SECTION 1 – DIABETES OVERVIEW

II. Effective Diabetes Management in Schools

A. Effective Diabetes Management

The goal of effective diabetes management is to control blood glucose levels by keeping them within a target range that is determined for each child. Optimal blood glucose control helps to promote normal growth and development and allows for optimal learning. Effective diabetes management is needed to prevent the immediate dangers of blood glucose levels that are too high or too low.

The key to optimal blood glucose control is to carefully balance food, exercise and insulin or medication. As a general rule, food makes blood glucose levels go up and exercise and insulin make blood glucose levels go down. Several other factors, such as growth and puberty, mental stress, illness or injury also can affect blood glucose levels.

Students with diabetes must monitor their blood glucose levels throughout the day by using a blood glucose meter. The meter gives a reading of the level of glucose in the blood at the time it is being checked. If blood glucose levels are too low (hypoglycemia) or too high (hyperglycemia), students can then take corrective action such as eating, modifying their activity level or administering insulin. Low blood glucose levels can be life-threatening and present the greatest immediate danger to people with diabetes (see Hypoglycemia, page 10).

Many students can handle all or almost all of their diabetes care by themselves. Others, because of age, developmental level or inexperience, will need help from school staff. The school nurse is the most appropriate person in the school setting to provide care for a student with diabetes. However, diabetes management is needed 24 hours a day, 7 days a week and diabetes emergencies can happen at any time. More importantly, the school nurse may not always be available. Therefore, local and regional boards of education should identify appropriate school personnel to be prepared to respond to emergencies at school and at all school-sponsored activities in which a student with diabetes participates. In this case, the school nurse should ensure proper training of “qualified school employees” and provide professional supervision and consultation regarding routine and emergency care of the student.

Students who self-administer their own medications may carry their supplies with them at all times, and be permitted to administer their insulin anywhere in the school setting and at school sponsored events. These students must not be required to go to a specific location, such as the health office, to self-administer their insulin or perform any other aspect of their diabetes management. Students should be provided a private area to administer insulin if requested by the student. Students should be reminded to utilize standard precautions and of their need to be responsible for their supplies including proper disposal of sharps. Such students should have written Emergency Action Plans based on the Diabetes Management Plan (DMP) for personnel to follow in the event they may need assistance.

B. Written Diabetes Management Plan
A written DMP is required to safely and effectively support all students with diabetes. When nurses provide care to students with diabetes, parents/guardians usually consult with, advise and have regular communications with the nurse regarding their child’s health condition, glucose or ketone monitoring, dietary intake (including carbohydrates), physical activities, emergency care and notifications or other health matters. When a parent/guardian requests that school personnel ensure that their child receive specific types or amounts of carbohydrates or additional snacks at a specific time, the school must consider the parent/guardian’s request to the extent it is timely and relevant, along with other relevant health information (such as medical orders) and make appropriate decisions regarding the student’s care. Likewise, health care providers of students with diabetes must specify in writing to the school, where appropriate, that the parent/guardian is sufficiently trained and experienced in adjusting the insulin dose of the student for the parent/guardian to propose adjustments of insulin administration during school time hours and at school-sponsored events. A sample form is provided for this purpose (see *Addendum B: Diabetes Management Plan – Role of Parents/Guardians in Adjustment of Insulin Dose*). Please note that the student’s DMP must be accompanied by a physician order that authorizes the school nurse to make dosage adjustments within the same range(s) that the student’s health care provider authorizes for the parent/guardian to propose, so that a nurse may exercise her professional judgment.

Providers may not write orders that state the licensed health professional is to contact the parent regarding medication or other diabetes management procedures, unless the orders only allow the parent to provide proposed adjustments or dosages and require the health care professional to make the ultimate decision after exercising his/her professional judgment. In Connecticut a licensed nurse may only administer medications or nursing treatments based on an order from a duly licensed provider (Connecticut General Statutes, Section 20-87a). The form for this purpose is titled: *Addendum B: Diabetes management Plan - Role of Parents/Guardians in Adjustment of Insulin Dose*, and is part of the student’s DMP. Additionally, provider written orders instructing schools to consult with a parent/guardian for a dosage, when to give a medication, etc., are not acceptable orders unless the written orders only allow the parent to provide proposed adjustments or dosages and require the health care professional to make the ultimate decision after exercising his/her professional judgment. The form for this purpose is titled: *Addendum B: Diabetes management Plan - Role of Parents/Guardians in Adjustment of Insulin Dose*, and is part of the student’s DMP.

C. Planning and Implementing Effective Diabetes Management

Collaboration, cooperation and planning are key elements in developing and implementing successful diabetes management at school. **As is true for children with other chronic diseases, students with diabetes are more likely to succeed in school when students, parents, school nurses, principals, teachers, other school personnel and the student’s health care providers (or personal health care team) work together to ensure effective diabetes management.**
Local school districts probably have similar plans and systems in place for children with other health considerations.

To work collaboratively, the school district should assemble a school team that includes people who are knowledgeable about diabetes, the school environment and federal and state education and nursing laws. Team members may include the student, parents/guardian, the school nurse, school food service and other health personnel, administrators, the principal, the student’s teacher(s), guidance counselor and other relevant staff.

This team works together to implement the recommendations developed by the student’s personal health care team and family. The team decides who needs to receive appropriate medical information about the child and who will be trained by the nurse to assist with monitoring and performing certain tasks. In addition, the school team should be part of the group that develops and implements the student’s Individual Health Care Plan (IHCP), Emergency Care Plan (ECP), Section 504 Plan (if needed), Individualized Education Program (IEP) or other education plan that addresses the student’s developmental and educational needs so that diabetes can be managed safely and effectively in school. The plan is based in part on the student’s medical recommendations, sometimes called a DMP, as well as recommendations from the team.

SECTION 3: SUGGESTED ROLES AND RESPONSIBILITIES OF SCHOOL PERSONNEL

The following suggested roles and responsibilities were adopted from Helping the Student with Diabetes Succeed from the National Diabetes Education Program. School districts may find them helpful in understanding the roles and responsibilities of the various school personnel who may be involved in creating a safe learning environment for students with diabetes.

As noted in the introduction, the school health team, which includes the school personnel mentioned in the following pages, plays an important role in helping students manage their diabetes. It is very important that the student, parent/guardian, school staff (including school health professionals) and the student’s physician or other health care provider agree on a clinically sound DMP for the student, which can reasonably be implemented in a school setting. Good communication, cooperation and coordinated planning among the student, parent/guardian, school staff (including school health professionals) and the student’s physician or other health care provider are critical to ensure that the student receives optimal care and can participate in school activities as fully as possible. It may be a reasonable modification, where requested, for parents/guardians to speak to their child during the school day, whether through a cell phone provided to the child, or otherwise through a school phone, consistent with the school policies on cell phone use and the student’s IEP or 504 plan, for the purpose of determining their recommendations to be made to the school nurse.
Actions for the School Nurse

**IMPORTANT NOTE:**

Under Connecticut law, a registered professional nurse has the obligation to exercise his/her professional judgment in making decisions regarding health care provided to students in school. The sound exercise of professional nursing judgment requires, among other things, that a nurse gather all relevant information to the extent possible. As the parent/guardian of a student with diabetes typically will have information that is highly relevant to decisions regarding the administration of the student’s diabetes medication, the nurse’s decisions regarding the administration of diabetes medication will typically require consideration of information obtained from the parent/guardian.

Accordingly, a parent/guardian has the right to and should provide relevant and timely information regarding daily decisions as to dosage and timing of diabetes medication consistent with medical orders prescribed by a legally authorized prescriber, understanding that the nurse retains his/her professional judgment regarding the medication he/she administer(s). While a parent/guardian’s provision of information regarding diabetes medication is not the same as a “medical order” for diabetes care (unless the parent/guardian is an authorized prescriber), such information, when provided by the parent/guardian, must be taken into consideration by a nurse when using his/her professional medical judgment.

- Obtain and review the student’s current diabetes medical plan from the student’s health care provider and pertinent information from the student and family.
- Facilitate the initial school health team meeting.
- Conduct a nursing assessment of the student and develop an Individualized Health Care Plan (IHCP) that incorporates the student’s diabetes care regimen as prescribed by the student’s diabetes medical management plan or healthcare provider’s orders.
- Conduct ongoing, periodic assessments of the students with diabetes and update the nursing care plans.
- Coordinate development of the student’s IHCP and Emergency Care Plan (ECP) and provide copies to staff members who have responsibility for the student throughout the school day (e.g. teachers, counselor, physical education (PE) instructor and lunchroom staff).
- Obtain materials and medical supplies necessary for diabetes care tasks from the parent(s)/guardian(s) and arrange a system for notifying the student or parent(s)/guardian(s) when supplies need to be replenished.
• Plan and implement diabetes management training for appropriate staff (including glucagon administration for identified staff).
• Participate in diabetes management training.
• Review information about diabetes in this guide.
• Perform routine and emergency diabetes care tasks, including blood glucose monitoring through traditional blood glucose testing or through the use of a continuous glucose monitor that may display data on either an insulin pump, a dedicated receiver, or a smartphone app, urine ketone testing, insulin administration and glucagon administration.
• Practice universal precautions and infection control procedures during all student encounters.
• Maintain accurate documentation of contacts with students and family members.
• Collaborate with other co-workers, e.g., food service and school bus transportation services, as necessary to provide appropriate health care services.
• With parental permission, act as liaison between the school and the student’s health care provider regarding the student’s self-management at school.
• Communicate to parent(s)/guardian(s) any concerns about the student’s diabetes management or health, such as acute hypoglycemia episodes, hyperglycemia, general attitude and emotional issues.
• Promote and encourage independence and self-care consistent with the student’s ability, skill, maturity and developmental level.
• Respect the student’s confidentiality and right to privacy.
• Act as an advocate for students to help them meet their diabetes health care needs.
• Provide education and training on diabetes management and emergency procedures and act as a resource on managing diabetes.
• Assist the classroom teacher with developing a plan for substitute teachers.
• Assist the physical education instructor with managing the student’s exercise program at school.
• Be knowledgeable about federal, state and local laws and regulations that pertain to managing diabetes at school.
• Assist student with blood glucose monitoring through traditional blood glucose testing or through the use of a continuous glucose monitor that may display data on either an insulin pump, a dedicated receiver, or a smartphone app.

**Actions for Parents or Guardians**

• Although the local school district has the responsibility to identify students with disabilities under Section 504 of the Rehabilitation Act, it is strongly recommended that you inform the school nurse or other appropriate school staff that your child has diabetes.
• Provide accurate and emergency contact information and ensure it is always up to date.
- Provide a DMP to the school nurse that has been completed and signed, as appropriate, by the parent and the student’s healthcare provider.
- Attend and participate in initial and annual meetings of the school health team.
- Provide specific information about your child’s diabetes.
- Permit sharing of medical information necessary for the student’s safety between the school and the student’s personal health care providers.
- Inform the school staff of any changes in the student’s health status.
- Provide all supplies, equipment and snacks necessary for implementing your child’s diabetes management.
- Provide and maintain all supplies, equipment and snacks necessary to accommodate the student’s long-term needs in case of an emergency.
- Inform appropriate school staff when the student plans to participate in school-sponsored activities that take place before or after school so that health care coverage can be coordinated to ensure the health and safety of the student with diabetes.