Actions for School Personnel, Parents/Guardians, and Students

The health, safety, and educational progress of a student with diabetes depend on cooperation and collaboration among members of the school health team and the student’s personal diabetes health care team. Working together, members of the school health team implement the provisions of the student’s health care and education plans and provide the necessary assistance in the school setting. Refer to the Diabetes Overview for more information on the school health team and the health care and education plans.

<table>
<thead>
<tr>
<th>Members of the School Health Team</th>
<th>Members of the Student’s Personal Diabetes Health Care Team</th>
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<tbody>
<tr>
<td>Student with diabetes</td>
<td>Student with diabetes</td>
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<tr>
<td>Parents/guardians</td>
<td>Parents/guardians</td>
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<td>School nurse</td>
<td>Doctor</td>
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<td>Other school health care personnel</td>
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<td>Trained diabetes personnel</td>
<td>Registered dietitian nutritionist</td>
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<td>Administrators</td>
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<td>Principal</td>
<td>Other health care providers involved with the student’s care</td>
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<td>504/IEP coordinator</td>
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<td>Office staff</td>
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<td>Student’s teacher(s)</td>
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<td>School psychologist or guidance counselor</td>
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<td>Coach, lunchroom, and other school staff members</td>
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Health care plans include:

- **Diabetes Medical Management Plan (DMMP)**—Prepared by the student’s personal diabetes health care team, this plan contains the medical orders for all aspects of the student’s routine and emergency diabetes care.
- **Individualized Health Care Plan (IHP)**—Prepared by the school nurse, this plan specifies how diabetes care, as prescribed in the Diabetes Medical Management Plan, will be delivered in the school setting.
- **Emergency Care Plans for Hypoglycemia and Hyperglycemia**—Prepared by the school nurse, these plans describe how to recognize and treat hypoglycemia or hyperglycemia and what to do in an emergency.

Education plans include the Section 504 Plan, other education plans, or the individualized education program (IEP). These plans are developed to address the student’s needs for services to manage diabetes safely and effectively in school, under Section 504, the Americans with Disabilities Act, or the Individuals with Disabilities Education Act. (See School Responsibilities Under Federal Laws.)
The school nurse is the most appropriate person to implement the student’s plans. When a school nurse is not available, nonmedical personnel—called “trained diabetes personnel” in this guide—can be trained and supervised by a diabetes-trained health care professional such as the school nurse or a certified diabetes educator to safely provide and assist with diabetes care tasks in the school setting. These tasks may include blood glucose monitoring, insulin and glucagon administration, and urine or blood testing for ketones.

A diabetes-trained health care professional, such as the school nurse or a certified diabetes educator, is best qualified to train and supervise trained diabetes personnel assigned to provide routine or emergency care to a student with diabetes. School administrators and nursing personnel also should determine whether there are applicable State and local laws and factor them into helping the student with diabetes at school.

Once it has been determined that a student-specific diabetes care task may be delegated, the school nurse should be involved in the decision making process to identify which school personnel are most appropriate to be trained. A diabetes-trained health care professional, such as a school nurse or a certified diabetes educator, develops and implements the training program, evaluates the ability of trained diabetes personnel to perform the task, and establishes a plan for ongoing supervision throughout the school year. When trained diabetes personnel carry out tasks specified in the student’s health care plans, under no circumstances should they make independent decisions about the daily, ongoing management of a student with diabetes. All diabetes care tasks should be provided as prescribed in the student’s individualized Diabetes Medical Management Plan or physician’s orders.

In addition, to help ensure that students with diabetes are safe, ready to learn, and able to participate in all school-sponsored events, all school personnel should receive training that provides a basic understanding of diabetes, how it is managed, how to recognize the signs and symptoms of hypoglycemia and hyperglycemia, and whom to contact for help. (See Train School Personnel.)

**What Actions Should School Personnel, Parents/Guardians, and Students Take?**

The following pages describe the actions and responsibilities of each key school staff member, the parents/guardians, and the student. A staff member may fill more than one role. For example, a teacher or a coach also may be designated as the trained diabetes personnel.

The recommended actions do not represent legal checklists of what school personnel must do to comply with relevant Federal and State laws. Rather, they are steps that administrators, school nurses, school personnel, the parents/guardians, and students should take to help ensure effective diabetes management at school.

**How to Use the Actions Section**

- Print and distribute the Actions sheets on the following pages to the appropriate staff members, the parents/guardians, and students with diabetes who are able to take responsibility for their self-management.
- Make copies of the Actions sheets for substitute personnel so that they understand their respective roles in diabetes management.
- Review the Actions sheets with school personnel during Level 2 and Level 3 diabetes management training to ensure that all staff members understand their roles and responsibilities.
Please print and distribute to the school district administrator.

**Actions for the School District Administrator**

(Includes the superintendent, 504/IEP coordinator, or other school administrator responsible for coordinating student health services)

- **Understand and ensure compliance with the Federal and State laws** that may apply to students with diabetes, including Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, and the Individuals with Disabilities Education Act. (See **School Responsibilities Under Federal Laws**.)

- **Provide leadership in developing district policy** related to all aspects of diabetes management at school that is consistent with the standards of care recommended for children with diabetes and the law. This includes: availability of the school nurse, a diabetes-trained health care professional, or trained diabetes personnel when the student is at school or participating in school-sponsored activities and events; delegation of responsibilities; required staff training; medication administration; blood glucose monitoring; and activation of Emergency Medical Services (EMS) in case of a diabetes emergency on or off the school campus. Obtain input from local or regional experts on developing appropriate policies.

