



## **POLICY 5.324**

**4-F** I recommend that the Board adopt the proposed new Policy 5.324, entitled “Students with Life Threatening Health Conditions.”

[Contact: Dr. Cathy Burns, PX 76988; Paula Triana, PX 82026.]

### **Adoption**

### **CONSENT ITEM**

- The Board approved development of this revised Policy at the development reading on June 1, 2011. Per Board Member request, the phrase “...contact emergency assistance by calling 911 and...” was added to line 106.
- This proposed new policy provides management of student life threatening conditions during school and school sponsored activities, focusing upon:
  - Students who experience severe allergies and anaphylactic shock;
  - Students prone to severe asthma.
  - Students prone to seizures.
  - Students with diabetes.
  - Students with other chronic or life-threatening health conditions.
- The policy sets out the role of the school nurse; establishes training requirements for school personnel; provides for the notification to parents/guardians; and establishes procedures for school personnel response to the life-threatening health situations. See Section 4b, c, d and e.
  - The parent/guardian of a student with a life-threatening health condition is required to provide to the school a copy of the physician’s order for administration of medication/treatment within the school setting. See Section 4a.
- Administrative procedures and guidelines are established to provide more specific guidelines to school personnel. See attached administrative procedures and guidelines.
- The proposed policy has been developed with the School Health Advisory Committee, consisting of health partners from the Palm Beach County Health Department, Palm Beach County Health Care District, American Lung Association, and our ESE consulting physician; and a staff committee of District employees from Student Intervention Services, Food Service,

Transportation, Risk Management, Environmental, 504 Program, School Police, ESE and Legal.

POLICY 5.324

STUDENTS WITH LIFE THREATENING HEALTH CONDITIONS

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2  
3 1. **Purpose.** – The purpose of this policy is to establish procedures to ensure the  
4 safety of students with life-threatening health conditions within the school setting  
5 and prevent or limit the impact of these conditions on school attendance and  
6 participation. This policy also establishes training requirements for school  
7 personnel in accordance with state laws.
  
- 8 2. **Definitions.**
  - 9 a. *Life-Threatening Health Condition* is a condition that will put a student in  
10 danger of death during the school day if a medication or treatment order and  
11 an Individual Health Plan are not in place.
  
  - 12 b. *Life-Threatening Health Situation* is when a student appears to be very ill or  
13 who has received a serious injury such as severe bleeding, shock, difficulty  
14 breathing, heart attack, choking, drug overdose, poisoning, and/or  
15 unconsciousness beyond ordinary fainting.
  
  - 16 c. *Medication or Treatment Order* is a “Physician Authorization for Student  
17 Medication or Treatment”, PBCHD form 1201 completed and signed by the  
18 student’s physician/health care provider and authorized by the parent/guardian  
19 pursuant to School Board policy 5.321. The medication/treatment order will be  
20 reviewed annually or as needed by a registered nurse and maintained in the  
21 school health room.
  
  - 22 d. *Individual Health Care Plan (IHCP)* is a care plan developed by the nurse, the  
23 parent/guardian, and others as necessary, to ensure the student’s continued  
24 health and safety at school.
  
  - 25 e. *Emergency Care Plan (ECP)* is a care plan developed by the nurse and  
26 parent/guardian to identify the nurse’s role in the care of the student and guide  
27 non-medical personnel in emergency situations. The ECP will be distributed to  
28 appropriate staff members and a student specific training will be conducted  
29 pursuant to Fla. Stat. § 1006.062(1)(a) and School Board policy 5.321 should  
30 designate school personnel to provide administration of emergency  
31 medication/treatment.
  
  - 32 f. *Do Not Resuscitate (DNR)/Advance Directive* is a specific form authorized by  
33 law, from the patient and his/her physician to professional emergency  
34 personnel to not administer cardiopulmonary resuscitation. Advance  
35 directives are appropriate in a medical setting (i.e. Emergency Room, Hospital,  
36 or when paramedics are on the scene of the emergency) or the patient’s home

37 and do not apply to general public settings such as schools. DNR orders are  
38 not applicable in the school setting pursuant to Fla. Stat. § 765.101. School  
39 officials should call 911, provide basic Cardiopulmonary Resuscitation (CPR)  
40 and the school nurse should maintain and provide the DNR order to  
41 paramedic emergency responders upon their arrival at the school.

42 3. **Policy.** The safety of District students is a priority to the School Board. Thus, the  
43 School Board recognizes that some District students are at a high risk with  
44 respect to life-threatening conditions which may become severe enough to cause  
45 death. Although it is not possible to guarantee a completely safe environment or  
46 eliminate all health risks, it is expected that District employees will minimize the  
47 risks associated with the life-threatening conditions to which students are exposed  
48 while at school or participating in a school-sponsored event or activity. The  
49 management of District students at risk due to life-threatening health conditions is a  
50 shared responsibility among District staff, students, parents/guardians and health  
51 care professionals. These students include, but are not limited to:

- 52 a. Students who experience severe allergies and anaphylactic shock;
- 53 b. Students prone to severe asthma.
- 54 c. Students prone to seizures.
- 55 d. Students with diabetes.
- 56 e. Students with other chronic or life-threatening health conditions.

57 4. **Procedures.**

58 a. Preparation for School Entry. Prior to attendance at school, the  
59 parent/guardian of a student with a life-threatening health condition must  
60 provide to the school nurse or principal, in the absence of a school nurse, a  
61 copy of the physician's order for administration of medication/treatment within  
62 the school setting on Palm Beach County Health Department (PBCHD) Form  
63 1201 as required by state law.

64 i. If indicated, medication and/or equipment will be delivered to the school  
65 nurse or the principal, in the absence of a school nurse, prior to school  
66 entry along with required physician's order as described in 3(a).

67 ii. Medications and/or related equipment will be stored and administered in  
68 compliance to School Board Policy 5.321 (Administration of Student  
69 Medication/Treatment).

70 b. School Nurse Role. The school nurse or the registered nurse supervisor, in  
71 the absence of a school nurse, will create the Individual Health Care Plan (

72 IHCP)for the student upon receiving the physician's authorization form, and  
73 perform the following:

74 i. Notify the principal of the student with a life-threatening health condition  
75 and provide advice on any specific precautions needed in the school  
76 setting.

77 ii. Develop a layman's emergency action plan specific to the life-threatening  
78 health condition of the student to be followed within the school setting.

79 iii. Determine which district staff needs training, provide the training and  
80 supervise the trained school staff.

81 c. Training Requirements. The school nurse or the registered nurse supervisor  
82 will evaluate and provide training to school personnel based upon the  
83 requirements of the IHCP and pursuant to Fla. Stat. § 1006.062(1)(a) and  
84 School Board policy 5.321(Administration of Student Medication/Treatment).

85 i. The principal will designate staff for student specific training by the school  
86 nurse or nurse supervisor to ensure the safety of the student while in  
87 school prior to the student's entry into school.

88 ii. School staff temporarily substituted for administration of specific student  
89 health care in school must be trained in nursing tasks that can be  
90 delegated to a lay person by the school nurse or nurse supervisor prior to  
91 assuming those duties.

92 iii. At the discretion of the principal and/or school nurse, the school nurse will  
93 provide a generalized overview of the life-threatening health condition to  
94 school staff that may come in contact with the student to ensure  
95 understanding of the needs of students with this condition.

96 d. Notification of Parent/Guardian. If a student arrives at school without a  
97 physician's authorization for medication/treatment pursuant to School Board  
98 Policy 5.321 (Administration of Student Medication/Treatment), the principal or  
99 school nurse will immediately contact the parent/guardian to inform him/her  
100 that the medication/treatment will not be administered to the student by the  
101 school nurse and/or principal's designee until the appropriate forms are  
102 provided to ensure the safety and welfare of the student.

103 e. Life-Threatening Response by School Staff. Pursuant to School Board Policy  
104 5.32, school staff will perform the following procedures in the event of a  
105 student illness or accident that is life-threatening.

106 i. Employee on the scene should **contact emergency assistance by calling**  
107 **911 and** render first aid if properly trained and immediately notify the

- 108                   Principal, school nurse, and/or emergency response team members.
- 109                   ii. Inform the school nurse or health room designee, in the absence of the  
110                   school nurse, of the student’s identity and nature of the illness/injury so  
111                   he/she can bring to the scene any emergency medication and/or  
112                   equipment required.
- 113                   ~~iii. If a school nurse or trained first aid responder is not available, contact~~  
114                   ~~emergency assistance by calling 911.~~
- 115                   iii. The principal or principal designee should contact the parent/guardian as  
116                   quickly as possible and inform him/her of the life-threatening incident that  
117                   occurred with his/her student.

