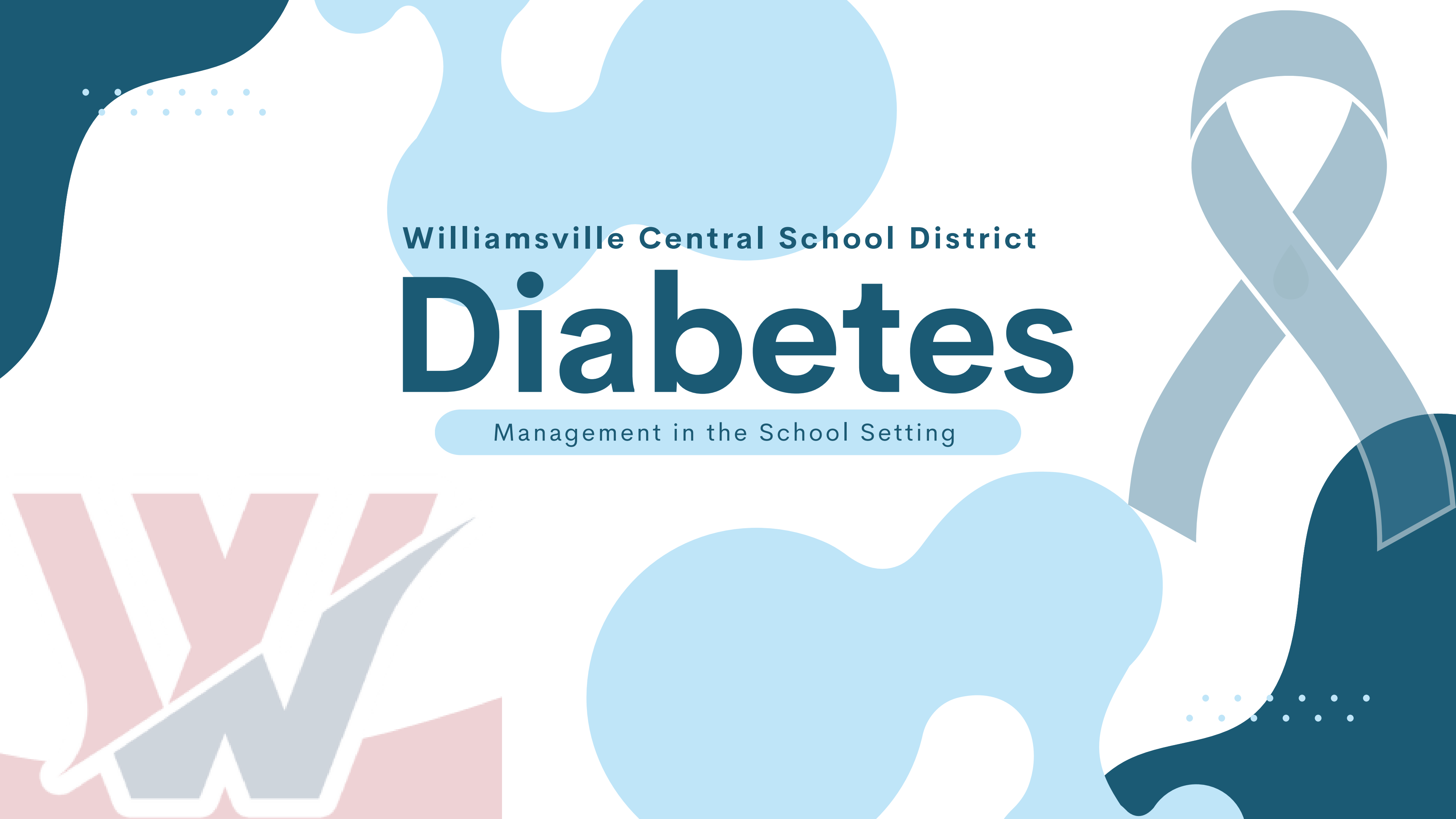


The background features several abstract elements: a large light blue organic shape in the upper left, a dark blue organic shape in the top left corner with a trail of small light blue dots, a large light blue organic shape in the bottom center, a dark blue organic shape in the bottom right corner with a trail of small light blue dots, and a large grey ribbon forming a loop on the right side. The text is centered in the upper half of the image.