- **Support implementation of district policy.** Support school district health professionals and other school administrators regarding: 1) development, coordination, and implementation of diabetes management training; 2) ongoing quality control and improvement of these training programs; and 3) development and implementation of a program to monitor the performance of those who receive training. (See **How Do You Plan Effective Diabetes Management in the School Setting?**)

- **Allocate sufficient resources** to help students with diabetes (e.g., availability of the school nurse, a diabetes-trained health care professional, or trained diabetes personnel when the student is at school or participating in school-sponsored activities and events).

- **Monitor schools attended by students with diabetes for compliance with district policy.**

- **Meet with members of the school health team, as needed.** Address issues of concern about the provision of diabetes care by the school district, as appropriate.

- **Learn about diabetes** by reviewing the materials contained in this guide and by participating in Level 1 training.

- **Treat the student with diabetes the same as other students, except when necessary to respond to their medical needs and any resulting educational needs.**

- **Respect the student’s confidentiality and right to privacy.**
Please print and distribute to the principal, school administrator, or designees.

**Actions for the Principal, School Administrator, or Designee**

- **Understand and ensure compliance with the Federal and State laws** that may apply to students with diabetes, including Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, and the Individuals with Disabilities Education Act. Understand the procedures for implementing these laws. (See School Responsibilities Under Federal Laws.)

- **Participate in developing and implementing school policy** related to diabetes management at school.

- **Implement policy on availability of trained staff for students with diabetes.** Address the availability of the school nurse, another diabetes-trained health care professional, or trained diabetes personnel when the student is in school or participating in school-sponsored activities and events. Coordinate with the school nurse to identify staff members who will receive training to serve as trained diabetes personnel to assist with or perform diabetes care tasks. (See How Do You Plan Effective Diabetes Management in the School Setting?)

- **Implement the policy for activation of Emergency Medical Services (EMS)** in case of a diabetes emergency on or off the school campus.

- **Include provisions for students with diabetes in emergency/disaster planning** (e.g., lockdown or evacuation).

- **Develop and implement a system to inform school health services** of the pending enrollment of a student with diabetes.

- **Participate in a meeting with the school health team**, which includes the student, the parents/guardians, school nurse, trained diabetes personnel, principal, office personnel, the 504/IEP coordinator, teacher(s), and other staff members who have responsibility for the student. Plan to schedule and attend a meeting of the school health team before the school year starts, when the child is newly diagnosed, or other times as appropriate, to discuss the health care-related services the student may need based on the student’s Diabetes Medical Management Plan (DMMP).

- **Allocate sufficient resources for helping students with diabetes in the school setting**, including resources for the three levels of diabetes management training described in this guide.

- **Identify all staff members who have responsibility for the student with diabetes throughout the school day and during school-sponsored extracurricular activities and field trips.** Work with the school nurse to implement the appropriate level of training for staff members and to provide copies of the student’s Emergency Care Plans for Hypoglycemia and Hyperglycemia, which contain information about the signs and symptoms of hypoglycemia (low blood glucose) and hyperglycemia (high blood glucose) and whom to contact in case of a diabetes emergency.

- **Alert all school staff members and all substitute personnel who teach or supervise the student with diabetes** (including playground monitors, bus drivers, and lunchroom personnel) about the student’s needs. Work with the school nurse to familiarize school staff members with the services and emergency procedures contained in the student’s health care and education plans.
Actions for the Principal, School Administrator, or Designee  

- **Facilitate diabetes management training for school personnel as suggested in this guide.** Work with the school nurse to arrange for a diabetes-trained health care professional, such as the school nurse or a certified diabetes educator, to plan and provide the three levels of diabetes management training for school personnel.

- **Learn about diabetes** by participating in Level 1 training and by reviewing the information in this guide.

- **Be able to respond to signs and symptoms of hypoglycemia and hyperglycemia** in accordance with the student’s *Emergency Care Plans for Hypoglycemia and Hyperglycemia*. Know when and how to contact the school nurse or trained diabetes personnel, where emergency supplies are kept, and the procedures for handling emergencies.

- **Continue to work with the school health team to ensure implementation of the student’s health care and education plans.** Monitor compliance with these plans, addressing any concerns raised by the student, the parents/guardians, school nurse, or student’s personal diabetes health care team.

- **Support and facilitate ongoing communication** among all members of the school health team.

- **Promote a supportive learning environment for students with diabetes** to manage their diabetes safely and effectively at school. This includes enabling students to: monitor blood glucose levels; administer insulin and other medications; eat snacks for routine diabetes management and for treating low blood glucose levels; have bathroom privileges and access to drinking water; participate in all school-sponsored activities; and provide accommodations for health care appointments or illnesses.

- **Treat the student with diabetes the same as other students, except when necessary to respond to their medical needs and any resulting educational needs.**

- **Respect the student’s confidentiality and right to privacy.**
Actions for the School Nurse

When a school nurse is assigned to the school (or school district), he or she is the key school staff member who leads and coordinates the provision of health care services for a student with diabetes at school and at school-related activities. The school nurse, in collaboration with the principal, takes the lead in identifying, training, and providing ongoing supervision of trained diabetes personnel.

