

## Managing Student Medical Needs

Managing medical conditions in a way that ensures student safety and complies with the law can be a challenging and sometimes overwhelming responsibility. Here are five tips to help your staff keep kids safe while meeting legal requirements.

- **Identify Students with Medical Needs:** Collect medical information for all students (use registration forms, medical records, etc.), and review this at the beginning of each school year. Once a child has been identified as having medical needs, obtain consent to contact the healthcare provider to learn more about the student's condition and how to meet his or her needs. Meet with parents as soon as possible to develop the plans outlined below, and be sure to update the student's medical records as additional information becomes available.
- **Develop and Implement Legally-Required Plans:** Make sure your staff understands the different plans each child has, as well as when each document should be reviewed and/or amended.
  - *504 Plan:* A 504 plan provides a disabled child with equal access to school events and removes barriers to educational opportunities. This plan specifies the accommodations, modifications, and interventions the student needs to access such events and opportunities to the same extent as non-disabled children. The plan also specifies what the student needs to receive a free appropriate public education. A 504 Plan must be reviewed at least once a year.
  - *Individual Healthcare Plan ("IHCP"):* An IHCP – typically developed by the school nurse in conjunction with parents and outside medical providers – outlines the healthcare services a child receives at school. It describes the child's health needs, lists particular outcome expectations, and specifies a plan for achieving those expectations. A child with a food allergy, for example, may have an IHCP that delineates his or her allergens, signs of a reaction, ways the child alerts others to a reaction, treatment protocols, and emergency contact information. The plan may also include practice procedures for handling field trips, snacks, or food-related classroom activities. To ensure the plan remains current, include review dates in the plan itself.
  - *Emergency Action Plan ("EAP"):* This plan is more specific than an IHP and outlines treatment protocol in case of a medical emergency. An EAP may include: a photo of the student; information about the condition; signs and symptoms of an emergency; a treatment response plan; and contact information. The EAP also usually specifies the individuals responsible for staying with the child, administering medication, contacting 911, and informing the parents. Review this plan at least annually and more often as needed.

In almost all circumstances, a student with an IHCP or EAP will qualify as a student with a disability pursuant to Section 504. As such, the Office for Civil Rights takes the position that districts must conduct a Section 504 evaluation for such students, in advance of developing an IHCP or EAP. Further, OCR prefers that the IHCP or EAP be either incorporated into a student's Section 504 Plan or at least be referenced and attached to it.

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## Student Medical Needs *continued*

- **Plan for Safety and Success:** Thoroughly preparing for an emergency helps your staff remain calm and confident in a crisis.
  - *Policy:* Ensure your district has comprehensive policies and guidelines for identifying children with medical needs; preparing medical plans; storing and administering medication; and responding when an emergency occurs.
  - *Medications:* Medications should be stored in a secure but easily-accessible location, which is known to all staff involved in the student's care and education. Ensure your staff follows board policy when administering medications or allowing students to self-administer. Always document each time a child receives medication and alert parents if appropriate. Monitor expiration dates, and consider asking parents to provide extra dosage just in case (e.g., multiple epinephrine auto-injectors for students with severe allergies).
  - *Environment:* Addressing the student's environment is important in preventing emergencies. Determine what aspects of the student's day can be adjusted to limit the likelihood of a medical event. For example, a school can require classrooms to be free of tree-nut products, or create a daily procedure for monitoring a child's blood-glucose levels.
- **After an Emergency:** Documenting the event – including triggers, time, and location – is critical after an emergency. The team should also review the treatment administered and provide feedback to staff when improvement is needed.
- **Training:** Professional development helps personnel support children effectively, not only during a crisis but also in prevention and monitoring. Annual training should include awareness of the medical condition; strategies to reduce risk; signs and symptoms of a medically-significant event; ways to maintain an inclusive environment while complying with confidentiality rules; and EAP requirements. Be sure to include bus drivers, chaperones, after-school staff, and substitutes in your district's training. Additionally, consider periodic emergency response drills to ensure staff is familiar with protocols and responds well in a crisis. Note that Revised Code 3313.713 allows staff to administer medications only if they have been trained in drug administration by a licensed health professional, who has also been approved by the school board.

Every district educates children with serious medical needs. Following the above steps will help your team support students not only in a crisis, but also in day-to-day learning and academic success.

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## Recent and Pending Legislation Related to Student Medical Needs

### House Bill 296:

Unanimously passed in early April, this bill allows schools to stock epinephrine, and to accept free or reduced price epipens from medical supply companies. The bill also grants immunity from civil lawsuits to school and camp employees who handle or administer such medications. The Governor signed this bill on April 21, 2014.

### House Bill 264:

A more controversial initiative, this bill requires districts to provide specific diabetes care to all children with that condition. Required care would include glucose monitoring, administering insulin, and training other employees to recognize and address diabetes-related emergencies. Opponents argue that a one-size-fits-all bill is inappropriate and exceeds existing legal mandates.



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