Williamsville Central School District

Diabetes

Management in the School Setting



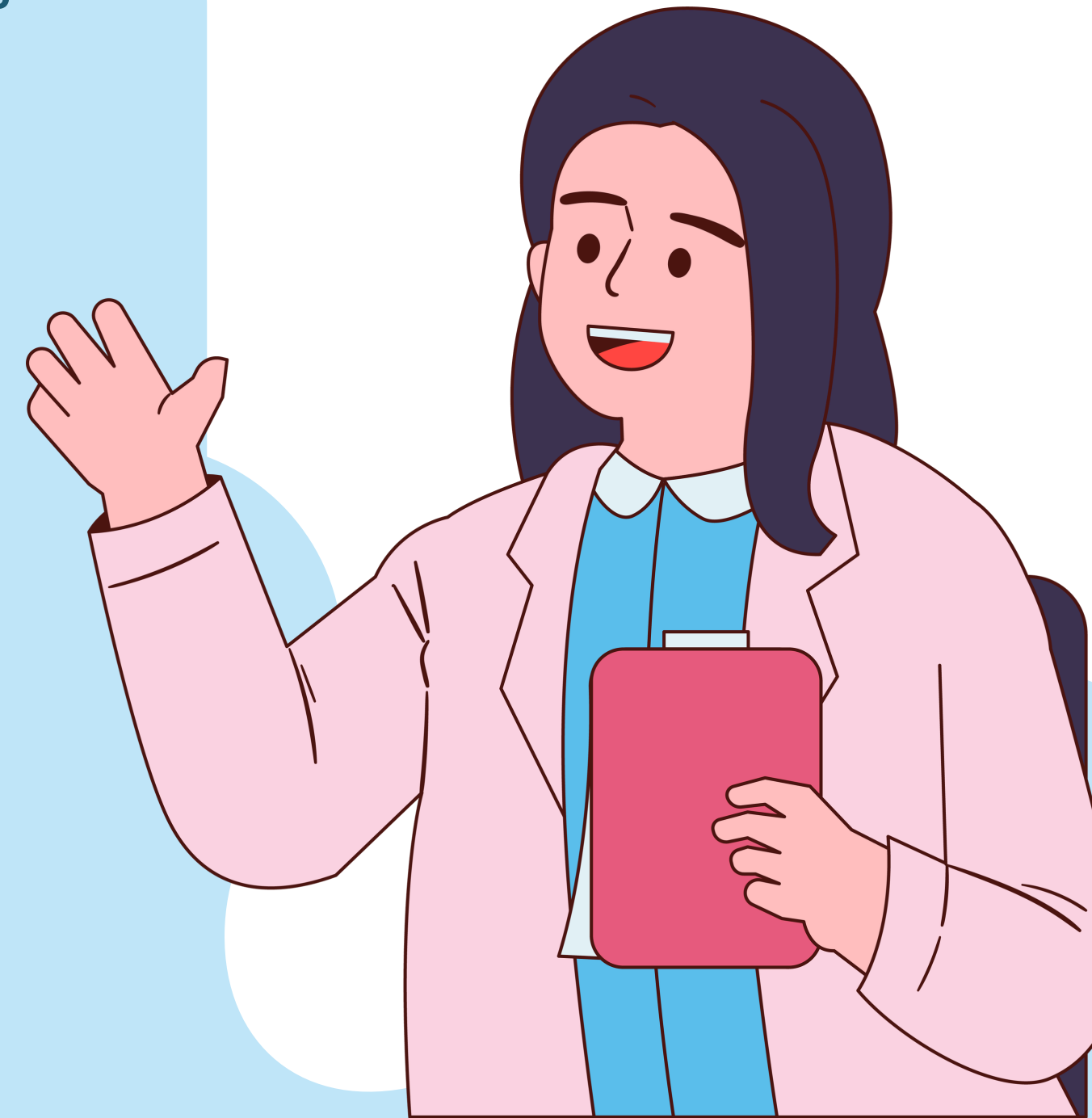


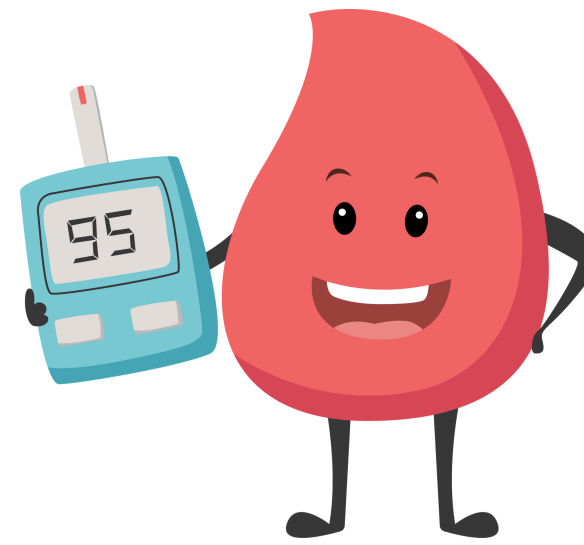
Introduction



- In this presentation, the following topics regarding diabetes management in the school setting will be covered:

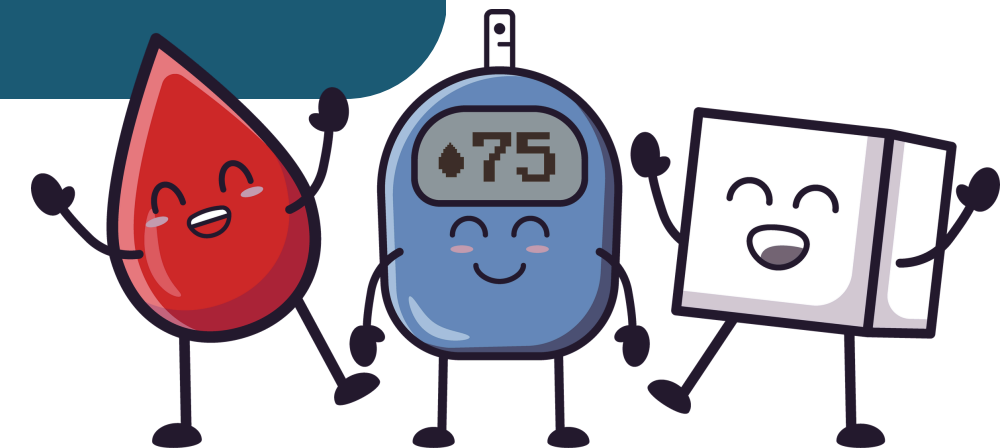
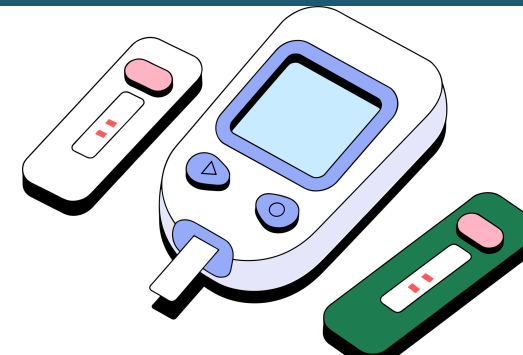
- Student Safety
- Diabetes Management: Supplies and Devices
- Glucose Monitoring
- Insulin Administration Intervals
- Management of Hypoglycemia
- Management of Hyperglycemia
- Emergency Care Plans
- Health Care Plans
- The Role of the Parent
- The Role of the Trained Supervising Adult
- The Role of the Student
- The Role of the School Nurse
- When Technology Fails



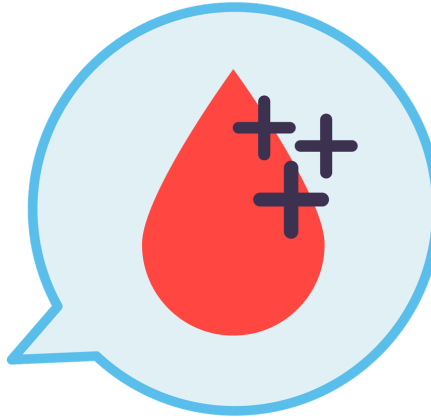


Student Safety

- Our shared goal is to keep your child safe, healthy, and supported throughout the school day.
- The school nurse, teachers, and staff work closely with families to follow your child's individualized diabetes care plan and provide safe, inclusive, consistent care at school. School staff are trained to recognize and respond to diabetes-related needs and emergencies so your child can fully participate in learning and school activities with minimal disruption.



Diabetes Management: Supplies and Devices



✓ Supplies Students are Encouraged to Self-Carry (as developmentally appropriate and prescribed, provided by family)

- Insulin pump PDM or cell phone (if prescribed)
- Continuous Glucose Monitor (CGM) receiver or cell phone (if prescribed)
- Fast-acting carbohydrates
 - Examples: juice, glucose gel, glucose tablets, frosting, or candy
- Glucometer and testing supplies
- Emergency medication, glucagon
 - Examples: Gvoke, Baqsimi, etc.