Diabetes technology, therapies, and evidence-based practice all are changing rapidly. The school nurse, who provides care to students with diabetes and facilitates diabetes management training for school personnel, has the professional responsibility to acquire and maintain current knowledge and competency related to diabetes management on a regular and ongoing basis. (See Train School Personnel.)

The school nurse is responsible for the following actions and should review them when notified that a student with diabetes is enrolled in the school, annually, or more often as necessary.

- Understand your responsibilities under Federal and State laws that may apply to students with diabetes, including Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, and the Individuals with Disabilities Education Act. Understand the procedures for implementing these laws. (See School Responsibilities Under Federal Laws.)

- Understand State laws regarding delegation/assignment of nursing tasks and other laws relating to the provision of health care in schools.

- Obtain and review the student’s current Diabetes Medical Management Plan (DMMP) and other pertinent information from the student’s parents/guardians.

- Using the medical orders in the DMMP and information obtained from a thorough nursing assessment, develop an Individualized Health Care Plan (IHP). Promote and encourage independence and self-care consistent with the student’s ability, skill, maturity, and development as indicated in the DMMP. After reviewing the IHP with the parents/guardians and student, implement, review, and update the plan throughout the school year as needed.

- Prepare the student’s Emergency Care Plans for Hypoglycemia and Hyperglycemia based on the medical orders in the DMMP. Provide copies of the emergency plans to all school personnel who have responsibility for the student with diabetes throughout the school day and during school-sponsored extracurricular activities and field trips (e.g., teachers, coach, physical education teacher, lunchroom staff, bus driver).

- Facilitate the initial school health team meeting to discuss implementing the student’s DMMP and IHP. Participate as a health expert on the teams that develop and implement the student’s Section 504 Plan, other education plan, or individualized education program. Monitor compliance with these health care and education plans and facilitate follow-up meetings of the school health team to discuss concerns, receive updates, and evaluate the need for changes to the student’s plans, as appropriate.
Actions for the School Nurse

- Plan and implement diabetes management training for the trained diabetes personnel and all staff members who have responsibility for the student with diabetes. Use the three levels of training described in this guide to design the diabetes management training, and consider using standardized training materials that are available for training school personnel. (See Train School Personnel.) Determine that all personnel mentioned in the health care and education plans know their roles in carrying out these plans, are trained in how to carry out their roles, and know how their roles relate to each other, when and where to get help, where routine and emergency supplies are kept, and the procedures for handling emergencies.

- Make parents/guardians and the student aware of which school personnel will be informed about the student’s diagnosis and who will be trained to provide care.

- Obtain materials and medical supplies necessary for performing diabetes care tasks from the parents/guardians. Arrange a system for notifying the student or the parents/guardians when supplies have expired or need to be replenished.

- Obtain materials for the emergency supply kit from the parents/guardians and designate a storage location for emergency use. The kit should contain enough supplies for at least 72 hours. Notify all school personnel of its location.

- Perform or assist the student with routine and emergency diabetes care tasks, including blood glucose monitoring, urine or blood ketone testing, insulin and other medication administration, carbohydrate counting, and glucagon administration. Be aware of the school’s policy on activating Emergency Medical Services in case of a diabetes emergency.

- Maintain accurate documentation of all diabetes care provided at school. Document communications with the student, the parents/guardians, and the student’s personal diabetes health care team, and document communications related to the training and supervision of trained diabetes personnel.

- Provide ongoing education and training as the school year progresses for staff and new staff, as needed, and when the student’s DMMP changes.

- Assess competence and provide ongoing supervision of trained diabetes personnel in carrying out the health care tasks outlined in the student’s health care and education plans.

- Conduct ongoing, periodic assessments of the student with diabetes and update the IHP. Assessments should include self-care abilities, adherence to diabetes care tasks, successes/barriers to meeting blood glucose target ranges, social-emotional concerns, and readiness for transitions (e.g., high school, college, adulthood). Watch for signs of eating disorders, such as unexplained weight loss, particularly in female students.

- Foster a supportive learning environment and treat the student with diabetes the same as other students, except when necessary to respond to their medical needs and any resulting educational needs. Be alert for teasing and bullying of the student with diabetes due to peers’ curiosity and lack of information about injections, blood glucose monitoring, or why the student with diabetes gets to eat snacks in the classroom.

- Distribute the Diabetes Overview in this guide to all school personnel who have responsibility for students with diabetes, and determine that they understand the basic elements of effective diabetes management and know how to recognize and respond to a diabetes emergency.
Actions for the School Nurse  Continued

- Provide education and act as a resource on managing diabetes at school to the student, family, and school staff.
- Act as an advocate for students to help them meet their diabetes health care needs.
- Assist the classroom teacher(s) with developing a plan for substitute teachers.
- Assist the physical education teacher with managing the student’s physical activity program at school.
- Visit the classroom teachers routinely to provide support and counseling and to address concerns regarding the impact of diabetes on the student in the classroom.
- Collaborate with coworkers and outside agencies (e.g., school district registered dietitian nutritionist, food service manager, and food service personnel) to obtain nutrition information for the parents/guardians and the student.
- Communicate with the student’s parents/guardians and—with their permission—communicate with the student’s personal diabetes health care team about progress as well as any concerns about the student’s diabetes management or health status, such as hypoglycemia episodes, hyperglycemia, general attitude, emotional issues, and self-management.
- Respect the student’s confidentiality and right to privacy.
Actions for the Trained Diabetes Personnel

With proper supervision and training, nonmedical school personnel or unlicensed assistive personnel, called “trained diabetes personnel” in this guide, can be trained and supervised to help students manage their diabetes safely at school. Trained diabetes personnel may include school staff members such as teachers, coaches, and administrators as well as health aides and licensed practical nurses. One or more school staff members should be trained to perform student-specific diabetes care tasks.

