

DIABETES MANAGEMENT POLICY

ROLES AND RESPONSIBILITIES FOR ELEMENTARY AND SECONDARY SCHOOLS

SCHOOL PRINCIPAL

Operational Duties

- 1. Reviews Diabetes Administrative Procedures with entire staff each year in September and throughout the school year when required.
- 2. Notifies cafeteria staff, lunchroom supervisors, other school based staff and volunteers of the individual student's Student Diabetes Management Plan of Care.
- 3. Advises occasional teachers to review the Student Diabetes Management Plan of Care for students in their assigned classroom.
- 4. Ensures that the parent/guardian/caregiver is called and emergency action is taken as required when the student has not responded to the actions outlined in the Student Diabetes Management Plan of Care. Where necessary, arranges for transport of students to a hospital or emergency medical facility. Designates a staff person to accompany the student to the hospital.
- 5. Provides a location where the student feels comfortable to self-monitor and/or self-administer medication (this could be the student's classroom).
- 6. Provides an accessible location(s) for the student's emergency supplies in the school office and classroom, as necessary.
- 7. Informs Catholic School Council of the Board procedure on Diabetes Guidelines and provides information on diabetes identification and prevention.
- 8. Provides appropriate supervision, including during self-monitoring and/or self- administration of medication, as appropriate.
- 9. Sharps Containers: Communicates procedures to all staff for the safe disposal of sharps, lancets and testing strips. Upon the sharps container being filled, the principal will contact human resources to request replacement of the filled sharps container and removal of the current sharps container.
- 10. Communicates universal precautions for blood and bodily fluids.
- 11. Informs Niagara Student Transportation Services (NSTS) of the student's medical condition with parental consent and directs parents to provide a low blood sugar kit (glucose tablets) as per the Student Diabetes Management Plan of Care.
- 12. If medical professionals are unable to access the school (i.e. lockdown, inclement weather, etc...) an action plan will be developed to meet the individual student's needs.

Consent and Parental Involvement

- 1. Ensures that upon registration, parent/guardian/caregiver and students are asked to supply information on diabetes.
- 2. Meets with parent/guardian/caregiver to complete the following:
 - Student Diabetes Management Plan of Care (Appendix B)
 - Student Diabetes Emergency Action Plan (Appendix C)
 - Student Diabetes Management Plan of Care Annual Review (Appendix D) (when there have been no significant changes to the Student Diabetes Management Plan of Care)
 - Administration of Prescribed and Non-Prescribed Medication During School Hours
 (Appendix E)
 - Parental Consent for Interscholastic Athletics (Appendix F)
 - Consent to Disclose Personal Health Information (Appendix G)

- 3. Convenes a Case Conference which may include parent/ guardian/caregiver, the student if appropriate, and school staff to gather and share medical information related to the condition including identification and management of an individual student's diabetes. In some instances, Local Health Integration Network (LHIN) Case Manager, and/or Diabetes Education Centre Personnel may also be part of the Case Conference.
- 4. Works closely with the parent/guardian/caregiver and student with diabetes to provide ongoing support.
- 5. Requests parent/guardian/caregiver provides all required supplies and food for their children.
- 6. Ensures that LHIN is contacted for all students who are unable to manage their blood glucose (sugar) monitoring, insulin injections or pump independently as well as to request support from the student's medical managed care facility for training and education of involved school personnel.

Documentation

- 1. Ensures the annual completion of a file for each student including but not limited to:
 - Diabetes Management Plan of Care (which includes an Emergency Response Plan); and
 Forms identified in 2.4(a) (ii) (B)
 - Copies will be maintained in the documentation file of the OSR.
- 2. Communicates information on diabetes to parent/guardian/caregiver, students, employees and volunteers and updates information as appropriate.
- 3. Ensures that Student Diabetes Emergency Action Plan is posted in non-public areas of the school (i.e. staff room and/or school office, etc.) and available in the classroom for the teacher, supply staff, and volunteers.
- 4. Ensures Student Management System reflects students identified with diabetes and is available to Niagara Student Transportation Services (NSTS).

Professional Learning

- 1. Provides information on managing diabetes to school-based staff and others who are in direct contact with students on a regular basis.
- 2. Provides information for school staff regarding how to respond to hypoglycemic incidents and other emergency situations related to diabetes.
- 3. Provides teachers with appropriate resources (available through the Diabetes Education Centre) to use in their classrooms.

TEACHERS AND CLASSROOM SUPPORT STAFF

- 1. Reviews and maintains Student Diabetes Management Plan of Care and the Student Diabetes Emergency Action Plan and ensures it is available in the classroom for review by staff and occasional teachers.
- 2. Participates in case conferences with parent/guardian/caregiver, principal and health professionals to receive information and resources on diabetes management.
- 3. Permit the student with diabetes to take action to prevent or treat low blood glucose (sugar).
- 4. Allows flexibility in class routine and school rules as required.
- 5. Informs parent/guardian/caregiver when the supply of fast acting sugar (oral glucose, juice etc.) is running low.
- 6. Develops open lines of communication and encourages student(s) to indicate low blood sugar when he/she feels the first symptoms or feels unwell.
- 7. Notifies parent/guardian/caregiver of the student with diabetes of school trips, special events, and athletic activities. Takes steps necessary to support the safety of the student (e.g. refer to Student Diabetes Emergency Action Plan).
- 8. Takes appropriate supplies and parent supplied Excursion Kit on all trips off the school property.
- 9. Provides an accessible, secure and safe location for items for blood sugar monitoring and insulin injections. The student's low blood sugar kit should be available in the classroom as well as in the gym.
- 10. Follows the Student Diabetes Management Plan of Care during school-sanctioned excursions

and provides it to other individuals as required.

PARENT/GUARDIAN/CAREGIVER OF A STUDENT WITH DIABETES

- 1. Informs the school of the student's diabetes and completes the following forms:
 - Student Diabetes Management Plan of Care (Appendix B)
 - Student Diabetes Emergency Action Plan (Appendix C)
 - Student Diabetes Management Plan of Care Annual Review (Appendix D) (when there have been no significant changes to the Student Diabetes Management Plan of Care)
 - Administration of Prescribed and Non-Prescribed Medication During School Hours (Appendix E)
 - Parental Consent for Interscholastic Athletics (Appendix F)
 - Consent to Disclose Personal Health Information (Appendix G)
- 2. Participates in case conferences with school principal, teacher, involved health professionals as required.
- 3. Informs school administration regarding changes in the student's health, lifestyle, diabetes procedures, management and updates emergency contact numbers on an on-going basis.
- 4. Provides and replenishes all necessary diabetes related supplies as listed on the Student Diabetes Management Plan of Care.
- 5. Teaches student about their diabetes and strategies to manage diabetes at school. Parents are encouraged to access community resources for support.

STUDENT WITH DIABETES

With an understanding of diabetes as age appropriate and according to ability:

- Recognizes and manages the symptoms of a low blood sugar reaction.
- Self-monitor and follow Student Diabetes Management Plan of Care.
- Has demonstrated their ability to self-inject as verified by their health care team, physician, or LHIN.
- Informs an adult promptly that he/she has diabetes as soon as symptoms of low blood sugar appear or when experiencing feelings of being unwell.