118 5. **Guidelines.** District staff shall utilize the administrative procedures and  
119 guidelines, *Students with Life-Threatening Health Conditions: Guidelines and*  
120 *Protocols Addendum*”, attached and incorporated hereto, to develop and  
121 implement guidelines regarding identification, prevention, training, and school  
122 action plans specific to students with these life-threatening health  
123 conditions/situations.

- 124                   a. Anaphylactic Emergency
- 125                   iii. Food allergies
- 126                   iv. Insect stings
- 127                   v. Latex allergies
- 128                   b. Asthmatic Emergency
- 129                   c. Diabetic Emergency
- 130                   d. Cardiac Emergency
- 131                   e. Neurological Emergency
- 132                   iii. Grand mal seizure
- 133                   iv. Unconsciousness

134 STATUTORY AUTHORITY: Fla. Stat. §§ 1006.062; 1002.20; 381.0056; 64F-6.004,  
135 F.A.C.; 765.101  
136 LAWS IMPLEMENTED: Fla. Stat. §§ 1006.062(1)(a) & (1)(b)(1); 1002.20(3);  
137 381.0056(3)(a) & (5)(a)(12); 64F-6.004, F.A.C.; 765.101  
138 HISTORY: \_\_/\_\_/2011

Legal Signoff:

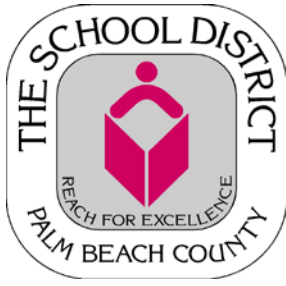
The Legal Department has reviewed proposed Policy 5.324 and finds it legally sufficient for adoption by the Board.

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Attorney

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Date



The School District Of Palm Beach County

## Students with Life Threatening Health Conditions

Guidelines and Protocols Addendum for Policy #





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# Students with Life Threatening Health Conditions - Guidelines and Protocols for PBC Schools

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Chronic illnesses affect at least 10-15 percent of children in the United States. Students with chronic and life threatening conditions can function to their maximum potential if their needs are met. This can benefit the student and school by improving attendance, alertness and physical stamina, and having fewer restrictions in participating in school activities.

The following general guidelines will direct schools, students, and families in appropriate, evidenced based interventions to ensure student safety and access to the educational environment:

## School District's Responsibilities:

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- Develop and implement guidelines/protocols applicable to chronic illnesses for asthma, allergies, diabetes, epilepsy (seizure disorders), and other chronic or life threatening health conditions of students.
  - Include safe practices in the classroom and all school related activities.
  - Follow established standards of care and Federal laws.
  - Provide education of staff and students to promote acceptance.
  - Provide training for staff responding to emergencies and delegated nursing tasks.
  - Prohibit harassment, bullying, or teasing of students with life threatening health conditions.

## Family's Responsibilities:

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- Notify the school of the student's health needs and management and provide the physician's authorization for medication/treatment administration.
  - Participate in the development of the school health plan.
  - Authorize exchange of health information as appropriate for care in the school.
  - Provide supply of student's medication/treatment supplies.
  - Provide current emergency contact information.

## Student's Responsibilities:

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- Notify school staff about needs in managing his/her health condition/symptoms in the school environment.

## Multi-Disciplinary Team Approach

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Collaboration among school staff and parents will promote the best way to address and respond to a life-threatening health conditions in the school setting. The following staff (at a minimum) will be included in the multi-disciplinary team and provide support and guidance to the student:

- School principal
- School nurse, if available
- School food service director/staff
- Teachers and specialists (e.g., - art, music, science, computer)
- Guidance counselor
- Coaches/physical education teachers, after school staff
- Custodian
- Bus driver
- Other learning support staff and aides based on the student's curriculum and activities

# Comprehensive Protocols to Maintain the Safety and Health of Students for Life Threatening Health Conditions R/T Allergies:

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## **Anaphylaxis**

**(Life Threatening Medical Condition after Exposure to Specific Allergens)**

The American Academy of Allergy, Asthma, and Immunology estimate that 1-2% of the population will experience an anaphylactic reaction from food allergies and insect stings, with a lower risk due to drugs and latex.

- Annually, approximately 100 deaths are caused by food-related anaphylaxis
  - Most common foods that cause allergic reactions
    - Peanuts
    - Tree nuts
    - Shellfish
    - Fish
    - Milk
    - Egg
    - Soy
    - Wheat
- Annually, approximately 50 deaths are caused by insect sting anaphylaxis
  - Most common cause of exposure
    - Insect nests
    - Open garbage
    - Outside eating areas

Key Aspects to Remember are:

- Anaphylaxis has recognizable signs and symptoms.
  - Respiratory
    - Coughing, wheezing, difficulty breathing
    - Difficulty swallowing, throat tightness
  - Skin
    - Hives, itching (of any body part)
    - Swelling (of any body part)
    - Change of color
  - Gastrointestinal
    - Vomiting, diarrhea, stomach cramps
  - Other
    - Red, watery eyes, runny nose
    - Dizziness, fainting, loss of consciousness
- Anaphylaxis management requires immediate treatment after contact of allergen.
  - **Epinephrine (adrenaline) injection is the treatment of choice**
    - All efforts directed towards its immediate use
- Anaphylaxis is preventable and treatable.
- Anaphylaxis management requires avoidance of allergen.

## The Following Procedures Shall be in Place at School to Address Life-Threatening Allergies:

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### **Classrooms – ensure a safe educational environment and safeguards for the protection of students with life threatening allergies.**

1. Educate all teachers, aides, volunteers, substitutes and students about anaphylaxis.
2. Alert teachers and their substitutes of any student with allergies and review his/her emergency health care plan.
3. Prohibit the use of allergens related to a student's allergy in class projects, parties, holidays/celebrations, arts, crafts, science experiments, snacks, or other purposes.

4. Prohibit the sharing or trading of food in the classroom.
5. Promote proper hand washing technique by adults and students and tables/desks should be cleaned with only approved school district fluids and procedures.
6. Send letters to parents/guardians of classmates about the allergen (without identifying the student) explaining any prohibitions on food or other activity in the classroom.
7. Promote non-food items for rewards, birthday parties, and other celebrations.

**Field Trips – ensure safe participation in all school-sponsored functions.**

1. Inform relevant aspects of the student’s emergency health plan to participating school staff.
2. Plan in advance of field trip to make sure that needed services/precautions are available or in place while away from school.
3. Plan activities that take into account any life threatening allergies of students participating.
4. Train participating school staff in emergency responses relative to student’s needs to include administration of emergency medications.

**School Food Service– ensure a safe cafeteria environment by reducing the chance of accidental exposure.**

**School Food Service Department Responsibilities\*:**

1. Each School Food Service Manager is required to become ServSafe certified which entails detailed training regarding safe food handling practices to include education on avoiding cross contamination with potential food allergens.
2. School Food Service employees will use non-latex gloves. Gloves will be changed frequently, and hands will be washed as necessary to avoid cross contamination with potential food allergens.
3. When provided, the School Food Service Manager and the School Food Service Department’s administrative office will maintain a list of students with food allergies that may result in an anaphylactic emergency.

4. The School Food Service Department's administrative office will review, identify potential food allergens, and maintain the ingredient profile for each item on School Food Service awarded food bids.
5. The School Food Service Department's administrative office will be responsible for appropriately communicating food allergen information to the School Food Service Manager when specific to a life-threatening situation.
6. When requested, a School Food Service representative will participate in the development of an IEP/504 plan as it relates to anaphylactic emergencies.
7. The School Food Service Manager will participate in in-service training(s) provided by the school nurse or registered nurse supervisor for students with life-threatening allergies including demonstration of Epinephrine use.
8. When a student is identified with a food allergy that may result in an anaphylactic reaction, with parental approval, the School Food Service Manager will enter student's allergy information into computerized data base. The information will be kept confidential and shared on a need-to-know basis in compliance with federal privacy regulations.
9. School Food Service employees will respond appropriately to all complaints/concerns from any student with a life-threatening anaphylactic emergency. The school nurse or administration will be contacted by the School Food Service employees for assistance.
10. For field trips only, meals for children with food allergies should be stored separately to minimize cross contamination. When requested by school administration, the School Food Service Manager will provide peanut-free entrées to all field trip attendees.
11. For in-classroom meal settings only, every consideration should be given to reduce or eliminate foods that potentially contain food allergens that will cause an anaphylactic emergency.

