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By: Delegates D. Barnes, Angel, B. Barnes, Buckel, Fennell, Hornberger, Kelly, Long, Luedtke, Metzgar, Patterson, Platt, Reilly, Shoemaker, Simonaire, Tarlau, Walker, and A. Washington

Introduced and read first time: February 8, 2016 Assigned to: Ways and Means

A BILL ENTITLED

1 AN ACT concerning

2 Public and Nonpublic Schools – Student Diabetes Management Program

3 FOR the purpose of requiring the State Department of Education and the Department of 4 Health and Mental Hygiene, in consultation with certain other organizations, to $\mathbf{5}$ establish certain guidelines for the training of employees to become trained diabetes 6 care providers; providing for the content of the guidelines; requiring each county 7 board of education to require certain public schools to establish a certain Student 8 Diabetes Management Program in the school; providing that certain nonpublic 9 schools may establish a Student Diabetes Management Program in the school; 10 providing that a nonpublic school may conduct or contract for a course for training 11 of employees to become trained diabetes care providers that includes certain items; 12providing for the purpose and requirements of the Program; authorizing certain 13employees to volunteer for participation in a certain Program; prohibiting public and 14nonpublic schools from compelling certain employees to participate in a certain 15Program; requiring certain trained diabetes care providers in the Program to 16 perform certain tasks; providing that certain services performed by certain trained 17diabetes care providers may not be construed as performing acts of nursing under 18 certain circumstances; establishing immunity from liability for certain employees 19under certain circumstances; requiring certain parents or guardians of a certain 20student to submit a Diabetes Medical Management Plan to the school under certain 21 circumstances; requiring a certain meeting of certain individuals be held within a 22certain period of time; authorizing a certain student to perform certain diabetes care 23tasks under certain circumstances in accordance with a certain Plan; defining 24certain terms; and generally relating to a Student Diabetes Management Program 25and public and nonpublic schools.

26 BY adding to

- 27 Article Education
- 28 Section 7–438 and 7–439

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW. [Brackets] indicate matter deleted from existing law.



1 Annotated Code of Maryland $\mathbf{2}$ (2014 Replacement Volume and 2015 Supplement) 3 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows: 4 $\mathbf{5}$ **Article – Education** 6 7-438. 7 IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS (A) (1) 8 INDICATED. 9 "DIABETES MEDICAL MANAGEMENT PLAN" MEANS A PLAN (2) 10 DEVELOPED BY A STUDENT'S PHYSICIAN THAT DESCRIBES THE HEALTH CARE 11 SERVICES NEEDED BY THE STUDENT FOR THE TREATMENT OF THE STUDENT'S 12**DIABETES AT SCHOOL.** 13 (3) "EMPLOYEE" MEANS AN INDIVIDUAL WHO IS EMPLOYED BY A LOCAL BOARD OF EDUCATION, INCLUDING PART-TIME EMPLOYEES, CERTIFIED AND 14NONCERTIFIED SUBSTITUTE TEACHERS EMPLOYED BY THE LOCAL BOARD OF 1516 EDUCATION FOR AT LEAST 7 DAYS EACH SCHOOL YEAR, AND ADMINISTRATIVE 17 STAFF. "PROGRAM" MEANS A STUDENT DIABETES MANAGEMENT 18 (4) 19 **PROGRAM.** 20(5) "TRAINED DIABETES CARE PROVIDER" MEANS AN EMPLOYEE TRAINED IN THE RECOGNITION OF THE SYMPTOMS OF DIABETES AND THE 2122ADMINISTRATION OF HEALTH CARE SERVICES NEEDED BY AN INDIVIDUAL WITH 23DIABETES. THE DEPARTMENT AND THE DEPARTMENT OF HEALTH AND 24**(B)** (1) 25MENTAL HYGIENE, IN CONSULTATION WITH THE AMERICAN ASSOCIATION OF DIABETES EDUCATORS, THE AMERICAN DIABETES ASSOCIATION, THE MARYLAND 2627ASSOCIATION OF SCHOOL HEALTH NURSES, AND THE DIABETES CONTROL

