

Students

MOUNT PLEASANT COTTAGE SCHOOL UNION FREE SCHOOL DISTRICT**SUBJECT: LIFE-THREATENING HEALTH CONDITIONS**

<u>Responsibility</u>	<u>Action</u>
Principal/Nurse/Building Secretary	1) a. Provides all staff with information regarding Signs and Symptoms of Common Health Concerns. b. At registration, provides all parents with Form # 7521F -- <u>Life-threatening Health Conditions</u> .
Parent/Person in Parental Relation	2) a. Upon enrollment, or initial diagnosis, advises District of student's life-threatening health condition. b) Notifies school or program of any health or activity related changes. (i.e., notify School Office and coach/advisor about allergy if starting a new after school sport or activity.)
Principal/Nurse/Building Secretary	3) Upon notice from parent/person in parental relation or other party of possible existence of a student's life-threatening health condition, provides parent/person in parental relation with "Life-threatening Health Conditions Packet" which includes: <ul style="list-style-type: none"> <li>a. Form #7521F -- <u>Life-threatening Health Conditions</u>,</li> <li>b. Applicable student Emergency Care Plan,</li> <li>c. Form #7513F -- <u>Parent and Prescriber's Authorization for Administration of Medication in School</u>,</li> <li>d. Form #7513F.2 -- <u>Medication Incident Report Form</u>,</li> </ul>

(Continued)

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**SUBJECT: LIFE-THREATENING HEALTH CONDITIONS (Cont'd.)**

<u>Responsibility</u>	<u>Action</u>
Principal/Nurse/Building Secretary (Cont'd.)	<p>e. Appropriate informational materials.</p> <p>4) Immediately notifies Principal and/or Nurse regarding student with possible life-threatening health condition.</p>
Parent/Person in Parental Relation	<p>5) Returns completed forms and other applicable information to School Nurse/School Office.</p>
School Nurse	<p>6) a. Reviews student Emergency Care Plan (ECP), medication, and other information; evaluates and clarifies as needed.</p> <p>b. Copies all appropriate parties (at least: School Office, Principal, parent/person in parental relation, teacher, nutrition services). Copies transportation department if student rides the bus.</p> <p>c. Notifies CSE Chairperson or Section 504 Compliance Officer of potential need for evaluation. Develops Individualized Healthcare Plan (IHP) as needed.</p> <p>d. Personally introduces students with life-threatening allergy to all kitchen staff prior to eating a meal with the breakfast and/or lunch program.</p> <p>e. Ensures that student Emergency Care Plans are posted/held in standard locations: School Office, teachers' substitute folder, in kitchen by phone and on hot box.</p>

(Continued)

Students

**SUBJECT: LIFE-THREATENING HEALTH CONDITIONS (Cont'd.)**

<u>Responsibility</u>	<u>Action</u>
School Nurse (Cont'd.)	f. Conducts EpiPen/EpiPen/Twinject training for all appropriate staff. Training/refresher covered annually.  g. Completes Anaphylaxis Protocol for Non-Licensed School Staff Members (Form #7521F.1).
Teacher/School Office Staff	7) Participates in one emergency practice drill at least once and as early in the school year as possible. Uses School Nurse as a resource. Adjusts/improves plan if necessary.
Nurse/School Office/Principal/ Parent/Person in Parental Relation/Teacher	8) Requests modifications in student Emergency Care Plan and accommodations as needed.
Teacher	9) a. Notifies parent/person in parental relation if allergen is to be used in a classroom activity (art activity, science kits, etc.) Makes accommodations as necessary.  b. Completes Field Trip Checklist for Life-Threatening Health Conditions (Form #7521F.2) prior to leaving for field trip.
Principal/Nurse//Teacher	10) For a student with an allergy, sends letter to classmates' parent/person in parental relation (Form #7521F.3 -- <u>Parent Letter Regarding Classmates with Life-Threatening Allergy</u> ).