

Care of Students with Diabetes Law IC 20-34-5

FAQ's Document

1. Where can I find a copy of the current Diabetes Law?

The law (enacted in 2007) is titled, "Care of Students with Diabetes." It is listed under Indiana Code as **IC 20-34-5** and can be found at the following site: <http://iga.in.gov/>

2. Does this law apply to all schools?

This law applies to all public schools, including charter schools.

3. Does this law apply to students with Type 2 diabetes or only Type 1 diabetes?

The law does not specify a type of diabetes in students. Therefore, when the school nurse receives a DMTP (Diabetes Management and Treatment Plan) from a licensed health care practitioner with prescriptive authority, an IHP (Individualized Health Plan) should be developed with all of the same components as well as staff training and appropriate delegation processes.

4. Should school nurses working in private schools provide the staff education and student health care defined in IC 20-34-5 as well?

The law applies to all public schools, including charter schools. Private school administrators should consider developing school policies to determine who will administer health care services for their students and what training is required.

5. What is the difference between the "diabetes management and treatment plan" vs the "individualized health plan"?

The law describes two required plans:

- A. Diabetes management and treatment plan (DMTP)
 - a. Written and signed by the licensed health care practitioner who is responsible for the student's diabetes treatment and the student's parent or legal guardian
 - b. Identifies all health care services/procedures (medical orders) the student should receive during school hours as well as at school-related activities
 - c. Identifies the student's ability to understand and manage their own care (self-manage) and is submitted to the school nurse at the beginning of the school year, at the time of initial enrollment, or upon diagnosis



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B. Individual Health Plan (IHP)

- a. Written by the school nurse (RN) with collaboration from the health care practitioner, parent or legal guardian, principal, and one or more of the student's teachers
- b. Incorporates the components of the diabetes management and treatment plan (medical orders)
- c. Identifies and documents a complete plan of routine health care as well as an emergency plan of action
- d. Applies to school hours and school-related activities

6. What if parents do not bring a DMTP for their child with diabetes to the school nurse?

DMTP's must be brought to the school nurse before or at the start of each school year, at the time of student enrollment, or as soon as practical following diagnosis. Without the DMTP, diabetes medical care cannot be carried out by the school nurse and the student is considered to be "self-managed." The school nurse will develop an emergency plan to follow if needed during school hours and school-related activities. This plan will be shared with the parents and documented as such.

7. Can school nurses accept medical orders from health care providers who are licensed in states other than Indiana?

Yes, orders can be accepted from out of state health care practitioners with prescriptive authority.

8. What activities are considered "school-related"?

School-related activities are those activities which are school sponsored and are supervised by members of the school's staff. Examples include: fieldtrips, after school dances, clubs, and extracurricular sports.

9. Must school nurses stay for after-school activities to provide health care services?

No, however a volunteer staff member must be trained to care for the student during after-school activities and should be included as part of the student's IHP. Such plans should be discussed with parents and documented in the student's IHP regarding how the nurse will be informed of the student's involvement in extracurricular events, the parent awareness that the school nurse will not be present, as well as providing information sheets and basic training to the staff in charge of said events.



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10. Who are “volunteer health aides” (VHA’s)?

In schools, this person could be any staff member such as a teacher, secretary, bus driver or monitor, coach, or classroom assistant. Staff who refuse to serve as volunteer health aides may not be disciplined for their decision.

- A. Volunteer health aides are members of the school staff who:
 - a. Do not have either a registered nursing or medical license
 - b. Volunteer to act in the role of a volunteer health aide
 - c. Have successfully completed training for volunteer health aides as described in the law

11. How can volunteer health aides be used in schools?

The law states that schools “shall” (will) find an adequate number of school employees to act in a complimentary role to the school nurse whenever the school nurse is not available to provide direct health care for students with diabetes. The role of the volunteer health aide should include the following:

- A. Volunteer health aides:
 - a. Serve under the supervision and authorization of the principal and the school nurse
 - b. Must have access to the school nurse either in person or by phone
 - c. Must be trained to perform the health care they are volunteering to do
 - d. May choose to perform only the functions with which they feel comfortable and are trained to do

12. What if a school cannot find a staff member to serve as volunteer health aide in their school?

Every school in which a student with diabetes is enrolled must have an adequate number of volunteer health aides identified and trained according to the law. In most schools, if a volunteer health aide cannot be found, the school principal often fills this role.