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- 27 ASSOCIATION OF SCHOOL HEALTH NURSES, AND THE DIABETES CONTROL 28 PROGRAM JOINTLY SHALL ESTABLISH GUIDELINES FOR THE TRAINING OF 29 EMPLOYEES TO BECOME TRAINED DIABETES CARE PROVIDERS.
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(2) THE GUIDELINES SHALL INCLUDE INSTRUCTION ON:

31 (I) RECOGNITION AND TREATMENT OF HYPOGLYCEMIA AND 32 HYPERGLYCEMIA;

1(II)APPROPRIATE ACTIONS TO TAKE WHEN BLOOD GLUCOSE2LEVELS ARE OUTSIDE THE TARGET RANGES DETAILED IN THE STUDENT'S DIABETES3MEDICAL MANAGEMENT PLAN;

4 (III) UNDERSTANDING PHYSICIAN INSTRUCTIONS REGARDING 5 DIABETES MEDICATION DRUG DOSAGE, FREQUENCY, AND THE MANNER OF 6 ADMINISTRATION;

7 (IV) PERFORMING FINGER-STICK BLOOD GLUCOSE CHECKING,
8 KETONE CHECKING, AND RESULTS RECORDATION;

9 (V) UNDERSTANDING THE FUNCTION AND PROTOCOL FOR THE 10 USE OF CONTINUOUS GLUCOSE MONITORS; AND

11 (VI) ADMINISTERING GLUCAGON AND INSULIN IN ACCORDANCE 12 WITH THE STUDENT'S DIABETES MANAGEMENT PLAN AND RESULTS RECORDATION.

13 (C) (1) EACH COUNTY BOARD SHALL REQUIRE THE PUBLIC SCHOOLS 14 WITHIN THE JURISDICTION OF THE COUNTY BOARD TO ESTABLISH A STUDENT 15 DIABETES MANAGEMENT PROGRAM IN THE SCHOOL.

16 (2) THE PURPOSE OF THE PROGRAM IS TO HAVE EMPLOYEE 17VOLUNTEERS AVAILABLE TO PROVIDE DIABETES CARE SERVICES TO STUDENTS WITH DIABETES IN ACCORDANCE WITH THE STUDENT'S DIABETES MEDICAL 18 19 MANAGEMENT PLAN DURING SCHOOL HOURS AND, WHEN POSSIBLE, AT 20SCHOOL-SPONSORED ACTIVITIES, INCLUDING FIELD TRIPS AND 21EXTRACURRICULAR ACTIVITIES.

22 (D) (1) THE PROGRAM SHALL:

23(I)**RECRUIT EMPLOYEES WHO ARE INTERESTED IN BEING**24TRAINED TO BECOME TRAINED DIABETES CARE PROVIDERS;

(II) PROVIDE TRAINING FOR EMPLOYEE VOLUNTEERS TO
BECOME TRAINED DIABETES CARE PROVIDERS BEFORE THE COMMENCEMENT OF A
SCHOOL YEAR OR WHEN REQUIRED BY THE ENROLLMENT OF A STUDENT WITH A
DIABETES MEDICAL MANAGEMENT PLAN;

29 (III) DESIGNATE LOCATIONS WITHIN THE SCHOOL WHERE A 30 STUDENT MAY PRIVATELY PERFORM DIABETES CARE TASKS;

(IV) REQUIRE THE SCHOOL NURSE OR A TRAINED DIABETES
 CARE PROVIDER TO BE ON-SITE AND AVAILABLE TO PROVIDE DIABETES CARE
 SERVICES TO A STUDENT WITH A DIABETES MEDICAL MANAGEMENT PLAN DURING

1 SCHOOL HOURS AND, WHEN POSSIBLE, AT SCHOOL–SPONSORED ACTIVITIES, 2 INCLUDING FIELD TRIPS AND EXTRACURRICULAR ACTIVITIES;

3 (V) ESTABLISH A SYSTEM OF COMMUNICATION BETWEEN
4 SCHOOL ADMINISTRATORS AND THE FACULTY, SCHOOL NURSE, TRAINED DIABETES
5 CARE PROVIDERS, PARENTS OR GUARDIANS OF STUDENTS WITH A DIABETES
6 MEDICAL MANAGEMENT PLAN, AND STUDENTS WITH A DIABETES MEDICAL
7 MANAGEMENT PLAN;

8 (VI) FACILITATE THE ACCESS OF AUTHORIZED SCHOOL 9 PERSONNEL TO STUDENT DIABETES MEDICAL MANAGEMENT PLANS; AND

10(VII) ESTABLISHPROCEDURESFORDIABETES-RELATED11EMERGENCIES.

12(2)(1)ANY EMPLOYEE MAY VOLUNTEER TO PARTICIPATE IN THE13PROGRAM AND BE TRAINED TO BECOME A TRAINED DIABETES CARE PROVIDER.

14(II)A PUBLIC SCHOOL MAY NOT COMPEL ANY EMPLOYEE TO15PARTICIPATE IN THE PROGRAM.

16 (3) A TRAINED DIABETES CARE PROVIDER WHO PARTICIPATES IN THE 17 PROGRAM SHALL AGREE TO PERFORM DIABETES CARE TASKS FOR WHICH TRAINING 18 HAS BEEN PROVIDED, INCLUDING:

19(I)CHECKING AND RECORDING BLOOD GLUCOSE LEVELS AND20KETONE LEVELS OR ASSISTING A STUDENT WITH THESE TASKS;

21 (II) ADMINISTERING GLUCAGON AND OTHER EMERGENCY 22 TREATMENTS AS PRESCRIBED;

(III) ADMINISTERING INSULIN OR ASSISTING A STUDENT IN THE
 ADMINISTRATION OF INSULIN THROUGH THE INSULIN DELIVERY SYSTEM THAT THE
 STUDENT USES; AND

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(IV) **PROVIDING ORAL DIABETES MEDICATIONS.**

(4) NOTWITHSTANDING ANY OTHER PROVISION OF LAW, THE
PROVISION OF DIABETES CARE SERVICES BY A TRAINED DIABETES CARE PROVIDER
IN ACCORDANCE WITH THIS SECTION MAY NOT BE CONSTRUED AS PERFORMING
ACTS OF PRACTICAL NURSING OR REGISTERED NURSING UNDER TITLE 8 OF THE
HEALTH OCCUPATIONS ARTICLE.

1 (5) EXCEPT FOR ANY WILLFUL OR GROSSLY NEGLIGENT ACT, AN 2 EMPLOYEE WHO RESPONDS IN GOOD FAITH TO PROVIDE DIABETES-RELATED 3 HEALTH CARE SERVICES TO A STUDENT IN ACCORDANCE WITH THIS SECTION IS 4 IMMUNE FROM CIVIL LIABILITY FOR ANY ACT OR OMISSION IN THE COURSE OF 5 PROVIDING CARE.

6 (E) (1) THE PARENT OR GUARDIAN OF A STUDENT WITH DIABETES WHO 7 NEEDS DIABETES CARE AT SCHOOL SHALL SUBMIT A DIABETES MEDICAL 8 MANAGEMENT PLAN TO THE SCHOOL.

9 (2) EACH STUDENT'S DIABETES MEDICAL MANAGEMENT PLAN 10 SHALL BE REVIEWED IN A MEETING OF THE FOLLOWING INDIVIDUALS:

- 11 (I) THE PARENTS OR GUARDIANS OF THE STUDENT;
- 12 **(II) THE STUDENT;**
- 13 (III) THE SCHOOL NURSE;
- 14 (IV) THE STUDENT'S CLASSROOM TEACHER;

15 (V) ALL TRAINED DIABETES CARE PROVIDERS AT THE SCHOOL 16 WHO MAY BE REQUIRED TO PROVIDE CARE TO THE STUDENT; AND

17(VI) ANY OTHER INDIVIDUALS DETERMINED NECESSARY BY THE18SCHOOL.

