

AN ACT

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IN THE COUNCIL OF THE DISTRICT OF COLUMBIA

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To permit, on a temporary basis, a student with a medication action plan to possess and self-administer asthma or anaphylaxis medications while at the school in which the student is currently enrolled, at school-sponsored activities, and while on school-sponsored transportation, to require schools to maintain student medical records in an easily accessible location, to prohibit the misuse of self-administered medications, to allow schools to store additional medication for self-administering students, and to authorize the Mayor to promulgate rules to implement the provisions of this act.

BE IT ENACTED BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this act may be cited as the “Student Access to Treatment Temporary Act of 2007”.

Sec. 2. Definitions.

For the purposes of this act, the term:

(1) “Medication action plan” means a written medical treatment plan for an individual student with prescription medication that is developed and submitted to a school in accordance with section 4.

(2) “Responsible person” means, in the case of a student under 18 years of age, a parent, legal guardian, legal custodian, foster parent, or other adult charged with the ongoing care and supervision of the student, and in the case of a student 18 years of age or older, the student himself or herself.

(3) “School” means:

(A) Any public school operated under the authority of the Mayor of the District of Columbia; and

(B) Any charter school, parochial school, or private school in the District.

Sec. 3. Possession and self-administration of medication.

A student may possess and self-administer medication at the school in which the student is currently enrolled, at school-sponsored activities, and while on school-sponsored

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transportation, to treat asthma, anaphylaxis, or other potentially life-threatening illness; provided, that:

(1) The responsible person has submitted a valid medication action plan to the school; and

(2) All other conditions set forth in this act, or in rules promulgated pursuant to this act, are met.

### Sec. 4. Medication action plan.

(a) No student shall possess or self-administer medication at the school in which the student is currently enrolled, at school-sponsored activities, or while on school-sponsored transportation, unless the school has a valid medication action plan for that student.

(b) A valid medication action plan shall include:

(1) Written medical authorization, signed by the student's health practitioner, that states:

(A) The name of the student;

(B) Emergency contact information for the responsible person;

(C) Contact information for the health practitioner;

(D) The name, purpose, and prescribed dosage of the medication;

(E) The frequency that the medication is to be administered;

(F) The possible side effects of the medication;

(G) Special instructions or emergency procedures; and

(H) In the case of self-administered medication, confirmation that the student has been instructed in the proper technique for self-administration of the medication and has demonstrated the ability to self-administer the medication effectively;

(2) Written authorization, signed by the responsible person, that states:

(A) A trained school employee may administer medication to the student in accordance with rules established by the Mayor; or

(B) In the case of self-administration, the student may possess and self-administer the medication at the school in which the student is currently enrolled, at school-sponsored activities, and while on school-sponsored transportation; and

(3) Written acknowledgment that the school and its employees shall incur no liability and that the responsible person shall indemnify and hold harmless the school and its employees against any claims that may arise relating to the administration, general supervision, training, administration, or self-administration of the authorized medication.

(c) Within 30 days of any changes in the student's health that affect the medication action plan, the responsible person shall revise the medication action plan and submit the amended plan to the school.

(d) The medication action plan shall be updated at least annually, in accordance with a schedule determined by the Mayor.

(e) A school may deny a medication action plan, pursuant to terms established by the Mayor.

**Sec. 5. Maintenance of records.**

(a) A school shall keep the medication action plan in the school health suite, or other designated, easily accessible location.

(b) A school shall create and maintain a list of students with valid medication action plans, including the emergency contact information for each student. The principal of the school may distribute this list among appropriate school employees.

(c) Each school that has a student with a medication action plan for self-administration may schedule a meeting at the beginning of the school year with the school nurse, the principal, the student, the responsible person, and any other appropriate school staff to review the student's medication action plan. Authorization to possess and self-administer previously approved medication shall not be dependent on having had this meeting.

**Sec. 6. Storage of medication.**

(a) A school may receive additional medication from the responsible person for a student with a valid medication action plan; provided, that no school shall be required to store more than a 30-school-day supply of medication for any one student.

(b) Additional medication shall be:

(1) Properly stored at the school in a location to which the student has immediate access in case of an emergency; and

(2) Labeled with the name of the student and the name of the medication, including the dosage, the frequency of administration, and the duration of the medication.

**Sec. 7. Misuse.**

A student who self-administers medication while at school, at a school-sponsored activity, or while on school-sponsored transportation for a purpose other than his or her own authorized treatment may be subject to disciplinary action by the school; provided, that disciplinary action shall not limit or restrict the access of a student to his or her prescribed medication. The school shall promptly notify the responsible person of any disciplinary action imposed.

**Sec. 8. Liability waiver.**

(a) No school nor any employee or agent of a school shall be held liable for the good-faith performance of responsibilities under this act.

(b) Except as provided in subsection (a) of this section, nothing in this act shall be interpreted to create a cause of action or to increase or diminish the liability of any person.

Sec. 9. Rules.

(a) The Mayor, pursuant to Title 1 of the District of Columbia Administrative Procedure Act, approved October 21, 1968 (82 Stat. 1204; D.C. Official Code § 2-501 *et seq.*), shall issue rules to implement the provisions of this act.

(b) The Mayor may establish, by regulation, additional types of medication a student may self-administer and potentially life-threatening illnesses for which a student may self-administer medication other than those provided in this act.

Sec. 10. Fiscal impact statement.

The Council adopts the fiscal impact statement of the Budget Director as the fiscal impact statement required by section 602(c)(3) of the District of Columbia Home Rule Act, approved December 24, 1973 (87 Stat. 813; D.C. Official Code § 1-206.02(c)(3)).

Sec. 11. Effective date.

(a) This act shall take effect following approval by the Mayor (or in the event of veto by the Mayor, action by the Council to override the veto), a 30-day period of Congressional review as provided in section 602(c)(1) of the District of Columbia Home Rule Act, approved December 24, 1973 (87 Stat. 813; D.C. Official Code § 1-206.02(c)(1)), and publication in the District of Columbia Register.

(b) This act shall expire after 225 days of its having taken effect.

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Chairman  
Council of the District of Columbia

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Mayor  
District of Columbia