\*Prepared by The School District of Palm Beach County, School Food Service Department



**School Bus/Transportation - ensure safe transportation of students with life threatening allergies to and from school and to school-sponsored activities.**

1. Advise bus drivers of students that have food and other allergies or symptoms associated with allergic reactions and how to respond appropriately.
2. Maintain the emergency communications systems on buses.
3. Consider assigned bus seating.
  - a. Students with allergies can sit at the front of the bus
  - b. Students with allergies can be paired with a “bus buddy”
4. Implement a no-food policy for the bus.

**Environmental - ensure safe school environment for students with life threatening allergies.**

1. Utilize district protocols for appropriate cleaning methods and fluids.
2. Provide ongoing cleaning of common areas:
  - a. Libraries
  - b. Computer labs
  - c. Music
  - d. Art rooms,
  - e. Hallways
  - f. Bathrooms
3. Avoid use of food products as displays or part of displays in hallways.
4. Provide guidelines for food fundraisers on school grounds.
5. Become an “asthma friendly” school.

**After School Programs - ensure safe after school activities and safeguards for the protection of students with life threatening allergies.**

1. Utilize procedures consistent with school policies.
2. Educate all after school staff about anaphylaxis.
3. Alert after school staff of any student with allergies and review his/her emergency health care plan.
4. Train after school staff in emergency responses relative to student’s needs to include administration of emergency medications.
5. Prohibit the use of allergens related to a student’s allergy in afterschool activities.

6. Do not allow sharing or trading of food in after school activities/classes.

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# Comprehensive Protocols to Maintain the Safety and Health of Students for Life Threatening Health Conditions R/T Asthma:

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## **Asthma**

**(Life Threatening Lung Disease that makes it Difficult to Breathe)**

The American Lung Association reports that approximately 6.8 million children have asthma and it is one of the leading health related causes for student absenteeism.

- Asthma accounts for about 14 million lost school days a year.
- Asthma is the third leading cause of hospitalization in children under the age of 15.

Key Aspects to Remember are:

- Asthma is a chronic disease and a student does not out grow it.
- Asthma cannot be cured but it can be controlled.
- Asthma episodes can happen at any time and can be life-threatening.
- Asthma triggers that most commonly start an episode.
  - Animals, bee/insect sting
  - Chalk dust, pollens, smoke
  - Dust mites, molds
  - Food, strong odors, latex
  - Exercise, change in temperature, respiratory infections
- Asthmatic episode warning signs:
  - Coughing, wheezing
  - Shortness of breath, chest tightness
    - Student hunched over
    - Student struggling to breathe

- Trouble walking or talking
- Lips or fingernails gray/blue
- Asthmatic episodes require immediate treatment and intervention.
  - Remain calm and reassure the student
  - Stop the student's physical activity
  - Remove the student from exposure to known trigger
  - Do not leave student alone
  - Follow student's Asthma Action Plan
  - Observe student to ensure he/she improves
    - Allow student to continue activity
      - Wheezing has resolved
      - No chest tightness, shortness of breath
      - Can speak in complete sentences
      - Can freely walk around
      - Peak flow rate is 80% or better

## The Following Procedures Shall be in Place at School to Address Life-Threatening Asthmatic Episodes or Respiratory Distress:

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### **Classrooms – ensure a safe educational environment and safeguards for the protection of students with asthma.**

1. Educate all teachers, aides, volunteers, substitutes and students about asthma.
2. Alert teachers and their substitutes of any student with asthma and review his/her emergency Asthma Action Plan.
3. Reduce or eliminate chalk dust
4. Use fragrance-free markers
5. Reduce or eliminate exposure to classroom pets
6. Use odor-free cleaning chemicals approved by district
7. Use non-latex products, allow only mylar balloons

**Field Trips – ensure safe participation in all school-sponsored functions.**

1. Inform relevant aspects of the student’s emergency Asthma Action plan to participating school staff.
2. Plan in advance of field trip to make sure that needed services/precautions are available or in place while away from school.
3. Plan activities that take into account any asthmatic triggers of students participating.
4. Train participating school staff in emergency responses relative to student’s needs to include administration of student’s prescribed reliever medications.

**School Food Service– ensure a safe cafeteria environment by reducing the chance of accidental exposure to asthma triggers.**

**School Food Service Department Responsibilities\*:**

1. Each School Food Service Manager is required to become ServSafe certified which entails detailed training regarding safe food handling practices to include education on avoiding cross contamination with potential food allergens.
2. School Food Service employees will use non-latex gloves. Gloves will be changed frequently, and hands will be washed as necessary to avoid cross contamination with potential food allergens.
3. When provided, the School Food Service Manager and the School Food Service Department’s administrative office will maintain a list of students with asthmatic episodes triggered by food.
4. The School Food Service Department’s administrative office will be responsible for appropriately communicating information to the School Food Service Manager specific to asthmatic episodes triggered by food.
5. When requested, a School Food Service representative will participate in the development of an IEP/504 plan as it relates to asthmatic episodes triggered by food.
6. The School Food Service Manager will participate in in-service training(s) provided by the school nurse or registered nurse supervisor for students with asthmatic episodes triggered by food.

7. When a student is identified with asthmatic episodes triggered by food that may result in respiratory distress, with parental approval, the School Food Service Manager will enter student's health information into computerized data base. The information will be kept confidential and shared on a need-to-know basis in compliance with federal privacy regulations.
8. For field trips only, when requested by school administration, the School Food Service Manager will provide entrées free of the food/s that may trigger asthmatic episodes to all field trip attendees.
9. For in-classroom meal settings only, every consideration should be given to reduce or eliminate foods that potentially trigger asthmatic episodes in students identified with asthma.

\*Prepared by The School District of Palm Beach County, School Food Service Department

**School Bus/Transportation - ensure safe transportation of students with asthma to and from school and to school-sponsored activities.**

1. Advise bus drivers of students that have asthma, symptoms associated with asthmatic episodes and how to respond appropriately.
2. Maintain the emergency communications systems on buses.
3. Consider assigned bus seating.
  - a. Students with asthma can sit at the front of the bus
  - b. Students with asthma can be paired with a "bus buddy"
4. Maintain good air quality in the bus.

**Environmental - ensure safe school environment for students with asthma.**

1. Institute tobacco-free laws for schools and school property.
2. Use odor-free cleaning chemicals.
3. Institute a fragrance-free environmental policy.
4. Implement policy regulating animals on school property.
5. Become an "asthma friendly" school.

**After School Programs - ensure safe after school activities and safeguards for the protection of students with asthma.**

1. Utilize procedures consistent with school policies.
2. Educate all after school staff about asthma.
3. Alert after school staff of any student with asthma and review his/her emergency Asthma Action plan.
5. Train after school staff in emergency responses relative to student's needs to include administration of student's prescribed reliever medications.
4. Plan activities that take into account any asthmatic triggers of students participating.

# Comprehensive Protocols to Maintain the Safety and Health of Students for Life Threatening Health Conditions R/T Diabetes:

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## **Diabetes**

**(Life Threatening Disease that Impairs the Body's Ability to Use Food for Energy)**

The American Diabetes Association reports that diabetes is one of the most common chronic childhood diseases.

- Diabetes affects 1 in every 450 young people or 186,300 under 20.
- Diabetes is the sixth-leading cause of death by disease in the U.S.

Key Aspects to Remember are:

- Diabetes cannot be cured but can be managed.
- Diabetes must be managed 24 hours a day, 7 days a week to prevent complications/emergencies.
- Diabetes requires careful monitoring of blood glucose (sugar).
  - Low blood glucose is the greatest immediate danger to student
  - Low blood glucose can occur as result of
    - Administering too much insulin
    - Skipping meals/snacks
    - Exercising longer/more intensely
  - High blood glucose can impair cognitive abilities and academic performance
  - High blood glucose can occur as result of
    - Administering too little insulin, pump malfunction
    - Eating food not covered by medication
    - Illness, stress, injury, emotional stress



- Diabetic students have common needs that must be addressed.
    - Free access to blood glucose monitoring
      - Before eating snacks or meals
      - Before physical exercise
      - With symptoms of blood glucose changes
    - Free access to insulin administration
    - Free access to restroom and water fountain
    - Flexible academic procedure during blood glucose changes
  - Diabetic hypoglycemia (low blood glucose/sugar) warning signs.
    - Shaky, sweaty, hungry, pale
    - Headache, sleepy, confused, disoriented
    - Irritable, nervous, inability to concentrate
    - Weak, lethargic, changed behavior
    - Inability to swallow, unconsciousness, convulsion
  - Diabetic hypoglycemia requires immediate treatment and intervention.
    - Monitor blood glucose levels closely
    - Administer student's quick-acting sugar product
    - Administer student's emergency medication if required
  - Diabetic hyperglycemia (high blood glucose/sugar) warning signs.
    - Increased thirst
    - Frequent urination
    - Nausea, blurred vision, fatigue
  - Diabetic hyperglycemia requires treatment and intervention.
    - Monitor blood glucose levels closely
    - Allow free and unrestricted access to water and restroom
    - Administer supplemental insulin per student's plan
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# The Following Procedures Shall be in Place at School to Address Diabetic Emergencies:

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## **Classrooms – ensure a safe educational environment and safeguards for the protection of students with life threatening diabetic emergencies.**

1. Educate all teachers, aides, volunteers, substitutes and students about diabetes.
2. Alert teachers and their substitutes of any student with diabetes and review his/her emergency health plan.
3. Provide accommodations for students with diabetes.
  - a. Allow snacks to manage blood sugar
  - b. Allow bathroom privileges
  - c. Allow access to drinking water
  - d. Allow monitoring of blood sugars
  - e. Allow administration of insulin
4. Recognize that a change in student's behavior could be a symptom of blood glucose changes.
5. Recognize the symptoms of blood glucose changes.
6. Respond to blood glucose changes as specified in the student's emergency health plan.

## **Field Trips – ensure safe participation in all school-sponsored functions.**

1. Inform relevant aspects of the student's emergency health plan to participating school staff.
2. Plan in advance of field trip to make sure that needed services/precautions are available or in place while away from school.
3. Plan activities that take into account diabetic students participating.
4. Give parent/guardian's advance notice
5. Prepare for meal plan adjustments
6. Prepare for medication adjustments
7. Ensure student's supplies and snacks are brought along
8. Train participating school staff in emergency responses relative to student's needs to include administration of student's emergency medications.

## **School Food Service- ensure safe cafeteria and school environments.**

### **School Food Service Department Responsibilities\*:**

1. Upon request from the School Nurse, the School Food Service Manager will provide up to five shelf stable 100% fruit juice cartons as well as up to five shelf stable emergency snacks to be available should a student encounter a life threatening diabetic emergency.
2. The School Food Service Department's administrative office will review and maintain a comprehensive Carbohydrate and Fiber List document which will be distributed to the Health Care District of Palm Beach County and all school nurses for use when assisting families with meal planning who participate in the Child Nutrition Programs.
3. School Food Service employees will respond appropriately to all complaints/concerns from any student with a life-threatening diabetic emergency. The school nurse or administration will be contacted by the School Food Service employees for assistance.

\*Prepared by The School District of Palm Beach County, School Food Service Department

## **School Bus/Transportation - ensure safe transportation of students with diabetes to and from school and to school-sponsored activities.**

1. Advise bus drivers of students that have diabetes, symptoms associated with blood glucose changes and how to respond appropriately.
2. Maintain the emergency communications systems on buses.
3. Consider assigned bus seating.
4. Students with diabetes can sit at the front of the bus
5. Allow student with diabetes to eat on the bus

## **After School Programs - ensure safe after school activities and safeguards for the protection of students with diabetes.**

1. Utilize procedures consistent with school policies.
2. Educate all after school staff about diabetes.
3. Alert after school staff of any student with diabetes and review his/her emergency health plan.
4. Train after school staff in emergency responses relative to student's needs to include administration of student's emergency medications.

5. Plan activities that take into account any needs of students with diabetes participating.
  - a. Provide nutritious snacks low in carbohydrate, sugar, and fat
  - b. Follow parent/guardian's meal and snack plan
  - c. Include student's supplies to treat blood glucose changes

# Comprehensive Protocols to Maintain the Safety and Health of Students for Life Threatening Health Conditions R/T Epilepsy/Seizure Disorder:

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## **Epilepsy/Seizure Disorder**

**(Medical Condition Producing Seizures that Effects Mental/Physical Function)**

The Epilepsy Foundation reports that seizure disorders causes social isolation and low self esteem in children.

- Epilepsy/seizure disorders affect 300,000 children under 15.
- Generalized seizures are more common in children under 10.

