

DIABETES CONTROL PLAN



This plan is developed to comply with GS section 115C 12(31) and the policies promulgated in accordance with that section.

Parent Request for Care Plan

1. A parent may make a written request that the school develop an individual diabetes care plan for any student attending Kestrel Heights School using the DCP Request form and complete the Diabetes Medical Management Plan Form with the help of the student's medical provider.
2. Within 10 days of the return of the Diabetes Medical Management Plan Form, a trained staff member will review the form with the parent and create a diabetes care plan for the student and determine the supplies the parent will provide the school for their student. The supplies will be kept in a locked file cabinet in the school office.
3. The school will designate the guidance counselor's office as a safe place for a student to perform injections, if needed.
4. By January 31, the school will review each care plan with the parent and make any necessary adjustments.

Parent Responsibilities

1. Parents shall be responsible to request a care plan in writing and submit it to the school secretary.
2. Parents shall be responsible to complete and return the Diabetes Medical Management Plan and to update all phone numbers and pagers.
3. Parents must participate in the development of the Care Plan.
4. Parents must provide and replenish as necessary the following:
 - a. diabetes supplies
 - b. snacks
 - c. completed medication forms
 - d. completed diet forms
 - e. student wallet sized photograph
 - f. medic alert bracelet
5. Parents must outline any assistance their student may need to monitor chemical levels or administer medications.
6. The school currently provides catering service for lunches. Parents are responsible to ensure their student makes proper selections from the proffered menus or provides a lunch for their student.

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Staff Responsibilities

1. Prior to the beginning of each school year, the school will train all staff in generalized care for diabetic students and be able to recognize when a student may be hyperglycemic or hypoglycemic.
2. The school will retain a nurse or other qualified individual to assist in developing the individual Care Plans, monitor the Diabetic Care plans of each student, train the diabetic care managers, provide generalized care instruction to the staff annually, perform emergency care, prepare an annual nurses report and be a resource for the staff and parents at the school.
3. The school will identify and train two staff members to be Diabetes Care Managers including the proper procedures to monitor blood sugar levels, ketone levels, administer insulin by means of a syringe, injector pen and insulin pump and provide emergency care.
4. The school will acquire and maintain a blood sugar monitor (approved for multi-person use), lancets, alcohol swabs, test strips and other necessary supplies in a locked cabinet in the school office for use as necessary.
5. The school will properly store a student's supplies and snacks in a designated location and the student shall be given access to those items upon request.
6. The school will acquire a glucagon emergency kit and train the diabetes care managers in the proper use of the kit.
7. The staff will keep a log in each students file showing the outcome and date of any monitoring performed by school personnel.
8. Once a month the school secretary will clean the monitor, properly dispose of the bio waste and ensure the necessary supplies are on hand.

Emergency Care Plan

1. Hyperglycemia: If a staff member notices that a diabetic student exhibits the symptoms of Hyperglycemia (high blood sugar)
2. Hypoglycemia: If a staff member notices that a diabetic student exhibits the symptoms of Hypoglycemia (low blood sugar)
3. Emergency: If a diabetic student is unconscious, convulsing (seizures) or cannot safely eat or drink, then they should immediately contact the school medical staff member or one of the diabetes care managers.
 - a. The medical staff member or the DCM shall check the student's Diabetes Medical Management Plan to determine if the plan authorizes the use of glucagon.
 - i. If not, **call 911 immediately** check their blood sugar, if possible, and keep the student comfortable.

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- ii. If so:
 1. Have someone call 911 (EMS) and parents.
 2. Check their blood sugar level, don't delay. If in doubt, always treat.
 3. Place student on their side to avoid injury.
 4. Obtain Glocagon emergency kit and administer glocagon injection.
 5. Monitor student, may take 20-30 minutes for them to regain consciousness.
 6. Check blood sugar level.
 7. Give sips of fruit juice or regular soda once the student is awake and able to drink.
 8. Advance diet as tolerated.
 9. Document episode in the student's log.
 10. Dispose of the injector in the proper container.

Identification of Allowable Actions

Any student for which the school has developed a diabetes care plan shall have the following accommodations:

- a. immediate access to their diabetes supplies by contacting the school secretary, the principal, dean of academics or other designated staff,
- b. The ability to monitor their blood sugar at anytime and anywhere during school and at scheduled school sponsored events,
- c. Eat snacks anywhere, at any time, to treat or prevent hypoglycemia, and
- d. Be allowed to use the restroom and have access to fluids at any time.
- e. Go to the guidance counselor's office to perform safe monitoring.

Extent of Student Participation in the Plan

It is assumed that all students attending the school are capable of monitoring their blood sugar levels, administering their own insulin and eating a proper diet. If the student needs assistance with any of these functions, the parent should request the assistance and the necessary assistance should be included in the student's care plan. In addition, a diabetic student may request assistance with monitoring, or treating adverse conditions on an infrequent basis. If the student requests assistance on a more regular basis, the care plan should be amended, accordingly.

Dated: August 12, 2016