(3) A DIABETES MEDICAL MANAGEMENT PLAN REVIEW MEETING
 SHALL BE HELD WITHIN 30 DAYS AFTER THE DIABETES MEDICAL MANAGEMENT
 PLAN IS SUBMITTED.

22 (4) IF A STUDENT'S DIABETES MEDICAL MANAGEMENT PLAN STATES 23 THAT THE STUDENT MAY PERFORM SPECIFIED DIABETES CARE TASKS 24 INDEPENDENTLY, THE STUDENT MAY:

(I) PERFORM AUTHORIZED TASKS WHEREVER THE STUDENT
CONSIDERS NECESSARY, INCLUDING IN THE STUDENT'S CLASSROOM, THE AREA
DESIGNATED BY THE SCHOOL UNDER SUBSECTION (D) OF THIS SECTION, OR OFF
SCHOOL GROUNDS;

29(II) POSSESS AND CARRY ANY SUPPLIES AND EQUIPMENT30NECESSARY TO PERFORM DIABETES CARE TASKS; AND

1 (III) POSSESS A CELLULAR PHONE TO ASK FOR ASSISTANCE 2 WHEN NECESSARY.

3 **7–439.**

4 (A) (1) IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS 5 INDICATED.

6 (2) "DIABETES MEDICAL MANAGEMENT PLAN" MEANS A PLAN 7 DEVELOPED BY A STUDENT'S PHYSICIAN THAT DESCRIBES THE HEALTH CARE 8 SERVICES NEEDED BY THE STUDENT FOR THE TREATMENT OF THE STUDENT'S 9 DIABETES AT SCHOOL.

10 (3) "EMPLOYEE" MEANS AN INDIVIDUAL WHO IS EMPLOYED BY A 11 NONPUBLIC SCHOOL, INCLUDING PART-TIME EMPLOYEES, TEACHERS, AND 12 SUBSTITUTE TEACHERS EMPLOYED BY THE SCHOOL FOR AT LEAST 7 DAYS EACH 13 SCHOOL YEAR, A SCHOOL NURSE, REGISTERED NURSE CASE MANAGER, DELEGATING 14 NURSE, AND ADMINISTRATIVE STAFF.

15 (4) "PROGRAM" MEANS A STUDENT DIABETES MANAGEMENT 16 PROGRAM.

17 (5) "TRAINED DIABETES CARE PROVIDER" MEANS AN EMPLOYEE 18 TRAINED IN THE RECOGNITION OF THE SYMPTOMS OF DIABETES AND THE 19 ADMINISTRATION OF HEALTH CARE SERVICES NEEDED BY AN INDIVIDUAL WITH 20 DIABETES.

21 (B) (1) A NONPUBLIC SCHOOL MAY CONDUCT OR CONTRACT FOR A 22 COURSE FOR THE TRAINING OF EMPLOYEES TO BECOME TRAINED DIABETES CARE 23 PROVIDERS.

24(2)A TRAINING COURSE FOR TRAINED DIABETES CARE PROVIDERS25SHALL INCLUDE INSTRUCTION ON:

26 (I) RECOGNITION AND TREATMENT OF HYPOGLYCEMIA AND 27 HYPERGLYCEMIA;

(II) APPROPRIATE ACTIONS TO TAKE WHEN BLOOD GLUCOSE
 LEVELS ARE OUTSIDE THE TARGET RANGES DETAILED IN THE STUDENT'S DIABETES
 MEDICAL MANAGEMENT PLAN;

31 (III) UNDERSTANDING PHYSICIAN INSTRUCTIONS REGARDING 32 DIABETES MEDICATION DRUG DOSAGE, FREQUENCY, AND THE MANNER OF 33 ADMINISTRATION;

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1 (IV) PERFORMING FINGER-STICK BLOOD GLUCOSE CHECKING, 2 KETONE CHECKING, AND RESULTS RECORDATION;

- 3 (V) UNDERSTANDING THE FUNCTION AND PROTOCOL FOR THE 4 USE OF CONTINUOUS GLUCOSE MONITORS; AND
- 5 (VI) ADMINISTERING GLUCAGON AND INSULIN IN ACCORDANCE 6 WITH THE STUDENT'S DIABETES MANAGEMENT PLAN AND RESULTS RECORDATION.

