



95TH GENERAL ASSEMBLY

State of Illinois

2007 and 2008

HB5960

by Rep. Tom Cross

SYNOPSIS AS INTRODUCED:

New Act
30 ILCS 805/8.32 new

Creates the Care of Students with Diabetes Act. Requires a diabetes medical management plan to be submitted for any student with diabetes who seeks assistance with diabetes care in the school setting (whether a public or a private school) by the student's parent or guardian. Provides that a school nurse and a volunteer aide shall provide diabetes care for a student only after a student's parent or guardian requests assistance and signs and submits a diabetes medical management plan to the school. Provides for designated diabetes care aides and their training. Sets forth what a student with diabetes must be permitted to do. Requires a school to provide an information sheet to certain school employees concerning a student with diabetes. Provides that a school district may not restrict the assignment of a student with diabetes to a particular school on the basis that the school does not have a full-time school nurse or the required designated diabetes care aides, nor may a school deny access to a student on the basis that a student has been diagnosed with diabetes. Provides for civil immunity, a prohibition on disciplinary proceedings, and rights under federal law. Amends the State Mandates Act to require implementation without reimbursement. Effective immediately.

LRB095 16530 RAS 42561 b

FISCAL NOTE ACT
MAY APPLY

STATE MANDATES
ACT MAY REQUIRE
REIMBURSEMENT

A BILL FOR

1 AN ACT concerning education.

2 **Be it enacted by the People of the State of Illinois,**
3 **represented in the General Assembly:**

4 Section 1. Short title. This Act may be cited as the Care
5 of Students with Diabetes Act.

6 Section 5. Legislative findings. The General Assembly
7 finds the following:

8 (1) Diabetes is a serious chronic disease that impairs
9 the body's ability to use food for energy. In people with
10 diabetes, either the pancreas does not make insulin (Type
11 1) or their body cannot use insulin properly (Type 2).
12 Without insulin, the body's main energy source, glucose,
13 cannot be used to fuel the body, so glucose builds up in
14 the blood, which can, over many years, cause damage to the
15 eyes, kidneys, nerves, heart, and small blood vessels.

16 (2) Diabetes must be managed 24 hours a day in order to
17 (i) avoid the potentially life-threatening, short-term
18 consequences of blood sugar levels that are too low and
19 (ii) prevent or delay the serious complications of blood
20 sugar levels that are too high for too long, which include
21 blindness, amputation, heart disease, and kidney failure.

22 (3) Despite the rights and protections afforded by the
23 Rehabilitation Act of 1973, the Individuals with

1 Disabilities Education Improvement Act of 2004, and the
2 Americans with Disabilities Act of 1990, children with
3 diabetes still face discrimination in school and
4 elsewhere.

5 (4) The rights and protections afforded by these
6 federal laws are not implemented or enforced consistently
7 in schools and school districts throughout Illinois.

8 (5) A school nurse is the most appropriate person in a
9 school setting to provide care for a student with diabetes;
10 however, a school nurse may not always be available when
11 needed and many schools do not have a full-time nurse.

12 (6) Additional school employees must be trained to
13 assist students with diabetes care. By collaborating with
14 parents, schools and school districts can employ a team
15 approach to the care of students with diabetes.

16 (7) Because consistent diabetes care can significantly
17 reduce the risks of serious short-term and long-term
18 consequences and can increase a student's learning
19 opportunities, the General Assembly deems it in the public
20 interest to enact this Act.

21 Section 10. Definitions. In this Act:

22 "Designated diabetes care aide" means a school employee
23 designated by the principal, including without limitation a
24 teacher's aide, a personal aide, a case manager, or another
25 volunteer school employee, who is trained in diabetes care and

1 assists students with diabetes care.

2 "Diabetes medical management plan" means a document that
3 sets out the services needed by the student at school and at
4 school-sponsored activities.

5 "School" means any primary or secondary public, charter, or
6 private school located in this State.

7 "Principal" means the senior administrative executive of a
8 school and includes the principal's designee or designees.

9 "School employee" means a person who is employed by a
10 public school district or private school, a person who is
11 employed by a local health department and assigned to a school,
12 or a person who contracts with a school or school district to
13 perform services in connection with the care of students with
14 diabetes.

15 "School nurse" means a school employee who is a registered
16 nurse and who holds a valid Illinois nursing license.

17 Section 15. Diabetes medical management plan.

18 (a) A diabetes medical management plan must be signed and
19 submitted by a parent or guardian for any student with diabetes
20 who seeks assistance with diabetes care in the school setting.
21 The diabetes medical management plan must be accompanied by
22 proof of diagnosis of diabetes and a prescription or
23 prescriptions, including the name of the medication and the
24 method of administration. Proof shall consist of a statement
25 from a physician licensed to practice medicine in all its

1 branches.

2 (b) The services and accommodations specified in a diabetes
3 medical management plan shall be reasonable, reflect the
4 current standards of diabetes care, and include appropriate
5 safeguards to ensure that syringes and lancets are disposed of
6 properly.

7 (c) A diabetes medical management plan must be submitted to
8 the school at the following time:

9 (1) before or at the beginning of the school year;

10 (2) upon enrollment of a student with diabetes, if the
11 student enrolls in the school after the beginning of the
12 school year;

13 (3) as soon as practicable following a student's
14 diagnosis; or

15 (4) when a student's care needs change during the
16 school year.