Once it has been determined that a student-specific diabetes care task may be delegated or assigned, the school nurse should be involved in the decision-making process to identify which school personnel are most appropriate to be trained. A diabetes-trained health care professional, such as the school nurse or a certified diabetes educator, develops and implements the training program using standardized training materials such as those described in Train School Personnel. They also evaluate the ability of trained diabetes personnel to perform the task and establish a plan for ongoing supervision throughout the school year.

In general, the school nurse, in collaboration with the principal, takes the lead in identifying, training, and providing ongoing supervision of trained diabetes personnel. The school nurse, another qualified health professional, or at least one of the trained diabetes personnel should be onsite during school hours and during school-sponsored activities that take place before or after school, or off campus, in which a student with diabetes participates.

The specific roles and responsibilities of the trained diabetes personnel will be determined by the student’s health care plans (the Diabetes Medical Management Plan is prepared by the student’s personal diabetes health care team and the Individualized Health Care Plan and Emergency Care Plans for Hypoglycemia and Hyperglycemia are prepared by the school nurse) and education plan (Section 504 Plan, other education plan, or IEP). All diabetes care tasks should be provided as prescribed by the student’s Diabetes Medical Management Plan or physician’s orders. Under no circumstances should a trained diabetes personnel make decisions independent of the DMMP.

- Understand your responsibilities under Federal and State laws that may apply to students with diabetes, including Section 504 of the Rehabilitation Act of 1973, the Americans With Disabilities Act, and the Individuals With Disabilities Education Act. Understand the procedures for implementing these laws. (See School Responsibilities Under Federal Laws.)

- Participate in school team meetings to discuss implementing the student’s health care and education plans. (See How Do You Plan Effective Diabetes Management in the School Setting?)

- Successfully complete the Level 3 training described in this guide and demonstrate competency in student-specific diabetes care tasks. (See Train School Personnel.) Participate in additional education and training, as needed, or if the student’s DMMP changes.

- Perform or assist the student with routine and emergency diabetes care tasks, including blood glucose monitoring, urine and/or blood ketone testing, insulin and other medication administration, carbohydrate counting, and glucagon administration after receiving training under the direction of the school nurse or other assigned health care professional.

- Know how to recognize the signs and symptoms of hypoglycemia and hyperglycemia, where routine and emergency supplies are kept, how to implement the student’s Emergency Care Plans for Hypoglycemia and Hyperglycemia, and how to activate Emergency Medical Services (EMS) in case of a diabetes emergency.
Actions for the Trained Diabetes Personnel  

- Document the diabetes care provided according to standards and requirements outlined by school policy.
- Be available on campus during regular school hours and when the student participates in school-sponsored extracurricular activities held before or after school, as determined by the student’s health care and education plans.
- Accompany the student on field trips or to off-campus school-sponsored sports events and activities, as determined by the student’s health care and education plans.
- Know your role in helping the student with diabetes in a disaster, lockdown, or emergency situation.
- Communicate directly and regularly with the school nurse or the supervising health care professional. Ask for help or review when uncertain about any task you have been asked to perform.
- Consult with the school nurse and appropriate members of the school health team according to the student’s health care and education plans and when questions arise or the student’s health status changes.
- Foster a supportive learning environment and treat the student with diabetes the same as other students, except when necessary to respond to their medical needs and any resulting educational needs. Be alert for teasing and bullying of the student with diabetes due to peers’ curiosity and lack of information about injections, blood glucose monitoring, or why the student with diabetes gets to eat snacks in the classroom.
- Respect the student’s confidentiality and right to privacy.
Please print and distribute to the teacher.

Actions for the Teacher

☐ Understand your responsibilities under Federal and State laws that may apply to students with diabetes, including Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, and the Individuals with Disabilities Education Act. Understand the procedures for implementing these laws. (See School Responsibilities Under Federal Laws.)

☐ Participate in the school health team meeting(s). The teacher(s) who has primary responsibility for the student participates in the school health team meeting(s) when the student’s health care plans (Diabetes Medical Management Plan, Individualized Health Care Plan, and/or Emergency Care Plans for Hypoglycemia and Hyperglycemia) and education plan (Section 504 Plan, other education plan, individualized education program) are discussed. (See How Do You Plan Effective Diabetes Management in the School Setting?)

☐ Work with other members of the school health team to implement the student’s health care and education plans.

☐ Consult with the school nurse and the principal to determine the appropriate level of diabetes management training you should attend for carrying out your responsibilities and complete the training.

☐ Review the information about diabetes in this guide and refer to it, as needed, to help the student with diabetes.

☐ Recognize that a change in the student’s behavior could be a symptom of blood glucose changes. Be aware that a student with low or high blood glucose levels may have some cognitive impairment that could adversely affect classroom performance, especially in timed-testing situations.