✓ Supplies Recommended for the Health Office (provided by family)

- Extra snacks and fast-acting carbohydrates
- Additional glucometer and testing supplies
- Emergency medication

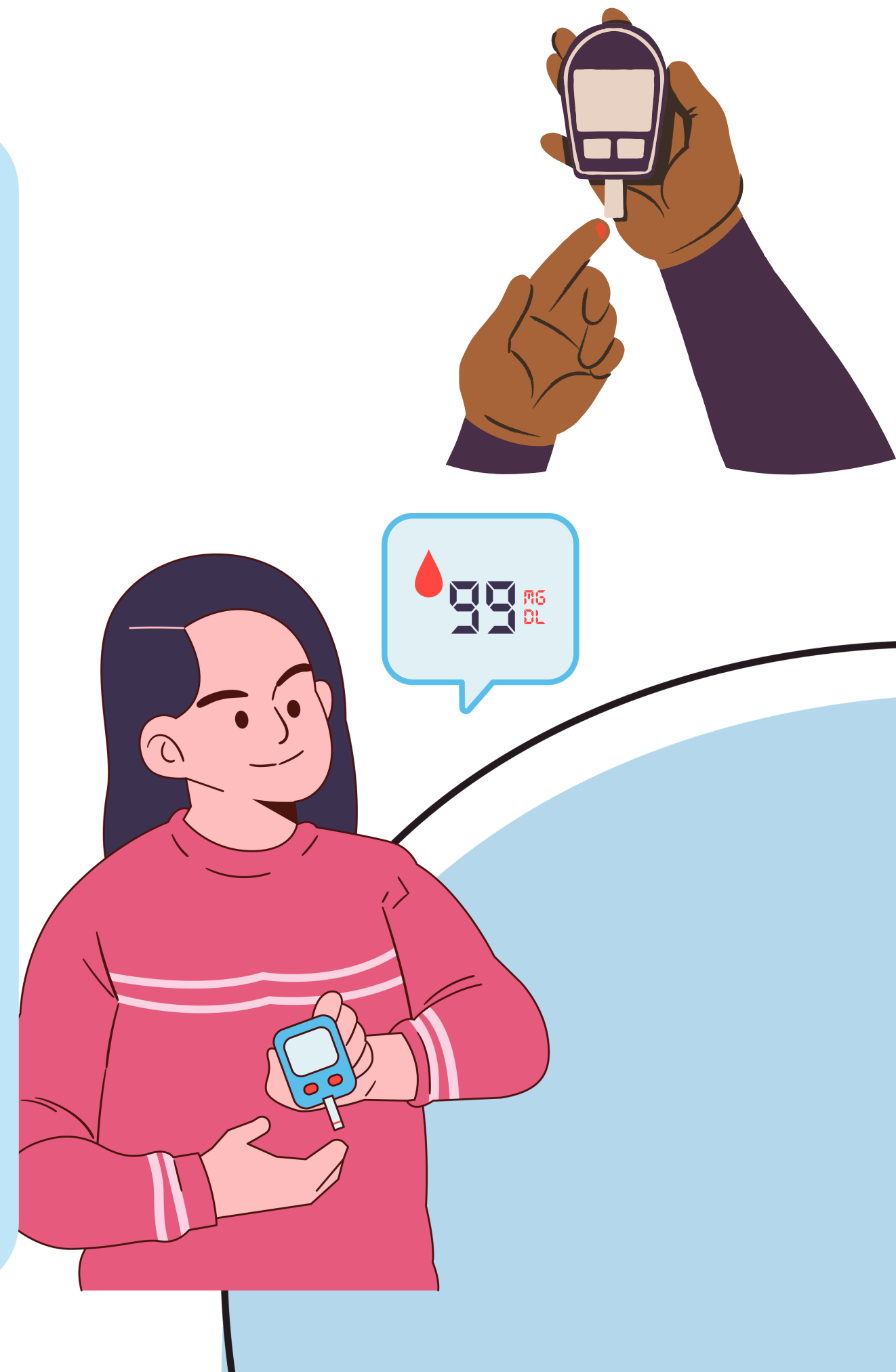
✓ Supplies Recommended for the Classroom (provided by family)

- Extra snacks and fast-acting carbohydrates



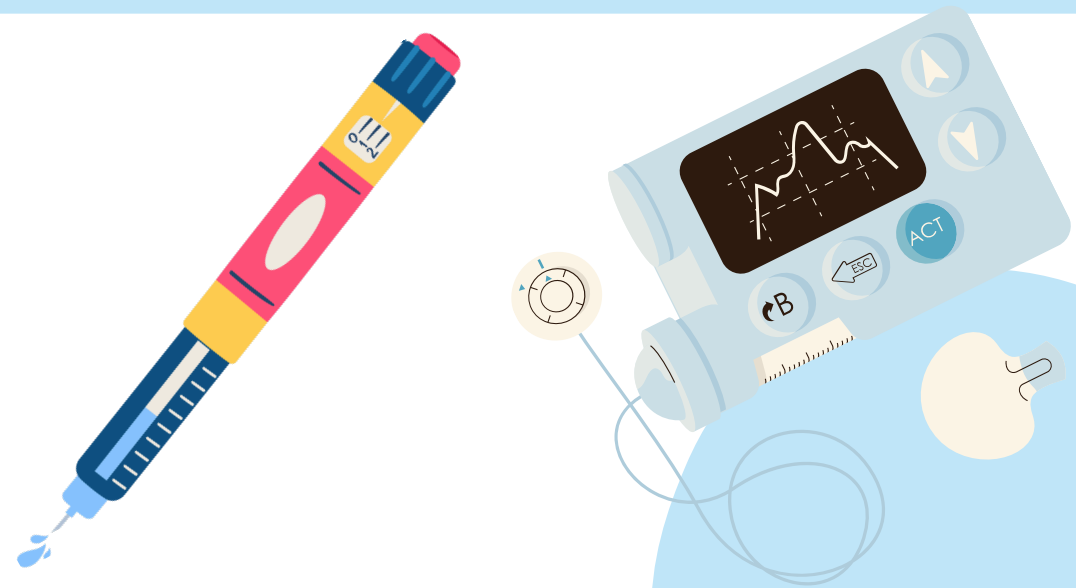
Glucose Monitoring

- Glucose monitoring may look different for each student. Students may use continuous glucose monitors (CGMs), while others monitor their blood glucose using only a glucometer. Students who wear a CGM may also use a glucometer to calibrate the device, confirm readings due to sensor lag or inaccuracy, and before meals or physical activity.
- Regardless of the monitoring method used, students should check their glucose level (and notify an adult of the result, when appropriate):
 - Before meals or snacks
 - Before physical activity
 - After physical activity
- Depending on the student's level of independence and individual healthcare plan, additional glucose checks may also be needed:
 - Upon arrival to school
 - After meals
 - Before dismissal
- When a CGM alarm sounds, the student and trained supervising adult will work together to determine the appropriate response, deliver prompt treatment in consultation with the school nurse when needed.



Insulin Administration

- Insulin will be administered at scheduled intervals in accordance with provider orders. This may include:
 - Carbohydrate coverage for meals and snacks, with correction dosing as needed
 - Insulin administration no more than every 3 hours as ordered by the provider for corrections
- While nursing judgment may be used based on the student's condition and healthcare plan, insulin is not typically administered more frequently than every 3 hours. An exception is when ketones are present and additional insulin is needed. In these situations, insulin should generally not be administered more frequently than every 2 hours in order to reduce the risk of hypoglycemia.
- Administering insulin doses sooner than 3 hours from the previous correction ("stacking insulin") can increase the risk of hypoglycemia (low blood sugar), which may require treatment with fast-acting carbohydrates. This can result in a cycle of repeated highs and lows caused by unnecessarily overtreating blood sugars in the school setting.



Management of Hypoglycemia

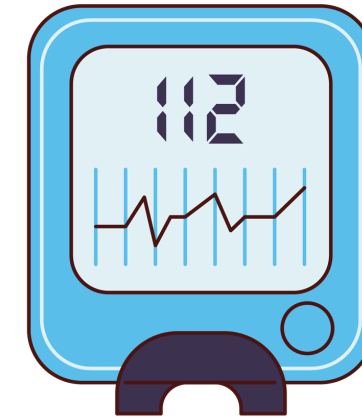
- Prompt treatment of hypoglycemia (low blood sugar) is a priority in the school setting, requiring immediate access to fast-acting carbohydrates.
- In accordance with the student's care plan, trained school staff members will assist the student with recognizing signs or symptoms of low blood sugar and will ensure fast-acting carbohydrates, such as juice or glucose tablets, etc., are consumed.
- Students are encouraged to self-carry fast-acting carbohydrates at all times to allow for quick treatment when needed.
- Students should also have access to their prescribed emergency glucagon medication in the event of a severe low blood sugar emergency when they are unable to safely eat or drink.
- School staff and supervising adults follow the student's individualized Emergency Care Plan, which outlines the specific steps and blood sugar parameters for that student's care.





Management of Hyperglycemia

- Diabetes clinic orders guide the management of hyperglycemia (high blood sugar) during the school day.
- Insulin corrections must be spaced at least 2, preferably 3 hours from the previous dose of fast acting insulin, depending on the circumstances.
- Strategies may be used to help lower blood sugar levels, including:
 - Encouraging water intake
 - Light physical activity, such as walking in the hallway, if ketones are not present



Emergency Care Plans

- Emergency Care Plans (ECPs) and Health Alerts are developed by the school nurse to provide clear, easy-to-follow instructions for school staff are unlicensed.
- ECPs are updated annually and as needed.
- For students with diabetes, the ECP primarily focuses on recognizing and responding to hypoglycemic (low blood sugar) emergencies.
- All staff members who work with or supervise the student with diabetes have access to the health alerts and ECPs and are trained on the contents.
- ECPs and health alerts are also included in substitute teacher folders to help ensure student safety and continuity of care throughout the school day.
- A template of the district’s ECP has been provided for reference. Each plan is individualized and updated to include symptoms, interventions, and instructions specific to the student’s needs.

CONFIDENTIAL



Student's Photo

2025-2026 Emergency Care Plan (for the lay person): Hypoglycemia (Low Blood Sugar)

Student: Name

DOB: Birthdate

IF YOU SEE:

Shaking, fast heartbeat, heavy breathing, sweating, anxiety, irritability, weakness, fatigue, complaints of hunger, impaired vision, confusion

Onset may be sudden & progress to insulin shock.

DO THIS:

Stop activity. If student is conscious and is able to swallow; give student juice, glucose tablets or glucose gel, frosting, candy bar or 4-5 hard candies.

Other:

Notify school nurse & child's parent.

IF YOU SEE SEVERE SYMPTOMS:

Loss of consciousness, seizure, or severe confusion.

DO THIS:

• Place child on the floor & roll on their side (vomiting may occur).

• Call 911.

If on a field trip, follow above and notify the parent & school nurse.

Parent/Guardian(s):

Parent Guardian #1

Home: Cell: Work:

Parent/Guardian #2

Home: Cell: Work:

Emergency Contact(s):

EC #1

Home: Cell: Work:

EC #2

Home: Cell: Work:

School nurse phone #:

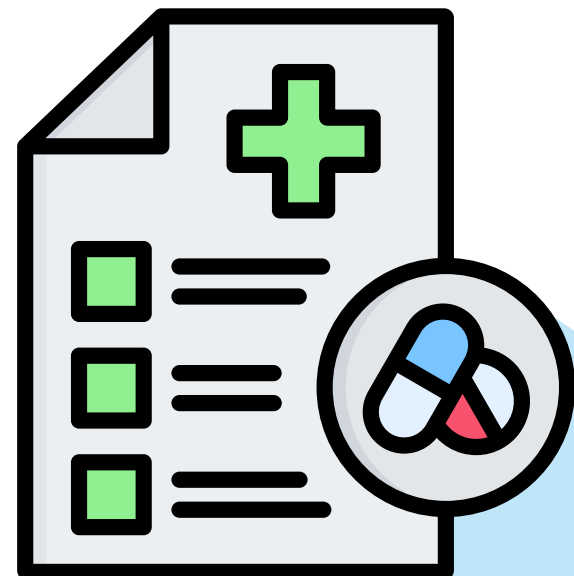
By signing below you acknowledge that this plan has been reviewed with you by the school nurse and that you are aware it will be shared with school staff on a need to know basis. In addition, your signature provides consent to share this plan with your child's health care provider if necessary.

Parent/Guardian Signature: _____

Print Name: _____

Health Care Plans

- **Health Care Plans (HCPs)** HCPs are individualized, nurse-driven documents that are tailored to each student's specific medical needs and level of independence. They are updated annually and as needed.
- The primary purpose of an HCP is to guide the student's daily diabetes management at school, particularly for students who require support.
- HCPs also include goals that support student education, skill development, and increasing independence in managing their condition.
- Students who are fully independent in their diabetes management may not require an HCP; however, all students with diabetes have an ECP and health alert in place for emergency situations.



The Role of the Parent

- Parents are responsible for providing all necessary diabetes supplies for their child during the school day. This includes both items the student self-carries and extra supplies stored in the health office and the classroom.
- If parents are choosing to monitor their child through the follow app and are noticing trends or alerts, they are encouraged to contact the school health office so the nurse can provide support as needed.
- Families are welcome to provide juice or snack boxes for their child's classroom(s). While supplies in the health office are important, having accessible carbohydrates in classrooms is especially important in the event of an emergency such as a lockdown or shelter-in-place situation.
- Parents must notify the school nurse promptly of any changes in diabetic orders.
- For the safety of the child, families must teach their child to not silence or turn off CGM alarms and to get the attention of an adult, especially if they don't yet know how to respond to the alarm. If they are not independent in their care, the direct supervising adult will help to ensure prompt hypoglycemic treatment occurs in the classroom setting. The school nurse and the direct supervising adult will also reinforce this expectation during the school day.



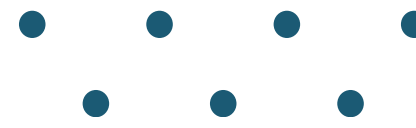
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The Role of Trained Supervising Adults



- Supervising adults (including teachers, teacher aides, and other staff) receive annual training by the school nurse, as well as additional training whenever there are changes to a student's care plan.
- Staff are trained to:
 - Respond appropriately to alarms from diabetes devices (such as CGMs and insulin pumps)
 - Prompt a student to treat low blood sugar by consuming fast-acting carbohydrates
 - Administer emergency medication (glucagon) if necessary
 - Encourage hydration and notify the school nurse for high blood sugar alerts
 - Send the student to the health office if there is any uncertainty about an alarm or device reading so the nurse can assess, guide treatment and verify functionality of devices.
- Be familiar with and follow the student's ECP.
- The goal of staff support is to ensure prompt treatment with appropriate supervision to facilitate safe management, when applicable, in order to maximize the student's time in the classroom.

Developmentally Appropriate Expectations of Student



- Students are expected to alert an adult when they are not feeling well, when alarms sound and they don't know what to do and at any time they need help.
- Students will not turn off or ignore device alarms.
- Students are encouraged to take an active, age-appropriate role in their diabetes care as they build independence and confidence over time.
- Depending on independence level and developmental ability, students may:
 - Assist with carb counting and reading nutrition labels
 - Help program their insulin pump (as appropriate and if trained/approved)
 - Interpret CGM alarms and/or test their blood sugar
 - Treat high and low blood sugars
 - Change diabetes devices or supplies when they have been taught and cleared to do so



The Role of the School Nurse



- In accordance with nursing standards of practice and WCSD policy, the school nurse supports the student's age-appropriate understanding of their health needs, promotes the development of self-management skills, and encourages increasing independence.
- The school nurse provides staff training on recognizing the signs, symptoms, and alarms associated with hypoglycemia and hyperglycemia, as well as supporting supervising staff and the student with appropriate treatment.
- Insulin administration is performed by the school nurse unless the student is deemed self-directed requiring trained adult supervision or designated by their provider as independent in managing their care.
- The school nurse develops and maintains individualized Health Care Plans (HCPs) and Emergency Care Plans (ECPs) to support student safety during the school day.
- The school nurse follows provider orders for the treatment of hypoglycemia and hyperglycemia.

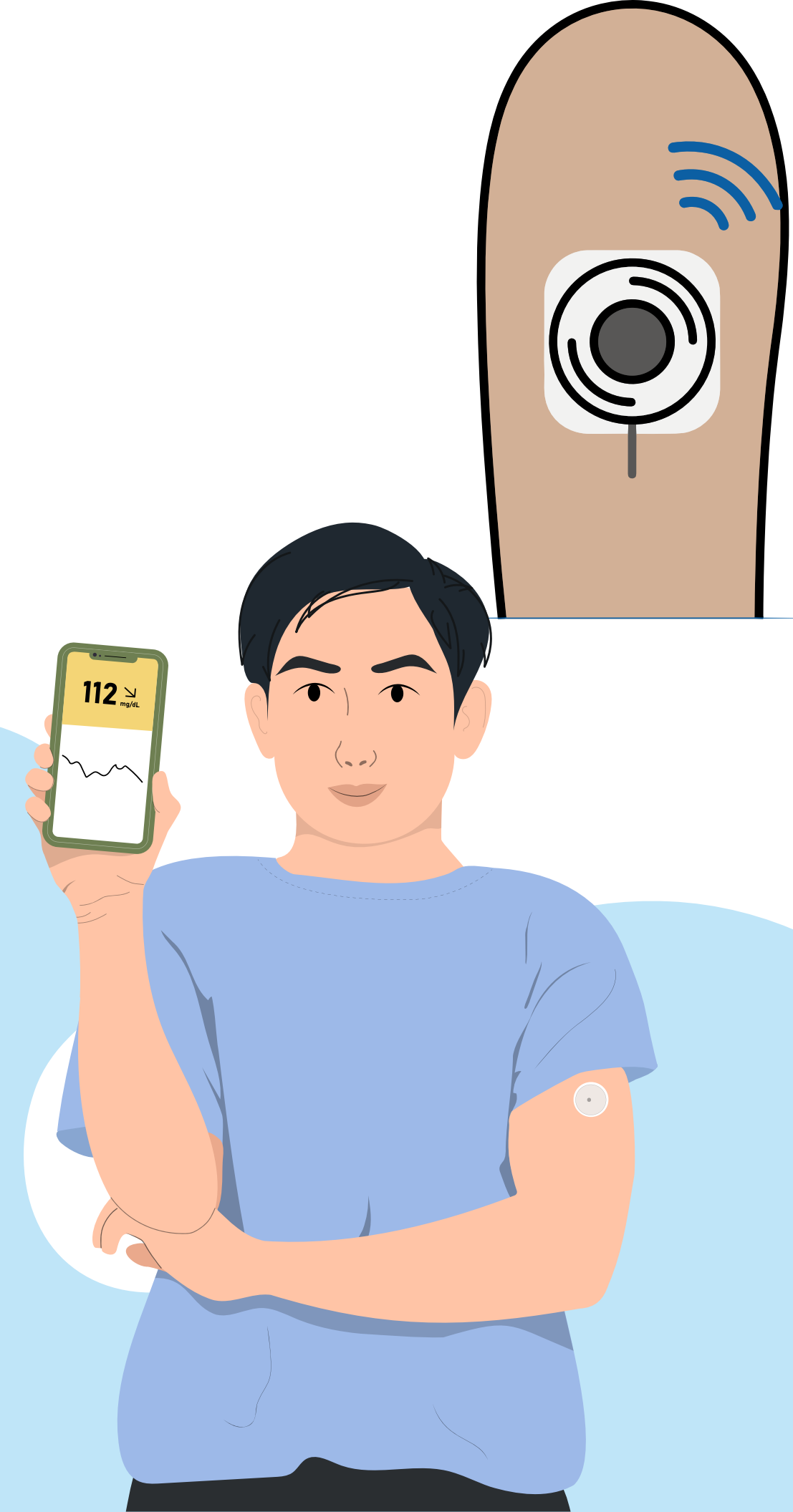


When Technology Fails

- Diabetes technology is helpful, but it is not perfect and cannot be relied on at all times.
- Devices such as CGMs, insulin pumps, cell phones and apps may occasionally stop working, lose signal, provide inaccurate readings, or require troubleshooting.
- Because of this, flexibility and teamwork are essential when addressing any concerns that arise during the school day.
- Situations may include:
 - CGM not providing readings, showing errors or needing calibration
 - Being due for a site/device change
 - Need for confirmation with a fingerstick blood glucose check
 - Use of backup insulin delivery methods, such as an insulin pen or syringe, when needed
- While technology supports diabetes management, it should not be the only method relied upon for safety.
- Having backup supplies and plans in place is essential to ensure your child's health, safety, and well-being in any situation.

When technology fails continued...

- If systems such as an insulin pump or CGM stop working or become unreliable, it is important to involve the school nurse, supervising staff, and parents in supporting your child's diabetes management at school.
- The school nurse supports students and staff across the entire school building, including others with chronic, acute and emergent medical and needs. Because of this, the nurse may not always be able to respond immediately in every situation.
- This is why training and preparation of supervising staff is essential—they are often the first point of support and play a key role in ensuring your child's safety.
- Diabetes management at school is a team effort. Clear communication, shared responsibilities, and collaboration between families, school staff, and the nurse help ensure safe and effective care throughout the school day.





THANK YOU!



If you have any questions regarding your child's daily management at school, please reach out to the health office.

- Country Parkway Elementary
 - 716-626-9870
- Dodge Elementary
 - 716-626-9830
- Forest Elementary
 - 716-626-9805
- Heim Elementary
 - 716-626-8639
- