

POLICY 5.3212

- 4-A** I recommend the Board approve the new Policy 5.3212, to be entitled "Blood Glucose Monitoring," with amendments based on the Board's initial development discussion on June 3.

[Contact: Ronald Armstrong or Lashandra Span, 434-8821.]

◆ **Further Development**

- Preliminary versions of this proposed Policy were approved by the School Health Advisory Committee's Diabetes Subcommittee on Jan. 15, 2001 and Jan. 9, 2002.
- The Board voted to approve the proposed Policy at the first reading on June 3, 2002, with an amendment substantially as shown in bold on lines 15-18.
- To verify the Board's requested amendments and to provide an opportunity for additional development as noted below, the Legal Department requested a second opportunity for Board discussion of this proposed Policy as a follow-up to the initial development discussion on June 3.
- On June 3, the Board requested that language on monitoring-device labeling and parental responsibility for notification of the school be added to a different Policy (P-5.321, concerning student medication/treatment). In the interest of clarity and comprehensiveness of this Policy, legal counsel suggests adding similar language to this Policy, as well, as shown in bold print in lines 9-14.

CONSENT ITEM

PROPOSED NEW POLICY 5.3212

BLOOD GLUCOSE MONITORING

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1. Pursuant to § 232.465(2)(c), Fla. Stat., students with diabetes mellitus (insulin-dependent or non-insulin-dependent) or recurrent hypoglycemia have the right to monitor their blood sugar levels, or to have such levels monitored, during the school day as ordered by their physician.
2. The purpose of blood glucose monitoring is to obtain information needed for appropriate decisions regarding the balance of insulin, food, and exercise for the student.
3. **Parents/guardians have the responsibility to notify the school administration in advance, pursuant to Policy 5.321, that their child will use a glucose monitoring device. Each student who will use a monitoring device has the responsibility of showing it to his/her teachers and school administrators at the beginning of the school year, and the device should be labeled with the student's name and other information consistent with Board Policy 5.321.**
4. **The Superintendent shall annually direct school principals to notify assistant principals and teachers of the students who will use glucose monitoring devices in their school. Applicable personnel are to be trained, as deemed appropriate by the Superintendent, concerning identification of blood glucose monitoring devices.**
5. The student, school nurse, or other personnel trained pursuant to section (7) below, will perform the monitoring. If a student will perform the monitoring, he or she shall be assessed by the school nurse for adequate knowledge and skill in all aspects of blood glucose monitoring. Students performing self-monitoring shall be under the supervision of the school nurse or other personnel trained according to section (7) below.
6. The school principal/designee shall identify at least two personnel to be trained in accordance with section (7) herein, as backup for the school nurse in order to supervise and/or perform monitoring of blood glucose for students with diabetes or recurrent hypoglycemia.
7. Nonmedical school district personnel shall be allowed to perform or assist with blood glucose monitoring as a health-related service pursuant to § 232.465(2), Fla. Stat., upon successful completion of child-specific training by a Florida-licensed registered nurse, nurse practitioner, physician (M.D. or D.O.), or physician assistant. The school nurse

33 will supervise and assess the proficiency of non-medical school staff who receive such
34 training.

35 8. As required by § 232.465(2), Fla. Stat., all blood-glucose monitoring procedures shall
36 be monitored periodically by a Florida-licensed registered nurse, nurse practitioner,
37 physician (M.D. or D.O.), or physician assistant.

38 9. The schedule for a student's glucose monitoring in school should closely follow the
39 monitoring schedule used at home. The student's individualized health care plan
40 ("IHCP") and/or Section 504 Modification Plan ("504 plan") should specify when
41 regular monitoring is to occur and when symptoms would indicate the need for
42 additional monitoring.

43 10. The most appropriate setting for the glucose monitoring will, in many cases, be the
44 school health room. Students in grades three and higher who demonstrate capability
45 and maturity may monitor or be monitored in a supportive classroom situation. The
46 location and method of monitoring such glucose levels, including safe disposal of
47 sharps/lancets, shall be determined by a joint decision of the school principal/designee
48 and the school nurse, with input from the student, the student's parent(s)/guardian(s),
49 and the student's physician or other licensed healthcare provider.

50 11. The IHCP and the 504 plan will address emergency care procedures for individual
51 diabetic students and will contain a detailed description of the method of response.

52 12. Consistent with § 232.46(2) and School Board Policy 5.321, there shall be no liability
53 for civil damages as a result of monitoring of student blood glucose levels when the
54 person performing or supervising such monitoring acts as an ordinarily prudent person
55 would have acted under the same or similar circumstances.

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57 STATUTORY AUTHORITY: §§ 230.22(2); 230.23(22); 232.46, Fla. Stat.

58 LAWS IMPLEMENTED: §§ 230.23(6); Section 230.232.46(2); 232.465, Fla. Stat.

59 HISTORY: / /02

Legal signoff:

The Legal Department has reviewed proposed Policy 5.3212 and finds it legally sufficient for development by the Board.

Attorney

Date