

## **School Administrators' Responsibilities Checklist**

### **Administrative and Operational Procedures:**

- Process in place to facilitate parents/guardians receiving, completing and returning the following forms prior to the child's first day of school (when possible):
  - Request and Consent Diabetes Interventions;
  - Medical Care Plan (Blank Template or provide student's current version for review)
  - Parent/Guardian Responsibility Checklist (not to be returned);
  - Student Responsibility for Diabetes (not to be returned).
- During registration dates throughout the school year provide parents/guardians of child(ren) who indicate their child has diabetes with copies of the above information forms and forms to complete.
- Survey parents/guardians in the September communication home for children who have diabetes and have not identified their child to the principal, to do so immediately.
- Receive and review the completed "Request and Consent Diabetes Interventions" form for students with diabetes and from the information, develop a Medical Care Plan using the Board Diabetes Protocol.
- Inform families that this information will be shared with all relevant staff members (including transportation staff if applicable) who support their child.
- Each September, share and review Diabetes procedures with staff, supply staff, bus drivers, volunteers and others having contact with the student.

### **Awareness and Communication:**

- Convene a meeting with parent/guardian of the child with diabetes and appropriate school staff (subject teachers, etc.) to review provided medical information and create a Medical Care Plan for the student including:
  - Special needs or concerns regarding the health and care of the child;
  - Typical signs and treatment of low and/or high blood glucose;
  - Guidelines for meals and snack times;
  - When the school is to contact the parents/guardians (e.g. after incidents of moderate, low or high blood glucose, low reading on the glucose blood monitoring, not finishing meals/snacks);
  - Review of school guidelines concerning: causes, prevention, identification and treatment of hypoglycemia/hyperglycemia.
- Convene a meeting (early in the school year) of all school staff to identify students with diabetes and outline the Board protocol for identification, prevention, and treatment of low blood glucose (hypoglycemia) and high blood glucose (hyperglycemia). See Diabetes Management - Guidelines for Schools.

- Provide classroom educators with resources Classroom Educator Checklist for supporting students with diabetes.
- Provide educators with resources (human, video, print, etc.) to assist their efforts in making the students in their class aware of what diabetes is.
- Provide in-service training for school staff to prepare those involved to respond effectively to hypoglycemia incidents and other emergency situations.
- Ensure a process is in place where a student with diabetes, new to the school or newly diagnosed, arriving at the school mid-year, is identified to all school staff.
- Ensure that the child's Medical Care Plan is posted in required locations. (i.e. staff room, classroom, Occasional Teacher notes, etc.).
- Inform the Catholic School Council of school diabetes protocol to increase community awareness of diabetes and Board protocol for management.

#### **Blood Glucose Monitoring/Insulin Injection:**

- Provide a safe, hygienic, and private space in the school for students to perform self-blood glucose monitoring and insulin injections throughout the day.
- Provide for suitable supervision of students when testing (where necessary).
- Follow procedures for safe disposal of sharps (injection devices), lancets and testing strips.
- Follow universal precautions for blood and bodily fluids where applicable.
- Be aware of ketone monitoring.

#### **Treatment/Diet Requirements:**

- Provide for a secure, accessible and appropriate place to store carry kit, emergency food supplies (oral glucose, orange juice, etc.), throughout the school (e.g. homeroom, gym, principal's office, etc.).
- Provide opportunities for fast-acting sources of sugar to be taken by students with diabetes anywhere on school property, on buses or during school sanctioned activities.
- Endeavour to ensure that students eat all meals and snacks fully and on time. Be flexible with time requirements for eating – children with diabetes may need more time.
- Provide for communication to parents/guardians, where requested, if child is unable to eat or when student does not finish meal.
- Provide procedures to communicate to parents/guardians when additional supplies are required (fast-acting sugar sources, testing materials, etc.).