☐ Be prepared to respond immediately to the signs and symptoms of hypoglycemia (low blood glucose) and hyperglycemia (high blood glucose) in accordance with the student’s Emergency Care Plans for Hypoglycemia and Hyperglycemia. These plans include information on when and how to contact the school nurse or trained diabetes personnel. When experiencing hypoglycemia, the student should never be left alone, sent anywhere alone, or sent with another student.

☐ Be aware of the school’s policy for activating Emergency Medical Services (EMS) in case of a diabetes emergency. Know where supplies to treat low blood glucose are kept and where students with diabetes normally keep their supplies.

☐ Know your role in helping the student with diabetes in a disaster, lockdown, or emergency situation.

☐ Provide a supportive learning environment for students with diabetes to manage their diabetes safely and effectively at school. This includes enabling students to: check blood glucose; use smartphones and other monitoring technology; administer insulin and other medications; eat snacks for routine diabetes management and for treatment of low blood glucose levels; have bathroom privileges; have access to drinking water; and participate in all school-sponsored activities.

☐ Provide accommodations for students with diabetes such as alternative times and arrangements for exams and permission for absences—without penalty—for health care appointments and illness, as indicated in the student’s health care and education plans.
Actions for the Teacher  *Continued*

- Provide instruction to the student if he or she misses school and opportunities to make up missed classroom assignments or exams due to diabetes-related care or illness.

- Recognize that eating meals and snacks on time is a critical component of diabetes management. Failure to eat lunch on time or not having enough time to finish a meal could result in low blood glucose levels, especially if a student has missed a morning snack or has had a physically strenuous or otherwise active morning at school.

- Provide information for substitute teachers about the day-to-day and emergency needs of the student. Leave a copy of the *Emergency Care Plans for Hypoglycemia and Hyperglycemia* readily available.

- Notify the parents/guardians in advance of changes in the school schedule, such as class parties, field trips, and other special events.

- Communicate with the school nurse, trained diabetes personnel, or parents/guardians regarding the student’s progress or any concerns about the student.

- Treat the student with diabetes the same as other students, except when necessary to respond to their medical needs and any resulting educational needs. Be alert for teasing and bullying of the student with diabetes due to peers’ curiosity and lack of information about injections, blood glucose monitoring, or why the student with diabetes gets to eat snacks in the classroom.

- Respect the student’s confidentiality and right to privacy.
Actions for the Physical Education Teacher, Coach, and Athletic Trainer

☐ Understand your responsibilities under Federal and State laws that may apply to students with diabetes, including Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, and the Individuals with Disabilities Education Act. Understand the procedures for implementing these laws. (See School Responsibilities Under Federal Laws.)

☐ Work with other members of the school health team to implement the student’s health care and education plans. Health care plans include the Diabetes Medical Management Plan, Individualized Health Care Plan, and Emergency Care Plans for Hypoglycemia and Hyperglycemia; the education plan includes the Section 504 Plan, other education plan, or individualized education program.

☐ Consult with the school nurse and the principal to determine the appropriate level of diabetes management training you should attend for carrying out your responsibilities and complete the training.

☐ Review the information about diabetes in this guide and refer to it, as needed, to help the student with diabetes. (See Promote Regular Physical Activity.)

☐ Allow students with diabetes to wear their insulin pump and/or sensor and medical ID during physical activity.

☐ Designate a safe place for students to keep their diabetes supplies, including their insulin pump, if they remove it during physical activity.

☐ Make sure blood glucose monitoring equipment and a quick-acting form of glucose are available at all activity sites.

☐ Include the student’s Emergency Care Plans for Hypoglycemia and Hyperglycemia and diabetes supplies in the first aid pack that goes out to physical education activities, practices, and games.

☐ Allow the student to monitor blood glucose levels and/or administer insulin, as outlined in the student’s health care plans and education plans.

☐ Recognize that a change in the student’s behavior could be a symptom of blood glucose changes.

☐ Understand and be aware that hypoglycemia (low blood glucose) can occur during and after physical activity.

☐ Know the signs and symptoms of hypoglycemia and hyperglycemia as listed in the student’s Emergency Care Plans for Hypoglycemia and Hyperglycemia.

☐ Be prepared to respond immediately to take initial actions to treat hypoglycemia and hyperglycemia.

☐ Allow students to discontinue physical activity if hypoglycemia is suspected. If treatment for hypoglycemia is required, do not allow the student to engage in physical activity until blood glucose has returned to his/her target range.
Actions for the Physical Education Teacher, Coach, and Athletic Trainer  *Continued*

- **Take initial actions to treat hypoglycemia by providing the student with immediate access to a quick-acting form of glucose in accordance with the student’s Emergency Care Plan for Hypoglycemia.** This plan includes information on when and how to contact the school nurse or trained diabetes personnel. Be aware of the school’s policy for activating Emergency Medical Services (EMS) in case of a diabetes emergency.

- **Provide input to the student’s school health team as needed.** *(See How Do You Plan Effective Diabetes Management in the School Setting?)*

- **Communicate with the school nurse and/or trained diabetes personnel regarding any observations or concerns about the student.**

- **Provide information to the substitute physical education teacher about the day-to-day and emergency needs of the student.** Leave copies of the *Emergency Care Plans for Hypoglycemia and Hyperglycemia* and supplies readily available.

