

CAPITAL AREA SCHOOL FOR THE ARTS CHARTER SCHOOL (CASA)

No. 209.2

SECTION: PUPILS

TITLE: DIABETES
MEDICATION,
EQUIPMENT & SELF-
ADMINISTRATION
POLICY

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REVISED:

209.2 DIABETES MEDICATION, EQUIPMENT, AND SELF-ADMINISTRATION POLICY

The Board of Trustees of the Capital Area School for the Arts Charter School ("Charter School"), recognizes that a number of students have a medically certified diabetic condition requiring medication, equipment or machinery to be administered during school hours in order to maintain health and to function in the school setting. A student with diabetes shall be permitted to monitor glucose levels and otherwise attend to the care and management of his or her diabetes in the classroom in any area of the school or school grounds and at any school-related activity if requested by the parent or guardian in accordance with this Policy and Charter School procedures. The key to optimal blood glucose control is to carefully balance food, exercise, and insulin or medication. As a general rule, food makes blood glucose levels go up, while exercise and insulin make blood glucose levels go down. Other factors, including growth and puberty, illness, mental stress, or injury can also affect blood glucose levels.

Diabetes is a chronic disease in which the body does not make or properly use insulin. Insulin is a hormone needed to convert sugar, starches, and other food into energy. When insulin is no longer made, it must be obtained from another source, such as insulin injections or an insulin pump. When the body does not use insulin properly, oral medications may be taken instead of, or in addition to, insulin injections. There is not currently any cure known for diabetes. The goal of managing a student's diabetes and of medication therapy is to maintain even blood sugar levels and allow the student to benefit from the Charter School's education program.

The goal is to control blood glucose levels by keeping them within a target range that is determined for each child. Therefore, a Charter School health team should be gathered in order to review the student's Diabetes Medical Management Plan (DMMP), which should be part of the student's Individual Health Plan and Emergency Care Plan (ECP) in order to develop the 504 Plan or IEP, which incorporates these various plans.

If the school is not provided with a DMMP by student's parent(s), the school **must** contact the parent(s) and inform them of the need to have a DMMP developed with their child's healthcare provider and to provide a copy of this plan to the school as soon as possible.

Depression is another concern for students with diabetes. It is increasingly being recognized

as quite common among children and teens generally, and even more so in those with diabetes. Healthcare providers and school personnel must be aware of emotional and behavioral issues related to diabetes care and management and refer students with diabetes and their families for counseling and support as needed.

Written plans for effective diabetes management include:

Individualized Healthcare Plan (IHP) - This plan is required by professional standards of practice and uses the nursing process (assessment, diagnosis, planning, implementation, and evaluation) to determine a plan of action that meets the healthcare needs of a student during the school day. This plan, initiated by the Certified School Nurse, provides written directions for school health personnel to follow in meeting the individual student's healthcare needs. While parental involvement is not required, it is strongly encouraged.

Emergency Care Plan - This plan is based on the information provided in the student's Individualized Healthcare Plan and specifically describes how to recognize hypoglycemia (low blood sugar) and hyperglycemia (high blood sugar) and what to do when signs or symptoms of these conditions are observed in students with diabetes.

The school nurse usually coordinates the development of the Emergency Plan, and the plan should be distributed to all school personnel who have responsibility for students with diabetes including administrators, teachers, counselors, bus drivers, food service managers, and lunchroom personnel, once the student's parent(s)/ guardian(s) have signed any necessary consent form(s) allowing such disclosure.

Diabetes Medical Management Plan - This plan should be part of the Individualized Healthcare Plan (IHP) and Emergency Care Plan (ECP). This plan is developed by a student's personal healthcare team and family. It outlines the prescribed healthcare regimen and should be signed by the student's physician or another member of the student's personal healthcare team. The Medical Management Plan may include information such as the student's date of diagnosis, current health status, list of diabetes equipment and supplies, specific medical orders, and emergency contact information.

The following information must be provided in the DMMP to the Charter School's Nurse:

- The name of the medication;
- The dose and maximum dosages;
- The times when medication is to be taken;
- The diagnosis or reason medicine is needed (unless this is confidential);
- Information on serious reactions that could occur and appropriate emergency responses;
- That the child is qualified and able to self-administer the medication;
- Consent for administration of medication or equipment, contact with student's personal and emergency health care providers and the release of information to such health care providers and school personnel;

The Charter School will require a written statement in the DMMP from the parent or guardian that states:

- The Charter School is to comply with the health care provider's orders;
- The Charter School and/or school employee comply with the order of the healthcare provider and that the School/School employee be relieved of any responsibility for the benefits or consequences of the prescribed medication which is parent-authorized; and
- The Charter School bears no responsibility or liability for ensuring that the medication is taken.

The Charter School has the right to require a statement from the health care provider for continued use of any medication beyond a specified time period. The Charter School may also require updated prescriptions and parental approvals on an annual basis.

School Nurse Duties:

Under the Pennsylvania Nurse Practice Act, there is no provision for a registered nurse (RN) to delegate nursing tasks, such as assessing blood glucose or administering insulin or glucagon to an unlicensed individual. Supplemental licensed nurses who are not certified school nurses must work under the direction of the school nurse and cannot be assigned a caseload. A licensed nurse must have an order for medications. Without an order, licensed nurses administering medication are diagnosing and prescribing treatment, which is outside of nursing practice parameters and is within the practice of medicine defined by the Medical Practice Act of 1985.

Section 504/IEP Considerations:

Students with IHPs and ECPs may also have an Individualized Education Plan (IEP), or a 504 Student Accommodation Plan to ensure school nursing services and access to the learning environment.

If a student's diabetes condition worsens to the point that it interferes with the student's ability to access his/her education at the Charter School, the student may be eligible for a Section 504 Plan or IEP. The Section 504 regulations define a person with a disability as any person who (i) has a physical or mental impairment that substantially limits one or more major life activities, (ii) has a record of such impairment, or (iii) is regarded as having such an impairment. In determining whether a student with diabetes is covered by Section 504, both the medical condition and extent of the student's treatment program must be considered. The standard for coverage is the same pursuant to Title II of the ADA as it is pursuant to Section 504. Under Section 504, a student does not have to receive special education services in order to receive related aids and services.

Pursuant to IDEA, the category of "other health impairment" includes diabetes as one of the

health conditions listed to qualify under IDEA. The student's diabetes must adversely affect educational performance to the point that the student requires special education and related services, as defined by state law. Under IDEA, FAPE means special education and related services that meet state standards and are provided in conformity with an Individualized Education Program (IEP). Typically, an IEP is more specific than a Section 504 Plan with regard to the student's academic needs. Ideally, these documents are developed because of a cooperative effort involving the family, the child's health care team and the school/school district.

While the specifics of a student's 504 Plan or IEP will vary based on each student's unique needs, plans for students with diabetes usually include the following components:

- Where and when blood glucose monitoring and treatment will take place;
- Consent for administration of insulin, blood glucose monitoring, contact with health care providers and the release of information to health care providers and school personnel;
- Identity of licensed school nurses who are authorized to conduct blood glucose assessment, insulin and glucagon administration, and treatment of hypoglycemia and hyperglycemia;
- Location of the student's diabetes management supplies;
- Free access to the restroom and water fountain;
- Nutritional needs, including provisions for meals and snacks;
- Plans to enable full participation in all school sponsored activities and field trips. Students' education plans should carefully describe the plan for coverage and care during school sponsored activities, which take place while under school jurisdiction during or outside of school hours.
- Alternative times for academic exams if the student is experiencing hypoglycemia or hyperglycemia;
- Permission for absences, without penalty, for doctors' appointments and diabetes-related illness;
- Maintenance of confidentiality and the student's right to privacy.

