

Student's Name _____ ID # _____ DOB _____
 School _____ Grade _____ Homeroom Teacher _____
 Effective Dates for Plan: ____/____/____ to ____/____/____ Bus # / Transportation _____

Diabetes Care Plan

School Responsibilities

Instructions: Give to parent/guardian to read and sign. One signed copy to be kept by parent and one kept with student's diabetes care plan.

The school will inform the parent/guardian of each identified student with diabetes about the availability and nature of an individualized care plan to manage the student's diabetes at school. At the written request of the parent/guardian, the school will develop, implement, and maintain an individualized care plan for the student with diabetes.

1. The Diabetes Care Plan will:

- Be developed prior to the student's enrollment in school or as soon as the need for a plan is identified.
- Be developed by the parent/guardian, the student, the student's health care provider, the school nurse, where available and appropriate school personnel using the Diabetes Care Plan form and appropriate care attachments.
- Be reviewed annually, with a new plan developed for each school year.
- Be reviewed whenever changes occur in the student's health status or medical treatment, with a new plan developed if necessary.
- Contain provisions for both routine and emergency diabetes care.
- Provide a separate "Quick Reference Plan" for bus drivers, substitute teachers, field trip chaperones, and other school personnel involved in the student's care or education.
- Specify the extent of the student's ability to participate in his/her diabetes care.
- Specify the roles and expectations of the parent/guardian, the student, and school personnel in providing assistance to the student during school and extracurricular activities and any special arrangements that be necessary.

2. The school will provide training to all school personnel who provide education or care for the student about:

- Information about diabetes
- Symptoms and treatment of low blood sugar (hypoglycemia)
- Symptoms and treatment high blood sugar (hyperglycemia)
- Information about emergency procedures

3. The school will provide training to two or more staff members in the following procedures, conducted in accordance with the student's individualized diabetes care plan, to ensure that at least one trained adult is present to perform these procedures in a timely manner while the student is at school, on field trips, and during extracurricular activities or other school-sponsored events:

- Perform or supervise finger stick blood sugar monitoring and record the results in student's logbook.
- Perform or supervise insulin administration.
- Give fast sugar for low blood sugar (hypoglycemia) or glucagon for severe low blood sugar reactions.
- Assist with insulin pump operation and insulin administration.
- Take appropriate actions for blood sugar levels outside of the target ranges according to student's diabetes care plan.
- Test the urine or blood for ketones when necessary and respond to the results of this test.
- Contact parent/guardian and health provider as indicated in student's diabetes care plan.

4. The school will provide two or more staff members responsible for knowing the schedule of the student's meals and snacks. These staff members will:

- Work with the parent/guardian to coordinate this schedule with that of other students as closely as possible.
- Notify the parent/guardian in advance of any expected changes in the school schedule that affect the student's meal time or exercise routine.
- Remind young children of snack times, including designated snack times or those in conjunction with physical activity.

5. The school will ensure that the student has immediate access to supplies and the assistance of a staff member trained in the treatment of low blood sugar (hypoglycemia). The school will also:

Student's Name: _____

- Make treatment for low blood sugar (hypoglycemia) available as close as possible to student's location, including the classroom, indoor and outdoor physical education activities, school evacuations for fire drills, bomb threats or other emergencies, and other school related events or activities. Students must have immediate access to their supplies at all times.
- Supervise student until appropriate treatment has been administered. Student should not be left unattended or sent through school hallways alone with a low blood sugar.
- Provide student with emotional support and positive regard to help prevent student from experiencing embarrassment, criticism, ridicule, or undue attention because of his/her diabetes.

6. The school will provide an appropriate location in the school to provide privacy and/or convenience, as requested by student or parent/guardian, for:

- Blood sugar testing
- Ketone testing
- Insulin administration
- Insulin and glucagon storage
- Insulin pump care or infusion site change
- Treatment for hypoglycemia (low blood sugar)
- Treatment for hyperglycemia (high blood sugar)

7. The school will give permission for the student to:

- See school medical personnel upon request.
- Eat a snack anywhere, including the classroom or the school bus, to prevent or treat low blood sugar.
- Test blood sugar levels wherever and whenever necessary and to take immediate corrective actions if student is able to demonstrate:
 - Accurate finger stick technique
 - Appropriate infection control
 - Appropriate disposal of sharps
 - Ability to interpret blood sugar results
 - Ability to administer appropriate corrective measures if necessary
- Test and treat blood sugar levels during school testing to ensure optimal academic performance.
- Miss school without consequences for required medical appointments to monitor the student's diabetes management. This should be an excused absence with a doctor's note.
- Use the restroom and have access to fluids (i.e., water) as necessary.
- Have immediate access to diabetes supplies at all times, with supervision as needed. Immediate access includes permission for student to carry his/her supplies in book bag or on person.

8. As needed, the school will incorporate the following attachments into the student's Diabetes Care Plan and will make them available to parent/guardian and appropriate school personnel:

- Request for diabetes care plan
- Medication authorization
- Authorization for self medication by students
- Student health history
- Release of medical information
- An individualized "Quick Reference Plan for Student with Diabetes"
- Information sheet "What School Personnel Should Know About the Student with Diabetes"
- Symptoms and treatment of low blood sugar (hypoglycemia)
- Symptoms and treatment of high blood sugar (hyperglycemia)
- Request for modified diet
- Log sheets to record blood sugar levels and insulin given
- Insulin pump information
- Other instructions or information necessary for student's diabetes care

| | | | |
|--------------------------------------|------|---|------|
| Parent/Guardian _____ (signature) | Date | School Nurse, Teacher or Administrator _____ (signature) | Date |
|--------------------------------------|------|---|------|

One copy to be kept by parent/guardian

One copy to be kept with student's diabetes care plan