13. Who can train and where can I find training for volunteer health aides and school staff in general?

There are many excellent resources available for diabetes training for school staff including the following:

- A. Indiana Department of Education: *Care of Students with Diabetes*
<http://www.doe.in.gov/student-services/health/diabetes>
- B. National Association of School Nurses-*Diabetes in Children*
<https://www.nasn.org/ToolsResources/DiabetesinChildren>



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- C. American Diabetes Association training resources-*Safe at School-Training Resources*
<http://www.diabetes.org/living-with-diabetes/parents-and-kids/diabetes-care-at-school/school-staff-trainings/diabetes-care-tasks.html>
- D. National Diabetes Education Program (NDEP)-*Helping the Student with Diabetes Succeed: A Guide for School Personnel*
<https://www.niddk.nih.gov/health-information/health-communication-programs/ndep/health-care-professionals/school-guide/Pages/publicationdetail.aspx>

14. When should diabetes training for school staff take place?

School nurses should be offered training on an annual basis. It is the responsibility of every nurse to maintain their professional competency in order to apply best practices and standards of care. At a minimum, training for VHA's should be conducted at the start of the school year or before a student with diabetes begins attending school. It is up to the delegating RN to determine any additional training or updates necessary for the VHA.

15. What topics need to be included in staff training?

Training for school nurses must include:

- A. Current standards of practice for diabetes management and training including technological advances
- B. Developing an IHP that follows the medical orders from a licensed health care practitioner- DMTP
- C. Recognizing and treating hypo/hyperglycemia
- D. Understanding action needed for out of range blood glucose levels
- E. Performing glucose and ketone testing
- F. Administering insulin, emergency treatment as prescribed-glucagon administration
- G. Recognizing complications that require emergency medical assistance
- H. Understanding how schedules, food, and physical activity effect diabetes and the appropriate actions to take if disruptions occur

Training for VHA's must be provided by a healthcare professional with expertise in diabetes or by a school nurse and must include:

- A. Current standards and technology for diabetes treatment
- B. Implementing the orders from a licensed health care practitioner-DMTP
- C. Recognizing and treating hypo/hyperglycemia
- D. Performing glucose and ketone testing
- E. Administering insulin, emergency treatment as prescribed-glucagon administration
- F. Recognizing complications that require emergency medical assistance
- G. Understanding how schedules, food, and physical activity effect diabetes and the appropriate actions to take if disruptions occur



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16. Are there any legal protections provided to staff acting as VHA's providing health care to students with diabetes?

Yes, the parent must sign an agreement stating:

- A. Authorization for a trained VHA to assist the student
- B. The trained VHA is not liable for civil damages for assisting in the student's care
- C. The school may not restrict the student to a particular school based on the VHA
- D. It must be understood that the VHA is not engaging in the practice of nursing

17. Must schools allow students to manage their own diabetes care even when a school nurse is working at the school?

Yes, if the student's licensed health care practitioner and parents have determined and documented that the student is capable of self-care. This must be documented in both the student's DMTP and IHP. The student must be allowed to test, possess supplies, and manage their own care anywhere in the school and areas of school-related activities. The school nurse must maintain an emergency plan for all students who self-manage.

18. Are schools required to allow students to self-manage even if the student is demonstrating behaviors and actions which violate the school's behavior policies and/or are deemed to be unsafe?

No, students with diabetes are to follow the same disciplinary rules as other students if misconduct is not a result of diabetes. Schools may require self-management "contracts" be signed by students, their parents, and the licensed health care practitioner outlining the procedures to be followed regarding self-management and documenting that school disciplinary policies and procedures will apply unless diabetes-related. Self-management arrangements may be revoked if school discipline policies are broken or student behaviors are deemed unsafe for themselves or others.

19. Can school nurses change student treatment orders according to parent requests?

No, the Indiana Nurse Practice Act allows nurses to take medical treatment orders from only licensed health care practitioners who hold prescriptive authority. These orders must be signed by both the health care practitioner and the parent. The DMTP is brought to the school nurse for incorporation into the IHP as well as for proper delegation.



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20. Can school nurses accept open-ended medication orders from a health care practitioner which provide parents the ability to adjust daily insulin doses for students?

Nurses cannot accept daily open-ended medical treatment orders from parents. It is suggested that negotiation take place between the school nurse, parents, and the student's health care practitioner with the outcome of a limited dosage range allowing adjustments of approximately (+) or (-) 2-4 units from the original insulin dose. This should be communicated in a timely manner and in writing to the school nurse via parents on any day a dosage change within this allowable range is requested.

21. Do bus drivers and school chaperones require training regarding the care of students with diabetes?

Yes, a basic information sheet must be provided to individuals who are responsible for providing transportation for or supervising a student with diabetes during an off-campus school related activity. Items to include on the information sheet are:

- A. Student's name
- B. Signs and symptoms of a possible emergency regarding diabetes and the proper responses
- C. Emergency contact information including phone numbers

22. Is it mandatory that a Section 504 plan be written for students with diabetes?

This determination is made by the school based on the federal Section 504 law. Section 504 plans are written for qualifying students who have limitations of any major life activities such as those with diabetes. A Section 504 plan ensures that students with diabetes are medically safe when at school, enjoy the same access to education as other students, and that they are treated fairly. The 504 plan documents any needed classroom accommodations provided by the school. Some accommodations might include: carrying a water bottle at all times, bathroom privileges when requested, excused absences for doctors' appointments, full participation in school activities and sports, permission to eat whenever needed, and arrangements for missed classroom time.

23. Does the school nurse write the 504 plan?

No, school nurses are responsible for writing the student's individual health care plan which details the medical care and arrangements required for student health management while at school and at school-related activities. The school's trained 504 team conducts a student assessment in order to determine qualification for a 504 plan and develops the plan according to the student's needs. The school nurse may be a member of the school's 504 team, but is not responsible for assessing the need for or creating the 504 plan.



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24. What is a Continuous Glucose Monitor (CGM) and how does it work?

A CGM system automatically tracks blood glucose levels throughout the day and night. A CGM works through a tiny sensor inserted under the skin. The sensor measures the interstitial glucose level, which is the glucose found in the fluid between the cells. The sensor measures the glucose level every five minutes. A transmitter wirelessly sends the information to a monitor which may be part of an insulin pump, a separate device, or smartphone/tablet. Additionally, CGMs identify trends in glucose changes and alerts (alarm or vibration) for impending high or low glucose levels. As glucose levels rise and fall, the sensor will display arrows up or down indicating those changes. Note: The sensor glucose can differ 15-20% from blood glucose levels.

25. Are school nurses and/or school staff required to download a student's CGM app onto an electronic device in order to monitor the student's glucose levels?

No, there is no state law requiring CGM app downloading for student monitoring by any school staff. Therefore, this decision is made locally per schools/school corporations with policies written to address that decision.

26. Should schools develop a specific policy regarding students' use of CGMs and the associated monitoring apps during school hours and school-related activities?

Yes, schools should develop policies and procedures regarding the student use of CGMs and the associated monitoring apps in the school setting as well as during school-related activities. Such policy contents are a local decision as the use of CGMs is not specifically addressed in the Care of Students with Diabetes Law, IC 20-34-5.

When developing a school policy regarding the downloading and monitoring of any student health app, the following considerations should be included:

- A. Parental permission
- B. Licensed healthcare provider's specific treatment orders associated to app use
- C. The electronic device used for app downloading is provided by the school, as staff members should not use a personal electronic device
- D. A document is developed and signed by the parent outlining the process to be followed when:
 - a. The student's CGM alarms
 - b. Communication is required between parents and school nurse regarding app monitoring during school and school-related activities
 - c. The school nurse is not able to constantly monitor the app due to the need to care for other students
- E. This document is included in the student's IHP or 504 plan



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27. What additional items should be considered during such policy development?

Possible considerations for CGM policies include:

- A. Is there a full-time nurse in the school?
- B. Can school electronic devices be provided to school personnel for downloading the monitoring app?
- C. Does the school IT department have the ability to support the policy?
- D. Is there a dependable wireless network available at all times?
- E. What school personnel would be responsible for monitoring the app and any treatment orders based on the data provided per the app?
- F. What is the role of the student, the school nurse, the parent, and the licensed healthcare provider regarding the use of the CGM?
- G. Has the individual student's developmental and intellectual abilities, as well as the needed level of assistance for their disease management been assessed by the school nurse?

28. Can school nurses dose from the CGM sensor glucose level?

Yes, if the CGMs used are FDA approved for insulin dosing AND the healthcare provider approval is included in the signed DMMP. Note: There may be many additional guidelines from individual healthcare providers regarding insulin dosing from CGM sensors.

29. Is there a resource site available for Indiana school nurses to reference with regards to some of the newest medication and technology updates in the care of students with diabetes?

Yes, the IDOE partnered with experts in pediatric diabetes care from Indiana University Health Riley Diabetes Team to develop a webinar which highlights new technology, medications, and nursing updates with regards to the care of students with diabetes. This webinar can be viewed at:

<https://youtu.be/LhW2vekg6lc>