Administrative Procedures for Diabetes Management
(Attachment for Policy No. 209.2)

Purpose

In a supportive school environment, where school personnel understand the needs of students with diabetes and can respond appropriately in emergency situations, students can manage their diabetes effectively throughout the school day and at school-sponsored activities.

The Board of Education recognizes that an effective program of diabetes management in school is crucial to:

1. Ensuring the immediate safety of students with diabetes.
2. Supporting efforts to maintain the long-term health of students with diabetes.
3. Ensuring that students with diabetes are ready to learn and participate fully in school activities.
4. Minimizing the possibility that diabetes-related emergencies will interfere with instructional time.
5. Ensuring that schools are complying with state and federal laws and regulations, in the care of students with diabetes.

Definitions

For purposes of these administratives procedures, terms are defined as follows:

**Type 1 Diabetes:** An autoimmune disease characterized by a severe deficiency in natural insulin secretion resulting in high blood glucose levels in the blood and the need to administer injectable insulin on a daily basis.

**Hypoglycemia:** A low level of glucose (sugar) in the bloodstream. Symptoms may include a combination of shakiness, dizziness, sweating, irritability, confusion, anxiety, inability to concentrate.

**Hyperglycemia:** An excess of glucose (sugar) in the bloodstream. Symptoms may include a combination of increased thirst and frequent need to urinate, blurred vision, fatigue, headache, dry mouth, nausea/vomiting, weakness, confusion, fruity smelling breath.

**Diabetic Ketoacidosis:** A dangerous and potentially life-threatening complication of diabetes mellitus due to catastrophically high glucose levels in the blood due to severe insulin deficiency.

**Diabetes Medical Management Plan (“DMMP”):** A collection of documents describing the medical orders or diabetes regimen developed and signed by the student's health care practitioner and parent/guardian.
**Emergency Care Plan (“ECP”):** A plan based on the information provided in the student’s Individualized Health Care Plan. The school nurse usually coordinates the development of the Emergency Plan and the plan will be distributed to all school personnel who have responsibility for the student.

**Individualized Education Program (“IEP”):** A written educational statement specific to each student with a disability requiring special education. The IEP is developed, reviewed, and revised in accordance with federal and state laws and regulations.

**Section 504 Service Agreement:** An individualized plan for a qualified student, which sets forth the specific related aids, services, or accommodations needed by the student, which shall be implemented in school, in transit to and from school, and in all programs and procedures so that the student has equal access to the benefits of the school’s educational programs, nonacademic services, and extracurricular activities.

**A qualified student with a disability:** A student with a disability is a school-aged child within the jurisdiction of the District who has been evaluated and found to have one or more disabilities as defined by law, and who requires, because of such disabilities, special education and related services.

**Procedures**

The District recognizes the necessity to create procedures for the identification and care of students with diabetes. The focus of this care shall be education, awareness, communication, and emergency response to hyperglycemia or hypoglycemia. Board Policy 209.2 is the basis for the development of these administrative procedures.

**Identification of students with diabetes**

At the beginning of each new school year, all parents are required to complete and submit the Student Emergency/Medical Information form (S-865) to the school. Among other things, this form delineates a student’s health conditions and medications prescribed for their management.

**Development and implementation of individual DMMPs or other necessary plans of care**

Upon receiving medical documentation from the parents regarding the diagnosis and management of diabetes, the certified school nurse (“CSN”) will ensure that the DMMP is created and maintained at the school. DMMP must include the following:

1. MED-1 Form;
2. Student Emergency/Medical Information form (S-865);
3. Emergency Care Plan;
4. Section 504 Plan and/or medical portion of the student’s IEP; and
5. A statement relieving the District and its employees of responsibility for the prescribed medication or monitoring equipment and acknowledging that the school is not responsible for ensuring that the medication is taken or the monitoring equipment is used.

Medication protocols, including methods of storage, access, and administration

The CSN will receive the medication, equipment, and/or machinery from the parent in accordance with safe standards which include proper labeling and packaging by the pharmacy. The CSN will document the date of receipt, name of child, name and amount of medication, and signatures of the persons who delivered and who received the medication on a MED-4 form.

Storage of medication must be in a secure area which meets the following criteria:
- Medication and supplies (such as syringes) must be stored in a locked cabinet (preferably in the health office) which is convenient to the person responsible for administering the medication.
- Medication requiring refrigeration will be stored in the refrigerator in the school health room.

