

1 **5053**

2 **Self Management of Diabetes or Asthma or Severe Allergy and/or**
3 **Anaphylaxis**
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5 Upon receiving the written request of a student’s parent or guardian and the
6 written medical authorization described in the applicable provisions below, the
7 school district will work with the parent or guardian in consultation with
8 appropriate medical professionals to develop a medical management plan for a
9 student with diabetes, asthma, severe allergies, or anaphylaxis (referred to
10 herein as “medical condition”).
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12 A student with diabetes must obtain written authorization to self-manage from the
13 student’s physician. The plan for a student with diabetes will (a) identify the
14 health care services the student may receive at school, (b) evaluate the student’s
15 understanding of and ability to self-manage his or her medical condition, (c)
16 permit regular monitoring of the student’s self management by an appropriately
17 credentialed health care professional, and (d) be signed by the student’s parent
18 or guardian and the physician responsible for the student’s medical condition.
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20 A student with asthma, severe allergy, or anaphylaxis must obtain written
21 authorization to self-manage from the student’s physician or from the health care
22 professional who prescribed the medication for treatment of the student’s
23 condition. The plan for a student with asthma, severe allergy, or anaphylaxis will
24 (a) identify the health care services the student may receive at school, (b)
25 evaluate the student’s understanding of and ability to self-manage his or her
26 medical condition, (c) permit regular monitoring of the student’s self management
27 by an appropriately credentialed health care professional, (d) include the name,
28 purpose, and dosage of the prescription or over the counter asthma medication
29 or anaphylaxis medication prescribed for such student, (e) include procedures
30 for storage and access to backup supplies of such prescription asthma, severe
31 allergy, or anaphylaxis medication, and (f) be signed by the student’s parent or
32 guardian and/or the physician responsible for the student’s medical condition.
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34 The plan will permit the students to self-manage his or her medical condition in
35 any part of the school or on school grounds during any school-related activity, or
36 in a private location. The parent or guardian of a student for whom such a
37 medical management plan has been developed shall sign a statement
38 acknowledging that (a) the school and its employees and agents are not liable for
39 any injury or death arising from a student’s self-management of his or her
40 medical condition and (b) the parent or guardian will indemnify and hold harmless
41 the school district and its employees and agents against any claim arising from a
42 student’s self management of his or her medical condition. The student’s parent
43 or guardian will be personally responsible for any and all costs associated with

44 any injury to school personnel or another student resulting from a student's
45 misuse of necessary medical supplies.

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47 The district may prohibit a student from possessing medical supplies for self-
48 management and may establish other necessary and appropriate restrictions or
49 conditions when the district determines that the student has endangered himself,
50 herself, or others through misuse or threatened misuse of such medical supplies.
51 The district will promptly notify the parent or guardian of any such prohibition,
52 restriction, or condition.

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54 The district may impose disciplinary consequences on a student with asthma,
55 allergies, anaphylaxis, or diabetes who uses his or her medical supplies or
56 medication other than prescribed. These disciplinary consequences shall not
57 include limitations on the student's access to necessary medication. The district
58 will promptly notify the parent or guardian of any disciplinary action imposed.

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