- **Encourage the same level of participation in physical activities and sports for students with diabetes as for other students, except to meet medical needs.**

- **Treat the student with diabetes the same as other students, except when necessary to respond to their medical needs and any resulting educational needs.** Be alert for teasing and bullying of the student with diabetes due to peers’ curiosity and lack of information about injections, blood glucose monitoring, or why the student with diabetes gets to eat snacks during physical activity.

- **Respect the student’s confidentiality and right to privacy.**
Please print and distribute to the food service manager.

## Actions for the Food Service Manager

- **Understand your own and your staff’s responsibilities under Federal and State laws** that may apply to students with diabetes, including Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, and the Individuals with Disabilities Education Act. Understand the procedures for implementing these laws. (See [School Responsibilities Under Federal Laws](#).)

- **Ensure that you and your staff work with the school health team to implement the student’s health care and education plans.** Health care plans include the Diabetes Medical Management Plan, Individualized Health Care Plan, and Emergency Care Plans for Hypoglycemia and Hyperglycemia; the education plan includes the Section 504 Plan, other education plan, or individualized education program.

- **Communicate to staff that eating meals and snacks on time and having sufficient time to finish eating are critical components of diabetes management.** If students with diabetes fail to eat lunch on time, they could develop hypoglycemia (low blood glucose), especially if they have missed a morning snack or have had a physically strenuous or otherwise active morning at school. Under certain circumstances, supervisory lunch personnel may need to encourage the student to go to the front of the line and eat appropriate foods.

- **Obtain a copy of the student’s Emergency Care Plans for Hypoglycemia and Hyperglycemia for treating low blood glucose and high blood glucose and keep them in a known yet secure place in the lunchroom.**

- **Consult with the school nurse and the principal to determine the appropriate level of diabetes management training that you and your staff should attend for carrying out your responsibilities and complete the training.**

- **Ensure that you and your staff review the information about diabetes in this guide and refer to it, as needed, to help the student with diabetes.** (See [Follow an Individualized Meal Plan](#).)

- **Obtain a copy of the student’s meal plan from the health care plans developed by the student’s personal diabetes care team and the school nurse.** Accommodate student’s special dietary needs when medically necessary.

- **Provide breakfast and lunch menus and a meal schedule in advance to the student’s parents/guardians, including grams of carbohydrates.** Advise the parents/guardians of any unannounced menu substitutions. (See [Follow an Individualized Meal Plan](#).)

- **Review the signs and symptoms of hypoglycemia and hyperglycemia with your staff so they can recognize that a student’s behavior change could be a symptom of blood glucose changes.**

- **Be sure that you and your staff are prepared to respond immediately to the signs and symptoms of hypoglycemia and hyperglycemia, and take appropriate action in accordance with the student’s Emergency Care Plans for Hypoglycemia and Hyperglycemia.** Know when and how to contact the school nurse or trained diabetes personnel for help. Be aware of the school’s policy for activating Emergency Medical Services (EMS) in case of a diabetes emergency.

- **Ensure that you and your staff know where supplies are kept to treat hypoglycemia (e.g., with the student or in another place).** Supplies may include: 4 glucose tablets or 1 tube of glucose gel or 4 ounces of fruit juice (not low-calorie or reduced-sugar) or 4 to 6 ounces of soda (not low-calorie or reduced-sugar).
Actions for the Food Service Manager  *Continued*

- Provide input to the school health team when requested.
- Communicate with the school nurse and/or trained diabetes personnel regarding the student’s progress or any concerns about the student.
- Ensure that your staff treats the student with diabetes the same as other students, except when necessary to respond to their medical needs. Be alert for teasing and bullying of the student with diabetes due to peers’ curiosity and lack of information about injections, blood glucose monitoring, or why the student with diabetes gets to eat snacks in the classroom.
- Ensure that your staff respects the student’s confidentiality and right to privacy.
Please print and distribute to the transportation manager.

Actions for the Transportation Manager

☐ Inform drivers about which students on their bus routes have diabetes in a way that protects the student’s right to privacy and confidentiality.

☐ Ensure that drivers understand their responsibilities under Federal and State laws that may apply to students with diabetes, including Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, and the Individuals with Disabilities Education Act. Understand the procedures for implementing these laws. (See School Responsibilities Under Federal Laws.)

☐ Consult with the school nurse and the principal to determine the appropriate level of diabetes management training that drivers should attend for carrying out their responsibilities and ensure that they complete the training.

☐ Ensure that drivers obtain a copy of the student’s Emergency Care Plans for Hypoglycemia and Hyperglycemia and keep them on the bus in a known, yet secure place. Ensure that substitute drivers have access to the plans.

☐ Ensure that drivers recognize that a student’s behavior change could be a symptom of blood glucose changes.

☐ Ensure that drivers are prepared to respond immediately to the signs and symptoms of hypoglycemia (low blood glucose) and hyperglycemia (high blood glucose) and take initial actions in accordance with the student’s Emergency Care Plans for Hypoglycemia and Hyperglycemia. These plans include information on when and how to contact the school nurse, trained diabetes personnel, and Emergency Medical Services (EMS).

☐ Ensure that you and drivers know where supplies are kept to treat hypoglycemia (e.g., with the student or on the bus). Supplies may include 4 glucose tablets, 1 tube of glucose gel, 4 ounces of fruit juice (not low-calorie or reduced-sugar), or 4 to 6 ounces of soda (not low-calorie or reduced-sugar).

