

GENERAL GUIDELINES FOR THE CARE OF THE CHILD IN THE SCHOOL/DAY CARE SETTING

I. Diabetes Care Plan

- a) The parent/guardian, the child's diabetes care team and the school or day care provider should develop an individualized Diabetes Care Plan. The Plan should address the specific needs of the child and provide specific instructions for each of the following:
1. Blood glucose monitoring
 2. Insulin administration (if necessary)
 3. Meals and snacks
 4. Symptoms and treatment of hypoglycemia (low blood sugars)
 5. Symptoms and treatment of hyperglycemia (high blood sugars)
 6. Testing for ketones if necessary

II. Responsibilities

- a) **Parents** should provide the school or day care provider with the following:
1. All materials and equipment necessary for diabetes care tasks
 2. Supplies to treat hypoglycemia
 3. Information about diabetes and training in the performance of diabetes related tasks
 4. Emergency phone numbers for parent/guardian and the diabetes care team
- b) The **School** or **Day care** provider should be expected to provide the following:
1. Immediate availability to treatment of hypoglycemia for the child
 2. One or more adults that can assist the child with care if necessary (blood testing, treating lows, ketone testing, glucagons, etc., as specified on the Plan)
 3. A private location for blood testing and insulin administration if family requests
 4. One or more adults who are familiar with the child's meal plan and who are willing to work with the child and family
 5. Training to all adults who provide education/care for the child on the symptoms and treatment of hypoglycemia and other emergency procedures
 6. Permission for the child to see school medical personnel upon request
 7. Permission for the child to eat a snack anywhere, if necessary to prevent hypoglycemia
 8. Permission to miss school as an excused absence for required medical appointments to monitor the student's diabetes management
 9. Permission for the child to use the restroom and access to fluids (i.e., water), as necessary
 10. Appropriate location for storage of insulin and/or glucagon, if necessary

III. Student with Diabetes - Expectations

- a) Children should be able to participate in their diabetes care at school to the extent that is appropriate for the child's age, development and experience with diabetes. The extent of the child's ability to participate in diabetes care should be agreed upon by the school/day care personnel, parent/guardian, and health care team when the diabetes plan is set up and adjusted as necessary.
 1. Preschool and Day Care
 - i. Most children are unable to perform diabetes tasks independently
 - ii. By 4 years of age, children are usually cooperative for diabetes tasks
 2. Elementary School
 - i. The child should be expected to cooperate with all diabetes tasks at school
 - ii. By 8 years of age, most children can test their blood sugar but may need a reminder to eat their snack
 3. Middle school or Junior high school
 - i. These students can perform own blood test
 - ii. By age 13, they can administer insulin with supervision
 - iii. May need assistance with blood test when blood sugar is low
 4. High School
 - i. These students can perform own blood test and administer insulin without supervision
 - ii. May need assistance with blood test when blood sugar is low
 5. All ages
 - i. Child may need assistance with blood testing when blood sugar is low
 - ii. Many will require a reminder to eat or drink during hypoglycemia
 - iii. Child experiencing hypoglycemia should not be left unsupervised until treatment has been completed

For more information regarding the care of a child with diabetes at school,
call **1-800-DIABETES** and request a **free** copy of
“Care of Children with Diabetes in the School and Day Care Setting”