17 (d) A school nurse or a designated diabetes care aide shall
18 provide diabetes care for a student only after a student's
19 parent or guardian (i) requests assistance and (ii) signs and
20 submits a diabetes medical management plan to the school.

21 Section 20. Designated diabetes care aides.

22 (a) Upon receipt of a student's completed and signed
23 diabetes medical management plan and in the absence of a
24 full-time school nurse, a school principal shall appoint a
25 designated diabetes care aide to perform the tasks necessary to

1 assist a student with diabetes in accordance with his or her
2 diabetes medical management plan and in compliance with any
3 guidelines provided during training under Section 25 of this
4 Act.

5 (b) The principal shall ensure the school has at least one
6 designated diabetes care aide or one full-time nurse assigned
7 to the school and available during school hours.

8 (c) Designated diabetes care aides shall serve under the
9 supervision of the principal.

10 (d) A school employee must not be subject to any penalty,
11 sanction, or other disciplinary action for refusing to serve as
12 a designated diabetes care aide.

13 Section 25. Training for designated diabetes care aides.

14 (a) If a school nurse is assigned to a school, the school
15 nurse shall coordinate the training of designated diabetes care
16 aides. If a school nurse is not assigned to a school, the
17 principal shall coordinate the training of designated diabetes
18 care aides.

19 (b) Training under this Section may be provided by the
20 following:

21 (1) a licensed health care provider with expertise in
22 diabetes;

23 (2) a school nurse, if he or she has recent and
24 verifiable training in current standards of diabetes care;

25 or

1 (3) the parent or guardian of a student with diabetes.

2 (c) Training must be provided before the beginning of the
3 school year or as soon as practicable following (i) the
4 enrollment of a student with diabetes, if no other student
5 previously enrolled at the school has been diagnosed with
6 diabetes, or (ii) a diagnosis of diabetes for a student
7 enrolled at the school, if no other student enrolled at the
8 school has been diagnosed with diabetes.

9 (d) Training must include all of the following:

10 (1) The details of a student's diabetes medical
11 management plan.

12 (2) How to test blood glucose and record results.

13 (3) How to recognize and respond to the symptoms of
14 hypoglycemia.

15 (4) How to recognize and respond to the symptoms of
16 hyperglycemia.

17 (5) What to do in an emergency, including how to
18 administer glucagon.

19 (6) How to prepare and administer insulin according to
20 the device identified in the student's diabetes medical
21 management plan and keep a record of the amount
22 administered.

23 (7) How carbohydrates, physical activity, and other
24 factors affect blood glucose levels and how to respond when
25 blood glucose levels are outside the target ranges
26 specified in a student's diabetes medical management plan.

1 (e) Training must be provided annually and may be provided
2 as part of in-service training.

3 (f) Training may be provided for other school employees who
4 are not currently serving as designated diabetes care aides, at
5 the discretion of the principal.

6 (g) The principal or school nurse, should one be assigned
7 full-time to a school, shall maintain a copy of the training
8 records.

9 Section 30. Independent monitoring and treatment. In
10 accordance with a student's diabetes medical management plan, a
11 student with diabetes must be permitted to do the following:

12 (1) perform blood glucose tests as needed;

13 (2) administer insulin with the insulin delivery
14 system used by the student;

15 (3) treat hypoglycemia and hyperglycemia and otherwise
16 attend to the care and management of his or her diabetes in
17 the classroom, in any area of the school or school grounds,
18 and at any school-related activity or event; and

19 (4) possess on his or her person, at all times, the
20 supplies and equipment necessary to monitor and treat
21 diabetes, including, but not limited to, glucometers,
22 lancets, test strips, insulin, syringes, insulin pens and
23 needle tips, insulin pumps, infusion sets, alcohol swabs, a
24 glucagon injection kit, glucose tablets, and food.

1 Section 35. Required information for certain school
2 employees. A school shall provide a one-page information sheet
3 to each employee providing transportation for a student with
4 diabetes or supervising a student with diabetes during a
5 school-sponsored activity. The information sheet shall do the
6 following:

7 (1) identify the student with diabetes;

8 (2) identify potential emergencies that may occur as a
9 result of the student's diabetes and the appropriate
10 responses to such emergencies; and

11 (3) provide emergency contact information for the
12 student's parent or guardian.

13 Section 40. Restricting access to school prohibited. A
14 school district may not restrict the assignment of a student
15 with diabetes to a particular school on the basis that the
16 school does not have a full-time school nurse or the required
17 designated diabetes care aides, nor may a school deny access to
18 a student on the basis that a student has been diagnosed with
19 diabetes.

20 Section 45. Civil immunity; prohibition against
21 discipline.

22 (a) A school or a school employee is not liable for civil
23 or other damages as a result of conduct, other than willful or
24 wanton misconduct, related to the care of a student with

1 diabetes.

2 (b) A school employee must not be subject to any
3 disciplinary proceeding resulting from an action taken in
4 compliance with this Act, unless the action constitutes willful
5 or wanton misconduct, as long as the provisions of this Act are
6 met.

7 Section 50. Federal law. Nothing in this Act shall limit
8 any rights available under federal law.

9 Section 90. The State Mandates Act is amended by adding
10 Section 8.32 as follows:

11 (30 ILCS 805/8.32 new)

12 Sec. 8.32. Exempt mandate. Notwithstanding Sections 6 and 8
13 of this Act, no reimbursement by the State is required for the
14 implementation of any mandate created by this amendatory Act of
15 the 95th General Assembly.

16 Section 99. Effective date. This Act takes effect upon
17 becoming law.