL OR ANY PERSON EMPLOYED  
2 BY OR UNDER CONTRACT WITH A LOCAL HEALTH DEPARTMENT WHO IS ASSIGNED  
3 TO A SCHOOL, OR ANY SUBCONTRACTOR DESIGNATED FOR THIS FUNCTION.

4 (E) "TRAINED DIABETES PERSONNEL" MEANS A SCHOOL EMPLOYEE  
5 TRAINED IN ACCORDANCE WITH THIS SECTION.