Precautionary Protocol for Educational Professionals in Caring for a Newly Diagnosed Student with Type I Diabetes

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Personal Information

- Gender Studies, English, Education, Honors, Art, Film
- Parent of a child Diagnosed with Type I Diabetes
- Advocate for Student’s discriminated against
- Future Teacher
Diabetes

- “a group of diseases characterized by high blood glucose levels that result from defects in the body’s ability to produce insulin” (ADA, 1).
Type I Diabetes defined:

- “chronic (lifelong) disease that occurs when the pancreas does not produce enough insulin to properly control blood sugar levels” (ADA, 1).
Statistics on Type I Diabetes

• “only 5% of people with diabetes have this form of the disease”
• “previously known as juvenile diabetes”
• “about 1 in every 400 children has diabetes”

(ADA, 1).
Insulin is defined

• “a hormone that is needed to convert sugar, starches and other food into energy needed for daily life”

(ADA, 1)
Hypoglycemia defined

Hypoglycemia is a condition that occurs when one’s blood glucose is lower than normal, usually below 70mg.

If untreated, may lead to unconsciousness.

(low blood glucose) (Chase, 72).
Hyperglycemia defined:

- Hyperglycemia is higher than normal blood glucose, usually is over 220 (high blood sugar) (Chase, 70).
Glucagon defined

- Glucagon is “a hormone produced by the alpha cells in the pancreas that raises blood glucose.”

- A glucagon should be on hand to be administered when a Type I Diabetic has hypoglycemia and becomes unconscious. (Chase, 49).
blood glucose & level defined:

- Blood glucose – “the main sugar found in the blood and the body’s main source of energy” (also called blood sugar).
- Blood glucose level – “the amount of glucose in a given amount of blood” (Judd, 55).
Autoimmune disease defined

- “A disorder of the body’s immune system in which the immune system mistakenly attacks and destroys body tissue that it believe to be foreign.”

(Judd, 55).
Motivation for Senior Project

- Personal Connection
- Experience with School System
- Inspired by my son’s endocrine doctor
- Inspired by family member
- Special Education classes
Inspiration for this project:

- my son at the age of nine
- little was known about the care, symptoms, and dangers
- during the school day required me to be on call, return to school when he had sign and symptoms of a diabetic change, and
to remove my son from school whenever his symptoms escalated.
- unable to concentrate in school due to the lack of prompt care at the onset of his symptoms
- behind in his school work
- missing out on extracurricular activities
- missing out on a great deal of social engagement
When my son was diagnosed

• After he had the flu –

• the doctors determined that the flu settled in his **pancreas** and as defined earlier that the body

  • “mistakenly attacks and destroys body tissue that it believe to be foreign”

attacked his pancreas so the body could protect itself.
Purpose and Importance of Protocol

- to identify the procedures
- to identify the care - Type I child safe
  - progress with their learning experience
  - similar experience - other students
- identify changes - over the years to better
  care for students with diabetes within the
  school system
What is the role of the parent

- To inform the school of the diagnosis
- Gain medical information from the professionals
- Provide contact information for emergencies
- Provide the school with treatment supplies
Myth: Diabetes can not be controlled

- The proper protocol for the care of a child with diabetes is relatively easy as long as a clear understanding of the signs and symptoms is known by the professionals who are responsible for the care of the student with diabetes.

- Education is the Key which is of utmost importance for teachers and school nurses as well as other school professionals to be able to understand the signs and symptoms of Type I Diabetes.
How can the Diabetes Protocol help:

- **outline the procedures** for the care of the student to take place immediately while they are still in the classroom.
- **get a jump on their symptoms** as soon as there is sign
- The immediate care --- the symptoms to subside quicker.
- **taken care of in the early stages**
- **get right back to learning**
- Not spend the entire day in the nurses office
- **Avoid:** the extreme of having to be sent home
- **Avoid:** medical emergency.
Findings of protocol of the teacher

- Many teachers still send the student to the nurses office in order to care for their diabetic needs. This has the student missing pertinent instruction and lessons during the school day.

- Few teachers allow the student to remain in the classroom to test his/her blood, to take insulin shots, and have a snack and drink fluids to care for their diabetic needs.
Who is in charge of Student’s diabetic care during the school day

- In many school setting the **nurse** is the person who cares for a child with Diabetes during the school day.
- Students must be **pulled from class and go to the nurse’s office** to take care of any of their diabetes needs.
- Few teachers allow students to care for their diabetic need **within the classroom setting**.
- Few school nurses have **access to a doctor’s or nurse’s telephone number** when concerns arise during the school day.
- Few school nurses have close contact daily with teachers, parents and doctors for the care of students with diabetes.
Protocol in place for care of children with Diabetes in school setting

- Some school systems go above and beyond.

- But many school systems still just follow RI Law: which includes allowing student to have snacks, to go to the nurses office, and to have access to the bathroom when needed.

- Desire that in the future all students will be able to gain the same education and rights as students without a chronic illness.
Quick Reference Protocol:

- An animated picture, which presents a view of the symptoms
- The symptoms of diabetic change described
- The steps to follow for diabetic care based on those symptoms
Individuals with Disabilities Education Improvement Act 2004

- Students are eligible for to fully participate in their educational experience.

- Most students do not receive an IEP (Individualized Education Plan) for their diabetes.
August 2005  Protocol to self-manage

- The Diabetic Care Management found in the Rules and Regulations for the School Health Professionals
- develop a individualized health care plan
- permit self testing in classroom
- permit snack in classroom
- permit bathroom and water fountain privilege
- accompany symptomatic child to nurse’s office
January 2008

- The State of Rhode Island General Assembly on H 7014
- the glucagon
  - can be used in the school setting
  - be available in the school
  - any and all school employees should know how to use the glucagon shot.
  - Not liable to civil damage when shot is given.
RI Laws passed to protect children with Type I Diabetes within school setting:

- **RI State Plan** - allowing students with Diabetes to be able to remain in school and care for their diabetes
- **Which includes allowing student**
  - to have snacks,
  - test blood and urine,
  - to go to the nurses office,
  - and to have access to the bathroom when needed.
Findings- In Closing

- Some school settings have - only **follow the RI Law in place**
- The RI Certified Nurse-Teachers Association has similar **guidelines** as RI Law for diabetic care in the school setting.
- Some school systems – depending on the school nurse - go above and beyond to have **close contact with home, doctor and school** while following the above policies.
- Few schools – do all three – as well as have several **documented plans** in place for routine nurse care plan (with daily logs), sick day care, and emergency treatment care plan.
Findings – In Closing

• The nurse is the most important connection of proper care for a child with Type I to encounter while in school.

• The key is to have all school professionals educated in how to care for a student with type I Diabetes so that they are safe during the school day.

• Because of this growing number of students who will be diagnosed with Type I Diabetes, it is imperative that all school administrators, school nurses and elementary school teachers know and understand the signs and symptoms of hyperglycemia and hypoglycemia for this population of students.

• Education is the key – in any situation!!!!!
Citations

- Individuals with Disabilities Education Improvement Act. 2004.
- Judd, Sandra J. Diabetes Sourcebook: Basic Consumer Health Information About Type I and Type 2 Diabetes. Detroit: Omnigraphics, 2011.
Any Questions