A BILL FOR AN ACT

RELATING TO DIABETES.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1 SECTION 1. There is a rapidly growing population of 2 students with life-threatening or chronic health conditions 3 attending public schools in the State. These health conditions 4 often prevent students from participating in school functions 5 and events and have an adverse impact on their ability to 6 perform routine tasks such as test-taking, often placing the 7 students at risk of underperformance or failure. While many of 8 the symptoms of these health conditions can be treated and <u>9</u> · mitigated with timely health management measures such as 10 medication or food intake, current school policies and practices 11 fail to accommodate those options in an effective manner.

Diabetes is a life-threatening and chronic health condition that impairs the body's ability to use food. Diabetes must be managed twenty-four hours a day to avoid the potentially lifethreatening short-term consequences of blood glucose levels that are either too high (hyperglycemia) or too low (hypoglycemia), and to avoid or delay the serious, long-term complications of high blood glucose levels, which include blindness, amputation, HB LRB 13-0780.doc



H.B. NO. 1084

1 heart disease, and kidney failure. To manage their disease, students with diabetes require balanced food, medication, and a 2 certain level of physical activity while attending school and 3 school-related activities. Well-managed blood glucose levels 4 5 enable students with diabetes to be more productive and 6 successful at school. 7 Many students with diabetes are able to perform most of their own diabetes care tasks at school; however, because of 8 age, inexperience, or other factors, some students need help 9 10 with their diabetes care tasks. All students will need help in 11 the event of a diabetes emergency.

A nurse can play a central role in providing or 12 13 facilitating care for a student with diabetes in the school setting. Although all schools in Hawaii have a health aide, the 14 schools do not have full-time nurses on site. In addition, even 15 when a nurse is assigned to a school full-time for a specific 16 17 student requiring nursing services throughout the school day, that nurse is not available to other students to provide direct 18 care during the school day, during extracurricular activities, 19 20 and on field trips.

The legislature finds that because diabetes management isneeded throughout the school day, additional school personnel



1 who have completed training in diabetes care tasks are needed to perform diabetes care tasks at school and school-related 2 activities so that students with diabetes can be medically safe 3 4 and have the same access to educational opportunities as student's without diabetes. 5 6 SECTION 2. Chapter 302A, Hawaii Revised Statutes, is 7 amended by adding a new subpart to part III, to be appropriately designated and to read as follows: 8 9 11 . STUDENTS WITH DIABETES 10 §302A-A Definitions. For purposes of this subpart: 11 "Diabetes medical management plan" means a plan that identifies the health needs of the student, sets forth a 12 recommended course of action to address those needs at school, 13 14 and is signed by the student's personal health care professional and parent or guardian. 15 16 "Nurse" means the same as defined in section 457-2. "School employee" means any person employed by a school, 17 any person employed by a local health department who is assigned 18 to a public or charter school, or any subcontractor designated 19 for this function. 20 21 "Trained diabetes care personnel" means any school employee

22 or volunteer who is trained in accordance with this subpart.



1	§302	A-B Diabetes training guidelines. (a) The department
2	shall con	sult with the department of health and appropriate
3	health ad	visory organizations to develop and adopt diabetes
4	training	guidelines to train school employees and volunteers in
5	the care	needed for students with diabetes.
6	(b)	The diabetes training guidelines shall specify that
7	the depar	tment shall provide annual diabetes training programs
8	for all n	urses, trained diabetes care personnel, and persons
9	seeking t	o become trained diabetes care personnel in a public or
10	charter s	chool. The training guidelines shall include:
11	(1)	Recognition and treatment of hypoglycemia and
12		hyperglycemia;
13	(2)	The appropriate actions to take when blood glucose
14		levels are outside of the target ranges indicated by a
15		student's medical management plan;
16	(3)	Physician instructions concerning diabetes medication
17		dosage, frequency, and the manner of administration;
18	(4)	Performance of finger-stick blood glucose checking,
19		ketone checking, and recording results;
20	(5)	The administration of insulin and recording results;
21	(6)	Performance of basic insulin pump functions;



H.B. NO. 1084

1	(7)	Recognizing complications that require emergency
2		assistance;
3	(8)	Recommended schedules and food intake for meals and
4		snacks, the effect of physical activity upon blood
5		glucose levels, and actions to be implemented in the
6		case of schedule disruption;
7	(9)	Any other appropriate medical procedures that may be
8		developed from time to time for testing, treatment, or
9		care of the student's diabetic condition; and
10	(10)	Long-term complications of diabetes, and the
11		importance of students with diabetes learning self-
12		management skills that are reinforced in the school
13		setting.
14	§302	A-C Employee training. The department shall train a
15	minimum o	f three school employees or volunteers at each school
16	attended	by a student with diabetes. If fewer than three school
17	employees	or volunteers are available for training at a school,
18	the princ	ipal at that school shall distribute to all employees
19	and volun	teers written notice stating that the school is seeking
20	people to	serve as diabetes care personnel. The notice shall
21	inform th	e employees and volunteers of the following:

HB LRB 13-0780.doc

1	(1)	The school must provide diabetes care to one or more
2		students with diabetes and is seeking personnel
3		willing to be trained to provide that care;
4	(2)	The tasks to be performed;
5	(3)	Participation is voluntary;
6	(4)	Training will be provided at no cost to the
7		prospective trained diabetes care personnel;
8	(5)	Persons volunteering for the training are protected
9		from civil liability pursuant to section 302A-K;
10	(6)	Diabetes care personnel are not limited to school
11		employees; and
12	(7)	The identity of the individual who should be contacted
13		to volunteer for the training.
14	§302	A-D No penalty for employees declining training. No
15	school sh	all discourage an employee from volunteering for
16	diabetes	care personnel training or subject employees who have
17	declined	to serve as trained diabetes care personnel to any
18	penalty o	r disciplinary action.
19	§302	A-E Diabetes care personnel training; coordination.
20	(a) The	diabetes care personnel training shall be coordinated
21	by a publ	ic health nurse or another health care professional
22	with expe	rtise in diabetes. The training shall take place prior
	HB LRB 13	-0780.doc

H.B. NO. 1084

1 to the commencement of each school year, or as needed when a 2 student with diabetes is newly enrolled at a school or a student 3 is newly diagnosed with diabetes, but in no event more than 4 thirty days following the enrollment or diagnosis. The public 5 health nurse or another health care professional with expertise 6 in diabetes shall promptly provide follow-up training and 7 supervision as needed. 8 (b) The department shall provide training in the 9 recognition of hypoglycemia and hyperglycemia and actions to 10 take in response to emergency situations to all school personnel 11 who have primary responsibility for supervising a child with 12 diabetes during the school day and to bus drivers responsible 13 for transporting students with diabetes. 14 \$302A-F Diabetes medical management plan. The parent or 15 quardian of each student with diabetes, who seeks diabetes care 16 for that student while at school, shall submit the student's 17 diabetes medical management plan to the student's school. 18 Diabetes medical management plans shall be implemented by each 19 school upon receipt.

20 §302A-G Required care. (a) Each school that has enrolled
21 a student with diabetes, who has submitted a diabetes medical
22 management plan, shall ensure that the student receives



Page 8

1 appropriate diabetes care as specified in the student's diabetes 2 medical management plan. 3 In accordance with the request of the parent or (b) 4 guardian of a student with diabetes and the student's diabetes 5 medical management plan, the nurse or, in the absence of a 6 nurse, a trained diabetes care personnel, shall perform diabetes 7 care functions including: 8 (1)Checking and recording blood glucose levels and ketone 9 levels or assisting a student with the checking and 10 recording; 11 (2)Responding to blood glucose levels that are outside 12 the student's target range; 13 (3) Administering insulin or assisting a student in 14 administering insulin through the insulin delivery 15 system the student uses; 16 (4) Providing oral diabetes medications; and 17 Facilitating compliance with recommendations regarding (5) 18 meals, snacks, and physical activity. (c) A nurse or trained diabetes care personnel shall be 19 20 on-site and available to provide care to each student with 21 diabetes as set forth in subsections (a) and (b) during regular 22 school hours and during all school-sponsored activities,



H.B. NO. 1084

1 including school-sponsored events, before and after school care programs, field trips, extended off-site excursions, 2 3 extracurricular activities, and on buses when the bus driver has 4 not completed the necessary training. 5 This section shall not be applicable to any school (d) event or program that is not attended by a student with diabetes 6 7 who has submitted a diabetes medical management plan. **§302A-H** Application of other laws. (a) Notwithstanding 8 any other law, the diabetes care activities set forth in section 9 302A-G shall not constitute the practice of nursing and shall be 10 11 exempted from all applicable statutory and regulatory provisions that restrict the activities that can be delegated to or 12 performed by a person who is not a licensed health care 13 14 professional. 15 Notwithstanding any other law, it shall not be (b) 16 unlawful for a licensed health care professional to provide training to school employees and volunteers in the diabetes care 17 personnel activities set forth in section 302A-G or to supervise 18 19 the trained diabetes care personnel. 20 Nothing in this subpart shall diminish the rights of (c)eligible students or the obligations of schools under the 21

22 Individuals with Disabilities Education Act, 20 U.S.C. 1400 et



H.B. NO. 1084

seq., Section 504 of the Rehabilitation Act, 29 U.S.C. 794, or
 the Americans with Disabilities Act, 42 U.S.C. 12101 et seq.
 §302A-I School assignment. (a) No school shall deny
 admission to any student on the basis that the student has
 diabetes.

