Care of the Student with Diabetes in New Jersey’s Public Schools


- Became law on October 1, 2009
- Effective January 29, 2010
- Requires schools to take specific actions to ensure that students with diabetes are able to manage their disease while at school and to ensure the health and safety of the student and the school community
Purpose and Beliefs

• Diabetes requires management 24 hours a day.
• Students with diabetes must balance food, medications, and physical activity while at school.
• School nurses coordinate care and educate school staff to provide a safe, therapeutic environment for students with diabetes.
• Diabetes can interfere with a student’s ability to learn.
Goal: Optimal Student Health and Learning

All school staff members should have basic knowledge of diabetes and know who to contact for help.
Part One

What Does the Law Require?

Requires:
- An individualized healthcare plan and emergency healthcare plan
- Annual written authorization for the provision of care
- Authorization for release and sharing of certain medical information

The School Nurse:

- Coordinates the provision of care
- Educates all personnel about diabetes
- Trains volunteer delegates for glucagon administration
- Serves as conduit for sharing of medical information and communications with parents
- Develops and updates the student's IHP/IEHP
The Individualized Health Care Plan must include:

- Symptoms of hypoglycemia for that student and recommended treatment
- Symptoms of hyperglycemia for that student and recommended treatment
- Frequency of glucose testing
- Insulin and glucagon orders
The IHP must include:

- Times of meals/snacks and exercise
- Guidance for participation in sports and exercise
- Accommodations for activities including trips and parties
- Medical issues that might impact learning
- Communication protocols (parents, healthcare providers, school nurse)
- Education of direct-contact personnel
Self-Management

- Requires written certification of capacity from student’s healthcare provider
- Must be addressed in IHP
- Permits student to attend to care as needed on school property or school-related activity
- Requires student to dispose of equipment safely and appropriately
Self-Management

Permits student to:

- Carry necessary equipment and materials such as syringes
- Check blood glucose levels as needed in classrooms, gym, or other area
- Administer insulin, as needed
- Treat hypoglycemia or hyperglycemia

Oversight of self-care by the school nurse should be outlined in the student’s IHP
Bus Drivers*

Schools must notify bus drivers about a student with diabetes on the bus

- How to treat hypoglycemia
- Emergency protocols and how to contact parents

* District transportation coordinators are required to ensure that all bus driver’s are trained in the functions of their positions. While not mentioned in the law, district transportation coordinators should be educated and informed about diabetes and relevant student needs.
Reference Sheet

- Schools must post a reference sheet identifying signs and symptoms of hypoglycemia
- Recommended areas include the main office, cafeteria, gymnasium, training facility such as the weight room or locker room, dance studio, faculty room, and health services areas
Part Two

Policy and Procedure Considerations
Three Levels of Training

Level One: Education for All

- Overview of diabetes
- Signs and symptoms
- Common issues such as exercise, meals, and access to medication
- General emergency actions

Example: Use modules from *Diabetes Care Tasks at Schools* CD-Rom and DVD provided to each school district
Three Levels of Training

Level Two: Student Specific Training
For those with direct contact with the student

- IHP/IEHP procedures, protocols and emergency actions
- Child-specific exercise or nutrition issues
- Emotional and behavioral issues
- General information about care such as glucose testing or insulin administration

Example: Use modules from *Diabetes Care Tasks at Schools* CD-Rom and DVD provided to each school district along with student’s IHP/IEHP
Three Levels of Training

Level Three: Volunteer Glucagon Delegates

Student-specific information in Level Two plus:

- Child-specific information on hypoglycemia symptoms and IHP procedures
- Successful demonstration by delegate of glucagon administration and emergency protocols

Example: Use modules from *Diabetes Care Tasks at Schools* CD-Rom and DVD provided to each school district, the student’s IHP/IEHP, and glucagon training materials including injection kit
Glucagon Delegates

- School nurse has primary responsibility for emergency administration of glucagon.
- The school nurse may delegate this task to personnel who have been trained and have demonstrated the appropriate skills and knowledge to do so safely.
- Delegates may only be used when the school nurse is not physically present at the scene.
Glucagon Delegates

- Delegates must be:
  - School district employees who volunteer to serve as a delegate
  - Selected by the school nurse in consultation with the Board of Education
  - Trained by the school nurse or other qualified health care professional to administer glucagon
Delegation Considerations

• The delegate should be reasonably expected to have regular responsibility for or contact with the student.

• The delegate should not be a high school student employed by the district in an afterschool or summer program.

• The delegate must be an employee of the district; the delegate cannot be an older sibling or relative attending the school, a neighbor, or school volunteer.

• Delegates must be sensitive to privacy issues and confidentiality. A delegate may need to inject glucagon into a student’s thigh or buttock.
Delegation Considerations

- Glucagon administration requires injecting a vial with liquid, mixing the medication, and drawing it into a syringe before injecting it into the student's arm, thigh, or buttocks. Volunteers should be made aware of this before agreeing to participate.
- Volunteers need manual dexterity to accomplish this task.
- Volunteers must be able to remain calm and communicate well under pressure.
- Volunteers may need monthly practice and review sessions to evaluate and reinforce newly acquired skills.
Delegation Considerations

- Volunteers who transfer to another school must be retrained and evaluated by the nurse in that school since that nurse delegates the task to the volunteer.
- Delegates should complete an annual refresher training. All training should be documented by the school nurse.
- Districts that frequently transfer personnel should consider the availability of adequate delegates in schools with large numbers of students with diabetes.
- CPR-AED certification is highly recommended for delegates.
Other Policy Issues

Who provides the glucagon kit?

- Glucagon kits cost $80-$120 each and must be replaced when used or when the medication expires.
- Expired kits can be used for training purposes only.
- Each student’s parent/guardian must provide the school with a glucagon kit specifically for that child.
- The school provides secure storage for the kit.
- The school nurse ensures that delegates can use the kit appropriately.
Other Policy Issues

Students with diabetes may need:

- Unlimited access to water such as use of water bottle in the classroom or on the school bus
- Unrestricted access to bathrooms
- Access to snacks in the classroom, gym, or on the bus at varying times of the day
- Access to food on a regular schedule
Other Policy Issues

Schools should:

- Not deny the student access to food
- Consider food and exercise issues when scheduling physical education, recess or dance classes
- Notify parents well in advance of field trips and parties
- Develop policies to serve only healthy foods at school functions and parties
- Develop procedures to address the needs of students with diabetes during emergency evacuations or lock-downs including access to medication, food, and emergency care
Other Policy Issues

Accommodations for Self-Management

- The school nurse, parents/guardian and the student should consult to determine the most appropriate location for glucose checks and insulin administration. Consider:
  - The age and developmental level of student
  - Privacy concerns
  - The length of time since diagnosis
  - The child’s capacity to implement procedures, including clean-up and disposal of medical waste, in a consistent, correct and safe manner and in accordance with district bloodborne pathogens protocols.
For More Information

New Jersey Department of Education
Office of Student Support Services
Email: Doenurse@doe.state.nj.us
Phone: 609-292-5935
Website
http://www.nj.gov/education/students/safety/