☐ Ensure that drivers understand and are aware that hypoglycemia (low blood glucose) can occur at any time—at the beginning of the day, on a field trip, or when children are going home.

☐ Ensure that drivers allow students with diabetes to eat snacks and drink beverages on the bus because these items may be needed at certain times to help students manage their diabetes.

☐ Ensure that drivers communicate with the school nurse, trained diabetes personnel, and other members of the school health team regarding the student’s progress as well as any concerns.

☐ Ensure that drivers treat the student with diabetes the same as other students, except when necessary to respond to their medical needs.

☐ Ensure that drivers respect the student’s confidentiality and right to privacy.
Please print and distribute to the bus driver.

Actions for the Bus Driver

☐ If you are informed that students on your bus route have diabetes, understand that you may have certain responsibilities relating to those students.

☐ Know that Federal and State laws may apply to students with diabetes and management of their disease.

☐ Attend diabetes management training required by your supervisor to learn more about diabetes and to understand what you need to do.

☐ Obtain copies of the student’s Emergency Care Plans for Hypoglycemia and Hyperglycemia (low blood glucose and high blood glucose) from the school nurse and keep them on the bus in a known yet secure place. Leave the plans readily available for substitute drivers.

☐ Understand that a change in the student’s behavior could be a symptom that the student’s blood glucose is too high or too low.

☐ Understand and be aware that low blood glucose (sugar) is a serious condition that can happen suddenly and requires immediate treatment. It can occur at any time—at the beginning of the day, on a field trip, or when children are going home.

☐ Be prepared to respond immediately to the signs and symptoms of hypoglycemia and hyperglycemia. Look over the student’s Emergency Care Plans for Hypoglycemia and Hyperglycemia for instructions on what to do and when and how to contact the school nurse or trained diabetes personnel. Be aware of the school’s policy for activating Emergency Medical Services (EMS) in case a student has a diabetes emergency.

☐ Know where supplies are kept to treat hypoglycemia (e.g., with the student or on the bus). Supplies may include: 4 glucose tablets or 1 tube of glucose gel or 4 ounces of fruit juice (not low-calorie or reduced-sugar), or 4 to 6 ounces of soda (not low-calorie or reduced-sugar).

☐ Allow students with diabetes to eat snacks and drink beverages on the bus because these items may be needed at certain times to help students manage their diabetes.

☐ Communicate with the school nurse, trained diabetes personnel, and other members of the school health team regarding the student’s progress as well as any concerns. (See How Do You Plan Effective Diabetes Management in the School Setting?)

☐ Treat the student with diabetes the same as other students, except when necessary to respond to their medical needs. Be alert for teasing and bullying of the student with diabetes due to peers’ curiosity and lack of information about injections, blood glucose monitoring, or why the student with diabetes gets to eat snacks on the bus.

☐ Respect the student’s confidentiality and right to privacy.
Please print and distribute to the school psychologist, counselor, and social worker.

**Actions for the School Psychologist, Guidance Counselor, and Social Worker**

- **Understand your responsibilities under Federal and State laws** that may apply to students with diabetes, including Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, and the Individuals with Disabilities Education Act. Understand the procedures for implementing these laws. (See [School Responsibilities Under Federal Laws](#).)

- **Work with the school health team to implement the student’s health care and education plans.** Health care plans include the [Diabetes Medical Management Plan](https://example.com), [Individualized Health Care Plan](https://example.com), and [Emergency Care Plans for Hypoglycemia and Hyperglycemia](https://example.com); the education plan includes the Section 504 Plan, other education plan, or individualized education program.

- **Consult with the school nurse and the principal to determine the appropriate level of diabetes management training you should attend** for carrying out your responsibilities and complete the training.

- **Review the information about diabetes in this guide and refer to it**, as needed, to help the student with diabetes.

- **Be prepared to respond immediately to the signs and symptoms of hypoglycemia (low blood glucose) and hyperglycemia (high blood glucose)** in accordance with the student’s [Emergency Care Plans for Hypoglycemia and Hyperglycemia](https://example.com). These plans include information on when and how to contact the school nurse or trained diabetes school personnel. Be aware of the school’s policy for activating Emergency Medical Services (EMS) in case of a diabetes emergency.

- **Participate in school health team meetings and communicate with the school nurse, trained diabetes personnel, and parents/guardians regarding the student’s progress or any concerns about the student.**

- **Work with school staff to promote a supportive learning environment for students with diabetes.**

- **Ensure that the student with diabetes is treated the same as other students, except when necessary to respond to their medical needs and any resulting educational needs.** Be alert for teasing and bullying of the student with diabetes due to peers’ curiosity and lack of information about injections, blood glucose monitoring, or why the student with diabetes gets to eat snacks in the classroom.

- **Be aware of and be prepared to respond to the emotional needs of the student.** Children react differently to having diabetes. Some are accepting and open to discussing it; others are resentful and may attempt to hide it. Often, a child will experience both types of feelings. Be aware of the student’s feelings about having diabetes and identify ways to ensure the student is treated the same as other students. (See [Deal with Emotional and Social Issues](https://example.com).)