Reference should be made to the Board of Trustee's Section 504 Plan Policy and/or the Annual Notice of Special Education for guidance as to qualifying for an IEP and contact information for Charter School personnel.

CEO Responsibilities:

The Board delegates the following responsibilities to the CEO and/or his/her designee(s) for implementation:

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

- Ensure sufficient allocation of resources to manage students with diabetes in the Charter School;
- Ensure the development & implementation of a system that keeps Charter School health services informed of the pending enrollment of students with diabetes and any related enrollment changes that may occur throughout the school year and from year to year;
- Promote a supportive learning environment for students with diabetes;
- Promotes a school environment and treats students with diabetes the same as other students, except to be responsive to medical needs as outlined in the student's written IHP, IEP, or other education plan;
- Identify all staff members who have responsibility for students with diabetes;
- Meet at least annually with the Charter School health team;
- Arrange and attend a meeting of the Charter School health team members (student, family, school nurse, 504/IEP coordinator, teacher(s), and other staff members who have primary responsibility for the student) before the school year starts, or when the child is newly diagnosed, to discuss medical accommodations, educational aids and services related to the student's needs;
- Support diabetes management training for the Charter School Nurse and other staff responsible for students with diabetes;
- Provide for practices that alert all Charter School-related staff members who teach or supervise a student with diabetes. Ensure that these staff members, including the bus driver, are familiar with the accommodations and emergency procedures outlined in the student's DMMP, ECP, 504 Plan, IBP or other education plan;
- Provide for practices that alert all substitute personnel. Ensure that they are aware of the needs and emergency procedures for students with diabetes;
- Work with the Charter School health team to ensure the implementation of the student's written plans, including the Diabetes Medical Management Plan and education plans. Monitor plan compliance through the Charter School health team, school nurse and IEP Team, if applicable;
- Ensure that the student's confidentiality & right to privacy is respected;
- Help establish on-campus and off-campus (for field trips and school-sponsored activities) emergency protocols;
- Include diabetes awareness as part of the Charter School health or cultural education;
- Facilitate & support ongoing communication between parents/ guardians of students with diabetes and the Charter School staff;

Nursing Implications for Diabetes Mellitus:

- Obtain a complete health history on the student from the parent(s)/ guardian(s). Request that the parent(s)/ guardian(s) provide information regarding the student's past medical history, the name of the primary care provider/ licensed prescriber and medications.

- Develop an IHP and an ECP for students with diabetes. The School Nurse should also be involved in the development of a 504 Plan.
- Manage the diabetic student with a balance of nutrition, exercise and hyperglycemic agents (oral or injectable), monitoring of blood glucose levels and good general hygienic care. Strict adherence to the medical regimen is essential for health maintenance and prevention of secondary complications.
- Ensure that insulin is stored and handled properly.
- Follow Standard Precautions during glucose monitoring and when disposing of insulin syringes and testing equipment.
- Anticipate concerns that may affect the student's participation in the school program. Educate the parent(s)/ guardian(s) regarding school practices and policies.
- Invite community resources to participate in the education of school personnel regarding diabetes in the classroom.
- 8. Educate parent(s)/ guardian(s), school personnel and students about diabetes including signs and symptoms of hyperglycemia and hypoglycemia and how to respond to them.

Guidelines for Self-Administration:

In order to ensure that a student has his or her diabetes medication and equipment immediately available when needed, this Charter School Policy allows school aged children to carry (possess) and use (self-administer) their diabetes medication and equipment. The Charter School's decision to allow a student to possess and self-administer diabetes medication will be based on the maturity of the student, the severity of the diabetes, and the likelihood of misuse. In order for a student to be allowed to possess and self-administer diabetes medication, this Charter School's policy requires the following responsible behavior from the student:

- Verbally explain the reason for use of the insulin pump and glucose checking equipment to the school doctor or school nurse;
- Identify the appropriate dosage of the individual medication(s);
- Identify the effects and the side effects of medication to the school doctor or school nurse;
- Demonstrate to the school doctor or school nurse the ability to check and write down blood glucose levels, figure out right insulin doses, and how to dispose of needles, lancets, and other supplies you have used in approved containers;

- Behave responsibly when monitoring glucose levels and/or administering insulin or medication;
- Acknowledge the danger of seeking help or treatment alone if having symptoms of low or high glucose or not feeling well;
- Identify placement of glucose monitoring equipment to be kept on his/her person at all times;
- Acknowledge the need to notify the school doctor or school nurse immediately following glucose monitoring and/or use of insulin pump or medication;
- Demonstrate knowledge of how to access assistance for help regarding use of or side effects from use of diabetes equipment/ medications;
- Notify the school nurse immediately following each use of insulin pump or
- Understand and acknowledge that the student is restricted from making their inhaler available to other students. The student's privilege to self-administer medication or equipment may be revoked or restricted if the student abuses or ignores Charter School policies. This prohibition must be set forth in the Student Code of Conduct that is distributed to all Charter School families on an annual basis.

Identified Employee - Act 86 of 2016

Act 86 of 2016 added Sections 1414.3 - 1414.8 to the Public School Code and is a voluntary option (not mandated) for schools. If schools choose to opt into Act 86 they must be sure to **read Act 86 at**

<http://www.health.pa.gov/My%20Health/School%20Health/Documents/Chronic%20Disease/Diabetes/Act%2086%20of%202016-%20PSC.pdf> and the Diabetes in School

Children, Recommendations and for School Personnel Resource Guide at

<http://www.health.pa.gov/My%20Health/School%20Health/Documents/Chronic%20Disease/Diabetes/Final%20Diabetes%20In%20School%20Children.pdf>.

Act 86 permits school nurses, in consultation with their chief school administrator or a designee, to identify at least one school employee ("Identified Employee") in each school building attended by a student with diabetes to be designated in a student's service agreement or Individualized Education Program (IEP), to administer diabetes medications, use diabetes monitoring equipment, and provide other diabetes care. If the school building attended by a student with diabetes does not have a school nurse assigned to carry the caseload full-time, the chief school administrator may consult with the school nurse to identify a school employee.

The Identified Employee should not be the school nurse, and does not need to be a licensed health care practitioner. The Identified Employee may decline the responsibility and related directives. An Identified Employee is required to complete annual education in specifically-

identified areas through educational modules developed by the Pennsylvania Department of Health (DOH) in consultation with the Pennsylvania Department of Education (PDE), annual education offered by a licensed health care practitioner with expertise in the care and treatment of diabetes that includes information substantially similar to that in the educational modules, or both.

A school employee who is not a licensed health care practitioner and who has successfully completed the education modules or annual education may be designated in a student's service agreement or IEP. School employees who are not licensed health care practitioners shall only be authorized to administer diabetes medications via injection or infusion following annual education by a licensed health care practitioner with expertise in the care and treatment of diabetes and following the school entity's receipt of written authorization from both the student's health care practitioner and parent or guardian that an educated school employee, who is not a licensed health care practitioner, may administer specified medications.

Family Education Rights and Privacy Act (FERPA):

FERPA generally prohibits schools from disclosing personally identifiable information in a student's education record, unless the school obtains the consent of the student's parent or the eligible student (a student who is 18 years old or older or who attends an institution of postsecondary education). FERPA does allow schools to disclose this information, without obtaining consent, to school officials, including teachers, who have legitimate educational interests in the information and in the educational interests of the child. Charter schools that do this must include in their annual notification to parents and eligible students the criteria for determining who constitutes a school official and what constitutes a legitimate educational interest. Additionally, under FERPA, Charter Schools may not prevent the parents of students, or eligible students themselves, from inspecting and reviewing the student's education records.