7 (C) (1) A NONPUBLIC SCHOOL MAY ESTABLISH A STUDENT DIABETES 8 MANAGEMENT PROGRAM IN THE SCHOOL.

9 THE PURPOSE OF THE PROGRAM IS TO HAVE EMPLOYEE (2) 10 VOLUNTEERS AVAILABLE TO PROVIDE DIABETES CARE SERVICES TO STUDENTS WITH DIABETES IN ACCORDANCE WITH THE STUDENT'S DIABETES MEDICAL 11 12MANAGEMENT PLAN DURING SCHOOL HOURS AND, WHEN POSSIBLE, AT ACTIVITIES. 13 SCHOOL-SPONSORED INCLUDING FIELD TRIPS AND 14 EXTRACURRICULAR ACTIVITIES.

15 (D) (1) THE PROGRAM SHALL:

16 (I) RECRUIT EMPLOYEES WHO ARE INTERESTED IN BEING 17 TRAINED TO BECOME TRAINED DIABETES CARE PROVIDERS;

18 (II) PROVIDE TRAINING FOR EMPLOYEE VOLUNTEERS TO 19 BECOME TRAINED DIABETES CARE PROVIDERS BEFORE THE COMMENCEMENT OF A 20 SCHOOL YEAR OR WHEN REQUIRED BY THE ENROLLMENT OF A STUDENT WITH A 21 DIABETES MEDICAL MANAGEMENT PLAN THAT INCLUDES THE ITEMS UNDER 22 SUBSECTION (B)(2) OF THIS SECTION;

23 (III) DESIGNATE LOCATIONS WITHIN THE SCHOOL WHERE A 24 STUDENT MAY PRIVATELY PERFORM DIABETES CARE TASKS;

(IV) REQUIRE THE SCHOOL NURSE OR A TRAINED DIABETES
CARE PROVIDER TO BE ON-SITE AND AVAILABLE TO PROVIDE DIABETES CARE
SERVICES TO A STUDENT WITH A DIABETES MEDICAL MANAGEMENT PLAN DURING
SCHOOL HOURS AND, WHEN POSSIBLE, AT SCHOOL-SPONSORED ACTIVITIES,
INCLUDING FIELD TRIPS AND EXTRACURRICULAR ACTIVITIES;

30(V)ESTABLISH A SYSTEM OF COMMUNICATION BETWEEN THE31SCHOOL ADMINISTRATORS AND THE FACULTY, SCHOOL NURSE, TRAINED DIABETES32CARE PROVIDERS, PARENTS OR GUARDIANS OF STUDENTS WITH A DIABETES

MEDICAL MANAGEMENT PLAN, AND STUDENTS WITH A DIABETES MEDICAL 1 $\mathbf{2}$ **MANAGEMENT PLAN;** (VI) FACILITATE THE ACCESS OF AUTHORIZED SCHOOL 3 PERSONNEL TO STUDENT DIABETES MEDICAL MANAGEMENT PLANS; AND 4 $\mathbf{5}$ (VII) ESTABLISH PROCEDURES FOR **DIABETES-RELATED** 6 **EMERGENCIES.** 7 (2) **(I)** ANY EMPLOYEE MAY VOLUNTEER TO PARTICIPATE IN THE 8 **PROGRAM AND BE TRAINED TO BECOME A TRAINED DIABETES CARE PROVIDER.** 9 A NONPUBLIC SCHOOL MAY NOT COMPEL ANY EMPLOYEE (II) 10 TO PARTICIPATE IN THE PROGRAM. 11 (3) A TRAINED DIABETES CARE PROVIDER WHO PARTICIPATES IN THE 12**PROGRAM SHALL AGREE TO PERFORM DIABETES CARE TASKS FOR WHICH TRAINING** 13 HAS BEEN PROVIDED, INCLUDING: 14**(I)** CHECKING AND RECORDING BLOOD GLUCOSE LEVELS AND 15**KETONE LEVELS OR ASSISTING A STUDENT WITH THESE TASKS;** 16 ADMINISTERING GLUCAGON AND OTHER EMERGENCY **(II)** 17TREATMENTS AS PRESCRIBED; 18 (III) ADMINISTERING INSULIN OR ASSISTING A STUDENT IN THE ADMINISTRATION OF INSULIN THROUGH THE INSULIN DELIVERY SYSTEM THAT THE 19 20STUDENT USES; AND 21(IV) **PROVIDING ORAL DIABETES MEDICATIONS.** 22(4) NOTWITHSTANDING ANY OTHER PROVISION OF LAW, THE 23PROVISION OF DIABETES CARE SERVICES BY A TRAINED DIABETES CARE PROVIDER 24IN ACCORDANCE WITH THIS SECTION MAY NOT BE CONSTRUED AS PERFORMING ACTS OF PRACTICAL NURSING OR REGISTERED NURSING UNDER TITLE 8 OF THE 25**HEALTH OCCUPATIONS ARTICLE.** 2627EXCEPT FOR ANY WILLFUL OR GROSSLY NEGLIGENT ACT, AN (5) EMPLOYEE WHO RESPONDS IN GOOD FAITH TO PROVIDE DIABETES-RELATED 28

HEALTH CARE SERVICES TO A STUDENT IN ACCORDANCE WITH THIS SECTION IS
IMMUNE FROM CIVIL LIABILITY FOR ANY ACT OR OMISSION IN THE COURSE OF
PROVIDING CARE.

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1 (E) (1) THE PARENT OR GUARDIAN OF A STUDENT WITH DIABETES WHO 2 NEEDS DIABETES CARE AT SCHOOL SHALL SUBMIT A DIABETES MEDICAL 3 MANAGEMENT PLAN TO THE SCHOOL.

4 (2) EACH STUDENT'S DIABETES MEDICAL MANAGEMENT PLAN 5 SHALL BE REVIEWED IN A MEETING OF THE FOLLOWING INDIVIDUALS:

- 6 (I) THE PARENTS OR GUARDIANS OF THE STUDENT;
- 7 (II) THE STUDENT;
- 8 (III) THE SCHOOL NURSE;
- 9 (IV) THE STUDENT'S CLASSROOM TEACHER;

10 (V) IF THE PROGRAM HAS BEEN ESTABLISHED AT THE SCHOOL, 11 ALL TRAINED DIABETES CARE PROVIDERS AT THE SCHOOL WHO MAY BE REQUIRED 12 TO PROVIDE CARE TO THE STUDENT; AND

13(VI) ANY OTHER INDIVIDUALS DETERMINED NECESSARY BY THE14SCHOOL.

(3) A DIABETES MEDICAL MANAGEMENT PLAN REVIEW MEETING
 SHALL BE HELD WITHIN 30 DAYS AFTER THE DIABETES MEDICAL MANAGEMENT
 PLAN IS SUBMITTED.

18 (4) IF A STUDENT'S DIABETES MEDICAL MANAGEMENT PLAN STATES 19 THAT THE STUDENT MAY PERFORM SPECIFIED DIABETES CARE TASKS 20 INDEPENDENTLY, THE STUDENT MAY:

(I) PERFORM AUTHORIZED TASKS WHEREVER THE STUDENT
 CONSIDERS NECESSARY, INCLUDING IN THE STUDENT'S CLASSROOM, THE AREA
 DESIGNATED BY THE SCHOOL UNDER SUBSECTION (D) OF THIS SECTION, OR OFF
 SCHOOL GROUNDS;

25 (II) POSSESS AND CARRY ANY SUPPLIES AND EQUIPMENT 26 NECESSARY TO PERFORM DIABETES CARE TASKS; AND

27 (III) POSSESS A CELLULAR PHONE TO ASK FOR ASSISTANCE 28 WHEN NECESSARY.

29 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect July 30 1, 2016.