Key Aspects to Remember are:

- Seizures happen when the electrical system of the brain malfunctions.
- Seizure disorders increase the risk for academic underachievement.
- Seizure disorders may be time limited or long term.
- Seizures can last for seconds or minutes and have different symptoms.
  - Simple seizures
    - Lip smacking
    - Behavioral outbursts
    - Staring
    - Twitching
  - Generalized seizures
    - Sudden cry/squeal
    - Falling down, rigidity, stiffness
    - Thrashing, jerking
    - Loss of bowel/bladder control
    - Shallow breathing, blue lips, froth from mouth
    - Gurgling, grunting noise

- Loss of consciousness
- Seizures triggers most commonly recognized.
  - Failure to take medication as prescribed
  - Hormone fluctuations
  - Stress
  - Sleep patterns
  - Photosensitivity
- Seizure behaviors expected within minutes or hours post seizure activity
  - Tiredness, weakness
  - Sleeping, difficult to arouse, confusion
  - Regular breathing
- Seizures require immediate treatment and intervention.
  - Remain calm and reassure students nearby
  - Do not hold student down or try to stop his/her movements
  - Time the seizure
  - Clear area around student of any hard/sharp objects
  - Loosen clothing, place something flat and soft under student's head
  - Do not put anything in student's mouth

## The Following Procedures Shall be in Place at School to Address Epilepsy or Seizure Disorder Emergencies:

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### **Classrooms – ensure a safe educational environment and safeguards for the protection of students with seizure emergencies.**

1. Educate all teachers, aides, volunteers, substitutes and students about epilepsy/seizure disorders.
2. Alert teachers and their substitutes of any student with epilepsy/seizure disorders and review his/her emergency health plan.
3. Provide accommodations for students with epilepsy/seizure disorders.
4. Recognize that a change in student's behavior could be a symptom of epilepsy/seizure disorders.
5. Recognize the symptoms of epilepsy/seizure disorders.

6. Respond to epilepsy/seizure disorders as specified in the student's emergency health plan.

**Field Trips – ensure safe participation in all school-sponsored functions.**

1. Inform relevant aspects of the student's emergency health plan to participating school staff.
2. Plan in advance of field trip to make sure that needed services/precautions are available or in place while away from school.
3. Plan activities that take into account students with epilepsy/seizure disorders who are participating.
4. Give-Give the parent/guardians of the student with epilepsy/seizure disorder advance notice.
5. Train participating school staff in emergency responses relative to student's needs to include administration of student's emergency medications.

**School Food Service– ensure safe cafeteria and school environments.**

**School Food Service Department Responsibilities\*:**

Not applicable

\*The School District of Palm Beach County, School Food Service Department

**School Bus/Transportation - ensure safe transportation of students with epilepsy/seizure disorders to and from school and to school-sponsored activities.**

1. Advise bus drivers of students that have epilepsy/seizure disorder symptoms and how to respond appropriately.
2. Maintain the emergency communications systems on buses.
3. Consider assigned bus seating.
4. Students with epilepsy/seizure disorders can sit at the front of the bus.
- 4.5. Students with epilepsy/seizure disorders should be assigned a "bus buddy" to notify the bus driver/attendant in case of seizure.

**After School Programs - ensure safe after school activities and safeguards for the protection of students with epilepsy/seizure disorders.**

1. Utilize procedures consistent with school policies.
2. Educate all after school staff about epilepsy/seizure disorders.
3. Alert after school staff of any student with epilepsy/seizure disorder and review his/her emergency health plan.
4. Train after school staff in emergency responses relative to student's needs to include administration of student's emergency medications.
5. Plan activities that take into account any needs of students with epilepsy/seizure disorders who are participating.



# References/Resources

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Accessed March 7, 2011

Appendix: Sample Letter for Substitute



School Letterhead

The students listed below in this class have severe life-threatening health conditions.

Please maintain the prevention strategies that we have developed to protect these students.

The Emergency Care Plan (ECP), which states who has been trained to administer any emergency medication needed, is located \_\_\_\_\_.

Student	Life-threatening Health Condition
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Please treat this information confidentially to protect the privacy of the students.

Your cooperation is essential to ensure their safety. Should you have any question, please contact the school nurse \_\_\_\_\_, or the principal \_\_\_\_\_.

\_\_\_\_\_  
Classroom teacher