In the provision of student health services, the CSN and other relevant school staff shall follow the requirements set forth in a student’s DMMP.

Student possession and use of diabetes medication and monitoring equipment

It is also permissible for students who require insulin and who are capable of self-administering, in accordance with the competency-based Self Medication Assessment Tool, to carry the medication and associated medical supplies. Students and/parent/guardians must comply with the requirements of Board Policy 210.1 - Possession/Use of Emergency Medications and its administrative procedures.

Communication between the school personnel, the student’s family, and medical provider in an environment of complete confidentiality

In an effort to maintain a student’s health and safety, each student’s individualized plan will indicate what information will be provided to school staff and other adults who have responsibility for the student in the school setting. Student health records shall be confidential and maintained in accordance with state and federal laws and regulations.

Parent/Guardian Responsibilities:
- Inform the school nurse that the student has diabetes when he/she enrolls in the school or is newly diagnosed with the disease and provide the following:
  - Accurate and up-to-date contact information to reach parents/guardians
  - Documentation of the diagnosis of diabetes which may be submitted as part of a student's Diabetes Medical Management Plan (DMMP).
  - Written medication orders for insulin and any other medications or related supplies from a licensed medical provider. The CSN cannot take verbal orders
from any medical provider or parent. Parents and guardians may not change the written medication orders of the medical provider.

- MED-1 forms must be renewed at least annually.

- Parents who intend to accompany the student on field trips for the purpose of administration of the student’s medication must communicate that intent and comply with Board Policy 121 - Field Trips, Social Events, and Class Trips and its administrative procedures.

Certified School Nurse Responsibilities:

- Obtain materials and medical supplies necessary from the parent/guardian and arrange a system for notifying the student or parents/guardian when supplies need to be replenished.
- Maintain accurate documentation of contacts with the student and family members, communications with the student’s healthcare provider, and any direct care given, including medication administration.
- Act as a liaison between the school and the student’s healthcare provider regarding the student’s self-management at school and communicate to parents/guardians any concerns about the student’s diabetes management.

School Principal Responsibilities:

- Allot time during professional development for the CSN to address staff regarding diabetes management.
- Ensure contingency plans are in place to continue care of the student in the case of a substitute teacher.
- Designate the CSN as the resource for families and staff regarding their concerns.

Emergency response protocols

School-based Emergency Medical Response Plan
Medical emergency responses should follow the procedures set forth in the Emergency Response Flip Chart that are to be maintained in each classroom, the main office, principal’s office, and the school health room.

Return to School
In the event of an diabetes related event that warrants activation of an Emergency Response, the following actions should be implemented by the Office of Student Health Services in collaboration with the CSN and the principal in order to prepare for the child’s successful return to the classroom:

- Identify, if possible, the events that lead up to need for an Emergency Response
- Review accurate and updated information on the student’s medical regimen including any new medication(s) or changes in medication doses which would require new consent forms to be signed by the parents.
- Review of the ECP, IHP, IEP and/or the 504 Plan and amend to address any changes that were made by the student’s healthcare provider.
Identify and interview those who were involved in the emergency care of the student and those that witnessed the event.

Meet with school staff to dispel any rumors and review administrative procedures.

Provide factual information, as deemed necessary, to parents of the student’s classmates that complies with FERPA and does not identify the individual student.

In the event of a fatal event:

- Implement the school’s crisis plan for the death of a student. Resources for this can be found on the District’s Crisis Response webpage.
- Consider providing counselors to support staff and students.

Professional development and training for school personnel

The Office of Student Health Services, in conjunction with other appropriate central offices, will coordinate employee training about the signs, symptoms, and behavioral changes of both hypoglycemic and hyperglycemic episodes related to a student’s diagnosis of diabetes including topics identified in PA Department of Health Diabetes in School Children: Recommendations and Resource Guide for School Personnel.

Maintenance Schedule

These administrative procedures will be reviewed upon policy renewal, or in the case of a triggering event, and include:

- A review of the current science on management of diabetes in the school setting.
- A review of the school district’s annual incident report summaries.
- A review of current policies and administrative procedures.

Related Information

Policies

Policy 121 - Field Trips, Social Events, and Class Trips
Policy 145 - Student and Staff Wellness
Policy 210 - Administration of Medication/Medical Technology
Policy 210.1 - Possession/Use of Emergency Medications

Forms

S-865 Emergency Medical Information form
Medical Plan of Care for Food Service form
Self Medication Assessment Tool
MED-1 form
MED-4 form