- **Recognize that students with chronic illnesses such as diabetes may rebel by discontinuing all or part of their medical regimen.** For example, some adolescents may stop testing their blood glucose or give their parents/guardians and health care providers incorrect information about their blood glucose levels. [Adolescents with diabetes may also burn out from the daily demands of diabetes self-management.](https://example.com) For teens who rebel or have “diabetes burnout,” a temporary period of increased support and involvement by parents/guardians and school personnel can help to maintain the teen’s health while providing needed respite from the burden of diabetes management.
Actions for the School Psychologist, Guidance Counselor, and Social Worker  

- Watch for signs of eating disorders, such as unexplained weight loss, particularly in female students.
- Be aware that some students may not wish to share information about their diabetes with other students or school staff, particularly if it makes them feel different from others.
- Promote and encourage independence and self-care consistent with the student’s ability, skill, maturity, and development.
- Respect the student’s confidentiality and right to privacy.
Actions for the Parents/Guardians

☐ Notify the school principal as well as the school nurse, school psychologist or guidance counselor, and teacher(s) that your child has diabetes when the student enrolls in school, is newly diagnosed with the disease, and at the beginning of each school year.

☐ Work with your child’s personal diabetes health care team to develop a Diabetes Medical Management Plan that contains the medical orders for your child. Use the sample plan in this guide as an example of the information to include.

☐ Submit the signed Diabetes Medical Management Plan from your child’s personal diabetes health care team to the school nurse or other member of the school health team as soon as possible after your child has been diagnosed with diabetes, at the beginning of each school year, and when there are changes to your child’s plan.

☐ Permit sharing of medical information necessary for your child’s safety between the school and your child’s health care providers. Talk with your child’s personal diabetes health care team about communicating with the school health team and responding to student emergencies as they occur.

☐ Provide accurate and current emergency contact information to the school, and update the school about any changes.

☐ Obtain completed copies from the school nurse of your child’s Emergency Care Plans for Hypoglycemia and Hyperglycemia based on the medical orders in the Diabetes Medical Management Plan. These plans inform school personnel about the symptoms of low and high blood glucose, what to do, and whom to contact in case of an emergency. Be aware of the school’s policy for activating Emergency Medical Services (EMS) in case of a diabetes emergency.

☐ Attend and participate in the initial and annual meetings of the school health team to discuss implementing the medical orders in your child’s Diabetes Medical Management Plan and to review the services your child may need. Participate in developing an IHP, Section 504 Plan, other education plan, or IEP. The education plan is developed to manage the student’s diabetes safely and effectively in school, where required under Section 504 of the Rehabilitation Act of 1973 or the Individuals with Disabilities Education Act. The school health team generally includes the student, parents/guardians, school nurse, principal, 504/IEP coordinator, teachers, and other school personnel who have responsibility for your child during the school day. (See Prepare the Student’s Education Plan.)

☐ Be knowledgeable about Federal and State laws that may apply to students with diabetes, including Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, and the Individuals with Disabilities Education Act. Understand the procedures for implementing these laws. (See School Responsibilities Under Federal Laws.)

☐ Review the information in this guide about effective diabetes management in the school setting and refer to it to help your child, to promote your child’s regular attendance at school, and to work collaboratively with your child’s personal diabetes health care team and the school health team.

☐ Provide specific information to the school health team about your child’s diabetes and performance of diabetes care tasks at home.
Actions for the Parents/Guardians  Continued

☐ Inform the school nurse or designated school staff about any changes in your child's health status or medical orders.

☐ Provide and maintain all supplies and equipment necessary for implementing your child’s health care and education plans. These include blood glucose monitoring equipment, supplies for insulin administration and urine and blood ketone testing, snacks, quick-acting glucose products, and a glucagon emergency kit.

☐ Consult with the school nurse to monitor supplies and replenish them, as needed; refill or replace supplies that have expired.

☐ Provide and maintain all supplies and equipment necessary to accommodate your child’s long-term needs (72 hours) in case of a disaster, lockdown, or emergency. (See Plan for Disasters, Lockdowns, or Emergencies.)

☐ Inform appropriate school staff (principal, teachers, coaches, and others) when your child plans to participate in school-sponsored activities that take place before or after school or off campus so that health care coverage can be coordinated to ensure your child’s health and safety.

☐ Respect your child’s confidentiality and right to privacy.
Please print and distribute to the student with diabetes.

Actions for the Student with Diabetes

- Find out who is on the school health team—the people who will be helping you with your diabetes care. Know how to contact them if you need help.
- Participate in the school health team meetings to talk about your health care and education plans.
- Always wear a medical alert ID.
- Always carry a quick-acting source of glucose, as recommended by your personal diabetes health care team.
- Tell your teachers and other school staff members if you feel symptoms of low or high blood glucose, especially if you need help.
- Work with the school health team members if you need help during the school day with checking your blood glucose, getting insulin, or eating the right amount of food at the right time.
- Take charge of your diabetes care at school, as allowed in your health care and education plans.
- Talk with your school health team about which diabetes care tasks you are responsible for and which ones they will help you with. You may be responsible for the following diabetes care tasks:
  - Checking and recording blood glucose levels.
  - Figuring out the correct insulin dose you need.
  - Giving yourself insulin.
  - Throwing away needles, lancets, and other supplies you have used in a proper container or taking them home with you according to your health care and education plans.
  - Eating meals and snacks as planned.
  - Figuring out the carbohydrate (carb) content of food.
  - Treating low blood glucose with a quick-acting glucose product.
  - Keeping diabetes equipment and supplies with you at all times in a secure place.

Things You Need to Know:

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