6 (b) No school shall require a parent or guardian to be a7 trained diabetes care personnel.

8 **§302A-J** Independent monitoring and treatment. (a) Upon 9 written request of the parent or guardian of a student with 10 diabetes and pursuant to the student's diabetes medical 11 management plan, a student with diabetes shall be permitted to 12 perform blood glucose checks, administer insulin through the 13 student's insulin delivery system, treat hypoglycemia and 14 hyperglycemia, and otherwise attend to the care and management 15 of the student's diabetes in the classroom, in any area of the 16 school or school grounds, and at any school-related activity, 17 and to possess on the student's person at all times all 18 necessary supplies and equipment to perform diabetes monitoring 19 and treatment functions.

20 (b) Diabetes monitoring and treatment functions shall be
21 allowed at any time that the student with diabetes, teacher,
22 nurse, or trained diabetes care personnel determines that the



Page 11

H.B. NO. してい

1 functions are reasonably warranted due to the student's

2 condition at that time.

3 (c) Upon the request of a student with diabetes or the
4 student's parent or guardian, a student with diabetes shall be
5 provided access to a private area for performing diabetes care
6 activities.

7 \$302A-K Civil immunity. No physician, nurse, trained 8 diabetes care personnel, school employee, volunteer, or school 9 shall be liable for civil damages or subject to disciplinary 10 action under professional licensing laws or school disciplinary 11 policies as a result of the diabetes care activities authorized 12 by this subpart when the acts are committed as a reasonably 13 prudent person would have acted under the same or similar 14 circumstances.

15 §302A-L Reporting. Each school shall provide a report to 16 the department annually before October 15 of each year, stating 17 the number of students with diabetes in attendance and providing 18 documentation regarding the school's compliance with this 19 subpart. The department shall determine the format of the 20 report and the criteria for documentation, and publish each 21 report on its web site by November 15 of each year.



Page 12

1	§302A-M Private cause of action authorized. (a) A parent		
2	or guardian of a student with diabetes may bring an		
3	administrative complaint with the department, or a lawsuit for		
4	declaratory, injunctive, or monetary relief against any school		
5	that fails to meet its obligations to train school personnel to		
6	provide diabetes care as provided in section 302A-C, to provide		
7	the diabetes care described in section 302A-G, or to permit		
8	self-management of diabetes as outlined in section 302A-J.		
9	(b) A student or parent or guardian who is a prevailing		
10	party in a lawsuit or administrative action brought under this		
11	section shall be entitled to reasonable attorneys' fees and		
12	costs.		
13	(c) The right of action pursuant to this section shall not		
14	alter or limit the remedies available under any other state or		
15	federal law, including Section 504 of the Rehabilitation Act,		
16	the Americans with Disabilities Act, and the Individuals with		
17	Disabilities Education Act."		
18	SECTION 3. Within one hundred eighty days of the effective		
19	date of this Act, the department of education shall implement		
20	diabetes guidelines as required by section 302A-B in section 2		
21	of this Act.		



1	SECTION 4. There is appropriated out of the general
2	revenues of the State of Hawaii the sum of \$ or so
3	much thereof as may be necessary for fiscal year 2013-2014 and
4	the same sum or so much thereof as may be necessary for fiscal
5	year 2014-2015 for the establishment and operation of a program
6	to provide care to students with diabetes in schools.
7	The sums appropriated shall be expended by the department
8	of education for the purposes of this Act.
9	SECTION 5. In codifying the new sections added by section
10	2 of this Act, the revisor of statutes shall substitute
11	appropriate section numbers for the letters used in designating
12	the new sections in this Act.
13	SECTION 6. This Act shall take effect on July 1, 2013.
14	

INTRODUCED BY: Denny Coffman JAN 23 2013



H.B. NO. (284

Report Title:

Department of Education; Diabetes; Students; Appropriation

Description:

Requires the DOE to implement diabetes training for schools with students with diabetes. Appropriates funds.

The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.

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