

Student's Name

Date of Birth

School

Grade \_\_\_\_

Homeroom Teacher

Effective Dates for Plan: \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_

Bus #/Transportation

## Diabetes Management Agreement for Schools

The parent/guardian will provide the school with a written request for a Diabetes Care Plan and will work with student's health care provider and school personnel in preparing the Diabetes Care Plan. The parent/guardian will provide the school with the following materials, equipment, and information needed for student's diabetes care:

### 1. Diabetes Care Plan

- Provide a written request for a Diabetes Care Plan for your child. ("Diabetes Care Plan Request" form available from school)
- Work with health care provider and school personnel to complete the Diabetes Care Plan form with the information needed to take care of your child's diabetes at school.
- Obtain signatures needed for the Diabetes Care plan. If physician has not completed a care plan, the parent must bring insulin orders and diabetic care recommendations for treatment signed by the physician.
- Return the doctor's orders & care plan as soon as possible. Without doctor's orders, school personnel will be limited in the help that they can provide.
- Provide school with diabetes supplies and snacks needed for student's care.

### 2. Provide current emergency phone numbers for the parent/guardian and student's diabetes care team

- Provide school staff with names and phone numbers of appropriate individuals to contact for routine care and emergencies and update as needed.

### 3. Blood sugar testing supplies

- Parent/guardian is responsible for the maintenance of the blood sugar testing equipment (i.e., cleaning and performing controlled testing per the manufacturer's instructions).
- Provide written instructions about student's blood sugar testing schedule and assistance needed.

### 4. Insulin administration supplies and back-up supplies for insulin pump users, if needed

- Provide written instructions about student's insulin requirements and assistance needed.

### 5. Ketone testing supplies to check blood or urine, if needed

- Provide written instructions about when to check for ketones.
- Provide written instructions about measures to take if ketones are present.

### 6. Supplies and instructions about treating hypoglycemia (low blood sugar) and hyperglycemia (high blood sugar)

- Provide written instructions about how to manage student's low or high blood sugar levels.
- Provide snacks, a source of glucose and a glucagon emergency kit, if ordered by health care provider.
- Provide recent photo of student for emergency identification purposes.
- Provide student with medic alert identification and encourage student to wear medic alert I.D. at school.

### 7. Information about student's self care capabilities. Parents must state what diabetes care their child may do themselves.

The Student will:

- a. Perform the following self care tasks without help or supervision:
- b. Need assistance or supervision with the following diabetes tasks:
- c. Be permitted to carry the following diabetes supplies and equipment with him/her at all times and in all locations:

### 8. Information about the student's meal/snack schedule

- Work with school staff to coordinate meal and snack schedule.
- Provide instructions for food during school parties and other activities.
- Provide carbohydrate content information for snacks and meals brought from home.
- Provide snacks that can be used to prevent or correct low blood sugars.
- Provide information about preferred foods and foods to avoid.

### 9. Information about diabetes and the performance of diabetes-related tasks

- Provide general diabetes information, as well as information specific to the student.

### 10. Replacement supplies needed for diabetes care

- Check diabetes supplies and snacks on hand at school on a regular basis.
- Provide additional supplies before existing ones run out.

**11. Information about changes in student's health status or medical management**

- Provide school staff with updates involving student's condition or diabetes care as soon as possible. A new Diabetes Care Plan may have to be completed and filed, depending on changes.
- A new Diabetes Care Plan *must* be completed annually and reviewed at the start of each new school year to ensure that student receives appropriate diabetes care at school.
- Any insulin adjustments to the diabetes care that have been requested by the physician must be written down and given to the DCM. Understand that you are responsible for all written changes to the diabetes care provided. Insulin adjustments at school should not be made to the basal rate.
- All written insulin adjustments to the diabetes care plan made by the parent or guardian must be reviewed by the school nurse before the DCM can carry out to assure the safest possible care is provided to your child.

**12. Note signed by student's health care provider to obtain an excused absence for health care appointments**

- Follow up with teacher(s) to obtain make-up assignments for excused absences.
- Make sure that student completes missed work within the time frame allowed by school policy or that has been negotiated with teacher.

**1. Diabetes Care Plan:**

- Will be developed annually by the parent/guardian, the student, the student's health care provider, the school nurse, and the DCMs.
- Will be reviewed by the DCM and school nurse whenever parent informs school (in writing) of changes that have occurred in the student's health status or medical treatment, with a new plan developed if necessary.
- 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 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 Nurse will assure training is provided to all school personnel who provide education or care for the student about:**

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

**3. The School Nurse will assess, plan and evaluate diabetic care provided in the schools. The School Nurse will:**

- Oversee the school staff to assure safe and competent diabetes care is provided at school and will clarify any questions or concerns with the parent and/or physician.
- Train school staff members to be Diabetic Care Managers (DCMs) in diabetes management and have them successfully demonstrate the administration of insulin or other diabetes medications (which for pump users includes basic daily functions and troubleshooting the student's insulin pump), blood glucose monitoring, ketone checks, and responding to hyperglycemia and hypoglycemia including administering glucagon. Develop a plan for follow-up to continually evaluate competencies and successful execution of the care plan.
- Train any staff that has primary care for the student at any time during school hours, extracurricular activities, or during field trips. Training will include a general overview of diabetes and typical health care needs of a student with diabetes, recognition of high and low blood glucose levels, assessing for competency of all procedures and informing staff how and when to immediately contact either the parent, school nurse, Diabetic Care Manager or 911.
- Provide bus drivers, who transport the student, with written information about symptoms of high and low blood glucose levels and provide them with a copy of the student's quick reference emergency plan.
- Provide a copy of the care plan to physical education instructors and sports coaches and assure they are able to recognize and assist with the treatment of low blood glucose levels as necessary.
- Instruct physical education staff and coaches to make sure that the student's blood glucose meter, a quick-acting source of glucose, and water is always available at the site of physical education class or team sports practices and games.
- If the physician has requested that the parents directly provide written insulin changes to the school staff providing the care, the school nurse will not be delegating care under her nursing license. When the physician allows the parent to change the insulin amount, the parent must write the insulin adjustment down and provide it directly to their child's primary Diabetic Care Manager. In this situation, the parents becomes, upon the order of the physician, the direct delegators in these situations and are accountable and responsible for activities they delegate to the DCMs.
- If the physician has requested the parents be allowed to adjust insulin dosages and the parent wishes to call these changes to the school nurse and the nurse is able to manage the insulin dose change (they are available to the school to oversee changes), the school nurse must have one other person listen to the insulin dosage change on the telephone. Once the insulin change has been received, the nurse will communicate this change to the DCM and write the change down on the log. In this case, the school nurse is delegating the care and must assure the insulin adjustment is appropriate. If the nurse has questions or concerns about the insulin change, she should contact the child's endocrinologist for clarification.

4. **The Diabetes Care Managers will ensure that at least one trained adult is present to perform these procedures and maintain documentation in a timely manner while the student is at school, on field trips, and during extracurricular activities or other school-sponsored events. The DCM will:**
- Ensure that the student has immediate access to supplies and the assistance of a staff member trained in the treatment of hypoglycemia (low blood sugar).
  - Provide an appropriate location in the school that is private and/or convenient, as requested by student or parent/guardian, for all needed diabetic care.
  - Make treatment for hypoglycemia (low blood sugar) available as close as possible to student's location.
  - 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.
  - Perform or supervise finger-stick blood sugar monitoring and record the results in student's logbook. If student can provide self care, it is still the responsibility of the DCM to watch the student stick their finger, perform the blood sugar test and record the results.
  - Perform or supervise insulin administration or other diabetes medications and record amount given on log.
  - Administer glucose for hypoglycemia (low blood sugar) or Glucagon for severe hypoglycemic 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.
  - If the parents provide written insulin adjustments (and has an MD order to do so), the Diabetic Care Manager (DCM) will contact the School Nurse to review the adjustments. If the DCM cannot get in touch with the School Nurse, the DCM will request the parent come make the adjustment until the revision can be reviewed by the School Nurse.
  - Send a copy of the blood sugar log home at the end of each week. The DCM will date the log at the bottom of the page to indicate the dates the log is copied and sent home.

The following school staff members are the designated DCMs

(Training date):

5. **Notify parents/guardian immediately in the following situations:**
- Symptoms of severe low blood sugar such as continuous crying, extreme tiredness, seizure, or loss of consciousness.
  - The student's blood glucose test results are below \_\_\_\_\_ or are below \_\_\_\_\_ 15 minutes after consuming juice or glucose tablets.
  - Symptoms of severe high blood sugar such as frequent urination, presence of ketones, vomiting or blood glucose level above \_\_\_\_\_
  - The student refuses to eat or take insulin injections or bolus.
  - Insulin pump malfunctions that cannot be remedied.
  - Other: \_\_\_\_\_
6. **Two or more school staff members will be responsible for knowing the schedule of the student's meals and snacks. These staff members are \_\_\_\_\_ and they 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 times or exercise routine.
  - Remind young children of snack times, including designated snack times or those in conjunction with physical activity.
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 hypoglycemia (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; and the ability to administer appropriate corrective measures if necessary.
  - Miss school 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:**
- Diabetes Care Plan Request; Medication Authorization; Authorization for Self-Medication by Students as needed; 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 Hypoglycemia (Low Blood Sugar); Symptoms and Treatment of Hyperglycemia (High Blood Sugar); Log sheets to record blood sugar levels and insulin given; Insulin Pump Information; and Other instructions or information necessary for student's diabetes care.

I give permission to the school nurse, trained diabetes personnel, and other designated staff members of School to perform and carry out the diabetes care tasks as outlined by \_\_\_\_\_'s Diabetes Care Plan. I also consent to the release of the information contained in this Diabetes Medical Management Plan to all staff members and other adults who have custodial care of my child and who may need to know this information to maintain my child's health and safety. I give permission to the school nurse to share information about my child's diabetes management with my child's health care provider.

**Emergency Contact Instructions:**

Call parent or guardian at numbers listed below. If unable to reach parent/guardian, call the other emergency contacts or student's health care provider listed below.

**EMERGENCY CONTACTS:**

_____ Parent's/Guardian's Name	_____ Home Phone Number	_____ Work Phone Number	_____ Cell Phone Number
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_____ Parent's/Guardian's Name	_____ Home Phone Number	_____ Work Phone Number	_____ Cell Phone Number
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**Other emergency contacts:**

_____ Name	_____ Home Phone Number	_____ Work Phone Number	_____ Cell Phone Number
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_____ Name	_____ Home Phone Number	_____ Work Phone Number	_____ Cell Phone Number
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**Student's Health Care Provider(s):**

_____ Name	_____ Phone Number
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This Plan shall be reviewed and amended at the beginning of each school year or more often if necessary. By signing this document, you agree to the responsibilities outlined above.

**Approved and received:**

\_\_\_\_\_  
Parent/Guardian

Date

\_\_\_\_\_  
Student

Date

\_\_\_\_\_

School Nurse

Date

\_\_\_\_\_  
Diabetic Care Managers

Date

\_\_\_\_\_  
Diabetic Care Managers

Date

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Diabetic Care Managers

Date

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Diabetic Care Managers

Date