

# NASHOBA REGIONAL SCHOOL DISTRICT

## DIABETES PROTOCOL

Diabetes is a chronic disease in which the body does not make enough or properly use insulin, a hormone that allows cells to use glucose for energy. There are two types of Diabetes, **Type 1 and Type 2**.

**Type 1** Diabetes is a disease where the body can no longer produce insulin and therefore needs to receive the insulin through injections. This type can develop at any age, but it most often appears in children and young adults. The symptoms develop rapidly and can, if untreated, become life threatening.

**Type 2** Diabetes is due to the body's inability to utilize insulin. Type 2 has been associated with older age groups although more children and young adults are now being diagnosed with this type of diabetes as a result of increasing obesity rates among children. Type 2 diabetes can be controlled by oral medication, insulin, or both. The symptoms can be the same as Type 1, but may not manifest themselves as quickly. Because of the insidious onset, students may not have been diagnosed as Type 2 and their condition may not have come to the attention of school staff.

This protocol focuses primarily on the management of the student who is likely to have a diabetic emergency need while in school, whether Type 1 or Type 2. It is anticipated that most students with emergent needs will be Type 1. All type 1 students **MUST** have individual health care plans (IHCPs) as described in this protocol.

### **Role of the Parent/Guardian**

-At the time of registration, the parent/guardian will provide Nashoba Regional School District with medical documentation of the existence of the diagnosis of Diabetes Type 1 or Type 2.

-Provide the school nurse with appropriate releases for nurse/health care provider communication, physician authorization for medication; *Diabetes Medical Management Plan* from the physician; and collaborate with school nurse on the *Individual Health Care Plan*.

-All insulin orders must be in writing and signed by a Licensed Physician or Nurse Practitioner, renewed annually at the start of each school year, and updated as needed.

-Determination or adjustment of insulin is per order of a Licensed Physician or Nurse Practitioner and NOT by a parent or guardian, unless orders indicate parental preference within the parameters of the specific order.

-Participate in the action plan for their student.

-Inform the bus driver of any emergency measures (call 911).

-Educate before-school and after-school activities personnel about the diabetic management plan and provide plan as necessary.

-Parent/guardian should provide an emergency supply kit for use in the event of natural disasters or emergencies when students need to stay in school. This kit should contain enough supplies for at least 24 hours to carry out the medical orders. Parents should be responsible for restocking any used items and ensuring items with expiration dates are up to date. The kit may include:

- Blood glucose meter, testing strips, lancets, and batteries for the meter
- Urine and/or blood ketone test strips and meter
- Insulin, syringes, and/or insulin pens and supplies
- Insulin pump and supplies, including syringes, pens, and insulin in case of pump failure (depending if the student uses a pump)
- Other medications
- Antiseptic wipes
- Quick-acting source of glucose
- Carbohydrate-containing snacks with protein
- Hypoglycemia treatment supplies (enough for three episodes): quick-acting glucose and carbohydrate snacks with protein
- Glucagon emergency kit
- Water

-Provide parent/guardian emergency numbers and no less than two back up numbers to call if parents/guardians are not reachable.

#### **Role of the School Nurse:**

-Develop an *Individual Health Care Plan* with parent/guardian/student or *Diabetes Medical Management Plan* (See Appendix A). Plans should include the specifics of a diabetes management plan. The nurse should follow the Protocol and Procedure Guidelines for Diabetes Management in *The Massachusetts Guide to Managing Diabetes in Schools* to develop the Individual Health Care Plan.

-Develop a plan for student management during the school day that provides for routine and emergency diabetes care tasks. These would include blood glucose monitoring, urine/blood ketone testing, insulin administration, glucagon administration, and assistance with carbohydrate counting.

-All routine blood glucose testing will be conducted in the Health Office during school hours unless there is medical documentation that indicates that the child can perform the procedure independently outside the health office.

-In the event of a field trip, arrangements for routine blood glucose testing will be made prior to the date of the event.

-Ensure that all other staff members who have contact with students with diabetes are familiar with their Individual Health Care Plans (IHCPs) on a need-to-know basis.

-Provide a list of students with diabetes (if consent given by parent) to all staff on a need-to-know basis.

-Conduct in-service training and education for appropriate staff regarding a student's symptoms, risk reduction procedures, emergency procedures, and appropriate responses to symptoms of diabetic emergencies.

-Communicate with parents on a regular basis to discuss issues relating to plan.

-Encourage the students to eat all meals and snacks fully and on time. Be flexible with time requirements for eating.

-Contribute to IEP and/or 504 implementation with diabetes related issues, where appropriate.

### **Student Self-Management**

Diabetes care depends upon self-management. Students should have the right to self-manage, when appropriate. The age at which a child can self-manage his/her disease varies from student to student and from task to task because children develop and mature at different rates. A student's ability to participate in self-care also depends upon his/her willingness to do so.

### **Role of the School Administrator**

- Support faculty, staff and parents in implementing all aspects of the Diabetes Medical Management Plan.

-Insure emergency communication devices (two-way radio, intercom, Walkie-talkie, cell phone) are available for all school activities, including transportation, that involve a student with Diabetes.

-Include School Nurse in all IEP and 504 Meetings.

### **Role of the Teacher**

-Have a list of all students in classroom with chronic diseases including Diabetes.

-Participate in team meeting for student with diabetes.

-Keep the student's emergency plan with photo (when possible) accessible in classroom (with parent's permission) for teacher and substitute use.

-Inform volunteers, student teachers, aides, specialists and substitute teachers about the student's condition both through verbal communication and in an organized, prominent and accessible written format.

-Support student in participating in all school-sponsored activities.

-Inform parents and school nurse regarding field trips.

-In order to include all students – the teacher must notify the parent/guardian in the event food is to be used as a activity. Teachers must refer to the Wellness Policy of Nashoba Regional School District.

### **Role of Food Services**

-Work with health services to provide carbohydrate information on menus to parents and school nurses to assist in carbohydrate counting activities.

## **Role of the School Bus Company**

- Provide training for all bus drivers on symptoms of diabetes emergencies.
- Know local EMS (Emergency Medical Services) procedures.
- Have functioning communication equipment to access EMS.
- Understand that a student with diabetes may need to have a snack to regulate his/her blood sugar, despite the policy of no food eating allowed on the bus.

Appendix A – Diabetes Medical Management Plan (DMMP)

Appendix B – Quick Tip Sheets – Hypoglycemia and Hyperglycemia

Appendix C - Bus Emergency Form

Resources: The Massachusetts Guide to Managing Diabetes in Schools