



Department: Programs and Services
Section: Student Services

Generally:

The Annapolis Valley Regional School Board recognizes that, within the student population served by the Board, there are students with Type 1 Diabetes that require medical monitoring, intervention(s) and medication(s) during the school day in order for the student to attend school. Diabetes management is a shared responsibility that includes students with Type 1 Diabetes, their parent(s)/guardian(s), caregivers, the entire school community, and health care providers. The prevention, identification and treatment of low blood glucose are paramount in the management of students with diabetes.

Parents/guardians are the best people to provide specific information about their child to the school. Coordination of support and/or educational needs may be accessed through the Coordinator of Student Services. Annapolis Valley Health Diabetes Educators may also be involved with the family and school to support the student with diabetes in the school setting.

Specifically:

1.0 Application

- 1.1 This administrative procedure applies to students **only** when they are under the care of school personnel, for example, when:
 - students are on school property during school hours
 - students are participating in school activities during the school day
 - students are engaged in school-sponsored activities outside of regular school hours and have the permission of their parents/guardians to participate in such activities
- 1.2 This procedure does **not** apply when students are attending an event as spectators outside of regular school hours (for example, watching a hockey or soccer game) when students are not under the care and supervision of school personnel.
- 1.3 This procedure outlines provisions for:
 - 1.3.1.1 the supervision and/or testing of blood glucose;
 - 1.3.1.2 the administration of fast acting glucose;
 - 1.3.1.3 the supervision of insulin administration either by pen or pump; the supervision and/or administration of a correction bolus(s) or Carb Bolus(s) via insulin pump; the administration of glucagon when there is a completed Diabetes Management and Emergency Plan of Care for Students with Type 1 Diabetes (Appendix A) and Record of Insulin Administration via Insulin Pump (Appendix B) and in conjunction with Annapolis Valley Regional School Board BP/AP 403.10 Medication/Medical Treatment; and forms AP403.k - Administration of Prescribed Medications to Students; and AP403.l - Administration of Prescribed Medication Record.

2.0 Responsibility

- 2.1 This administrative procedure applies to all students with Type 1 Diabetes while in school, parent(s)/legal guardian(s), teachers, principals, appropriate school staff and health care professionals.
- 2.2 AVRSB requires **school administrators** of students with Type 1 Diabetes to:
 - 2.2.1 implement procedure, assisted as needed by parent(s)/legal guardian(s) and appropriate school staff in conjunction with Student Services staff and appropriate medical professionals.
 - 2.2.1.1 when a school principal confirms that a student has Type 1 Diabetes and requires a Diabetes Management and Emergency Plan of Care for Students with Type 1 Diabetes (Appendix A), the principal will consult with the Coordinator of Student Services, or designate.
 - 2.2.1.1.1 In such a case, parties involved in the completion of the Diabetes Management and Emergency Plan of Care for Students with Type 1 Diabetes (Appendix A) should include parent(s)/legal guardian(s), the Coordinator of Student Services, or designate, school personnel, and appropriate health care professionals.
 - 2.2.1.2 In the event that a teacher or other member of a school staff is informed that a student has Type 1 Diabetes and requires a Diabetes Management and Emergency Plan of Care for Students with Type 1 Diabetes (Appendix A), the teacher or other member of staff is required to notify the school principal as soon as possible.
 - 2.2.1.2.1 Principals are required to advise school staff of this requirement at the beginning of each school year.
 - 2.2.2 Ensure there is a completed Diabetes Management and Emergency Plan of Care for Students with Type 1 Diabetes (Appendix A) for each student with Type 1 Diabetes, and
 - 2.2.2.2 ensure Diabetes Management and Emergency Plan of Care for Students with Type 1 Diabetes (Appendix A) is updated and/or reviewed and signed annually.
 - 2.2.3 Ensure, in conjunction with the Coordinator of Student Services, or designate, that the student (if age appropriate) and the parent(s)/legal guardian(s) understand the Diabetes Management and Emergency Plan of Care for Students with Type 1 Diabetes (Appendix A).
 - 2.2.4 Ensure staff is aware of the student(s) with diabetes and are trained in diabetes care and emergency response by the Coordinator of Student

Services, or designate, or a designated licensed health care professional as per 3.0.

2.2.5 Ensure that at least two staff members are available and trained in the administration of glucagon for a severe hypoglycemic reaction. It is recommended that the physical education teacher be one of the individuals who are comfortable with glucagon administration.

2.2.5.1 Glucagon is only to be administered when there is a completed Diabetes Management and Emergency Plan of Care for Students with Type 1 Diabetes (Appendix A) and in conjunction with BP/AP 403.10 Medication and Medical Treatment; and forms AP403.k - Administration of Prescribed Medications to Students; Form AP403.l - Administration of Prescribed Medication Record.

2.2.6 Delegating staff to ensure that the student with diabetes in grade primary to five, as well as newly diagnosed students, have the support they need at school to manage their diabetes.

2.2.7 Ensure the school provides a private area for the student to do their testing, administer insulin and dispose of sharps.

2.2.8 Ensure provisions are in place to support the student with Type 1 Diabetes in the event of a lock-down situation or emergency evacuation (i.e. access to a fast acting glucose source, carbohydrate snack, and glucagon).

2.3 AVRSB requires all **parent(s)/legal guardian(s)** of students with Type 1 Diabetes to:

2.3.1 notify the school principal of the student with Type 1 Diabetes.

2.3.2 complete a Diabetes Management and Emergency Plan of Care for Students with Type 1 Diabetes (Appendix A).

2.3.3 meet with designated school staff to review Diabetes Management and Emergency Plan of Care for Students with Type 1 Diabetes (Appendix A) which includes the interventions that school staff may be required to perform in the daily management of a student with diabetes such as blood glucose monitoring, supervision of diet, supervision of insulin via a pump or injection, administration and the emergency response for an incidence of mild, moderate and severe hypoglycemia.

2.3.3.1 In subsequent years, the Diabetes Management and Emergency Plan of Care for Students with Type 1 Diabetes (Appendix A) will be reviewed and signed at the beginning of each school year. Students 16 years and older, may sign the form on their own behalf.

2.3.4 Encourage student to report signs/symptoms of hypoglycemia to school staff.

2.3.5 Encourage student to report malfunctions of the insulin pump (if applicable).

- 2.3.6 Respond to insulin pump malfunctions (if applicable).
 - 2.3.7 Supply fast acting glucose.
 - 2.3.8 Administer insulin by injection if student is not capable.
 - 2.3.9 Inform the school of any changes in the student's Diabetes Management and Emergency Plan of Care for Students with Type 1 Diabetes (Appendix A) (i.e. initiation of a pump).
 - 2.3.10 Make decisions regarding medical care.
 - 2.3.11 Strive for student independence in managing diabetes while at school (usually by grade 5).
 - 2.3.12 Label foods that the student is to eat with the specific amount of carbohydrates or insulin required if the student requires assistance in taking insulin via pump.
 - 2.3.13 Calibrate and maintain equipment – insulin pump, insulin pen, blood glucose testing equipment.
 - 2.3.14 Provide all supplies such as blood testing supplies, fast acting glucose, activity snacks and any medication (i.e. glucagon).
 - 2.3.15 Encourage student to wear a Medic Alert® bracelet (or other emergency identification).
 - 2.3.16 Assist in diabetes education to ensure the student's individual needs are understood.
- 2.4 AVRSB requires **classroom teachers** of students with Type 1 Diabetes to:
- 2.4.1 be knowledgeable and comfortable with the student's Diabetes Management and Emergency Plan of Care for Students with Type 1 Diabetes (Appendix A) (i.e. the signs/symptoms of hypoglycemia, the administration of fast acting glucose, the testing of blood glucose, the supervision of insulin administration either by pen or pump (student may need assistance to enter into the insulin pump a correction or carb bolus).
 - 2.4.1.1 All correction bolus(es) or carb bolus(es) must be verified by two staff members that the correct number of units or carbs has been accurately entered into the insulin pump and documented on the Record of Insulin Administration via Insulin Pump Form (Appendix B).
 - 2.4.2 Ensure the student is comfortable to report signs of hypoglycemia and/or pump malfunctions.
 - 2.4.3 Ensure Diabetes Management and Emergency Plan of Care for Students with Type 1 Diabetes (Appendix A) is accessible for substitutes.

- 2.4.4 Attend annual diabetes education sessions, especially if you have a student with diabetes in your classroom.
 - 2.4.5 Ensure that parents/legal guardians are given advance notice of changes to the school day, such as field trips, parties, etc.
 - 2.4.6 Ensure that diabetes supplies (fast acting glucose, glucagon, blood testing equipment) and the diabetes emergency plan are with the student if they are on excursions away from the school property.
 - 2.4.7 Consider that special considerations may be required to the Diabetes Management and Emergency Plan of Care for Students with Type 1 Diabetes (Appendix A) if the student is away from the school (i.e. is there a person who can test for blood glucose and give glucagon if needed, how/when 911 will be accessed, etc.).
- 2.5 AVRSB requires **additional school staff**, such as physical education teachers, music teachers, educational assistants, bus drivers, lunch room staff and sports coaches of students with Type 1 Diabetes to:
- 2.5.1 notify the school principal as soon as possible as per 2.2.1.1, if informed that a student has Type 1 Diabetes and thereby necessitates a Diabetes Management and Emergency Plan of Care for Students with Type 1 Diabetes (Appendix A).
 - 2.5.2 be knowledgeable and comfortable with the student's Diabetes Management and Emergency Plan of Care for Students with Type 1 Diabetes (Appendix A) i.e. the signs/symptoms of hypoglycemia, the administration of fast acting glucose, the testing of blood glucose, the supervision of insulin administration either by pen or pump (student may need assistance to enter into the insulin pump a correction or carb bolus). Verify by signature that a correction bolus or carb bolus has been accurately entered into the insulin pump.
 - 2.5.2.1 All correction bolus(es) or carb bolus(es) must be verified by two staff members that the correct number of units or carbs has been accurately entered into the insulin pump and documented on the Record of Insulin Administration via Insulin Pump Form (Appendix B).
 - 2.5.3 Attend annual diabetes education sessions, especially if you have a student with Type 1 Diabetes in your care.

3.0 Educational Requirements of School Staff

- 3.1 If a school has a student with diabetes, it is recommended that all school staff receive some level of diabetes education. Consideration must be given to the education of all teachers and educational assistants but also school administrative staff, lunch room staff and bus drivers.
- 3.2 For all students, regardless of age:

- 3.2.1 All staff should know who the student(s) with diabetes are within the school and be knowledgeable of the student's symptoms of hypoglycemia.
- 3.2.2 All staff should know the student's Diabetes Management and Emergency Plan of Care for Students with Type 1 Diabetes (Appendix A), including where fast acting glucose and glucagon is kept for the student.
- 3.2.3 There should be at least two staff members who know how to administer glucagon for a severe hypoglycemic reaction. (It is recommended that the physical education teacher be one of the individuals who are comfortable with glucagon administration.)
 - 3.2.3.1 Glucagon is only to be administered when there is a completed Diabetes Management and Emergency Plan of Care for Students with Type 1 Diabetes (Appendix A) and in conjunction with BP/AP 403.10 Medication and Medical Treatment; and forms AP403.k - Administration of Prescribed Medications to Students; and AP403.I - Administration of Prescribed Medication Record.
- 3.2.4 For students who are newly diagnosed or are in grades primary to five: In addition to 3.1 and 3.2 there should be staff with more extensive diabetes education. This would include education for the measurement of blood glucose, the supervision of insulin via a pen or a pump, how to enter a correction or carb bolus on a pump for students who need assistance, the monitoring of carbohydrate consumption and other procedures that may be required for the younger student

Monitoring:

- The Director of Programs and Services is responsible for the implementation, monitoring and revision of this administrative procedure.
- This administrative procedure will be monitored annually.

Superintendent Approved: March 18/13

Ref: BP 403.21, Appendices A and B; BP/AP 403.10; AP403.k, Form AP403.I; AP403.k-1

Monitoring Date: Annually

Revised: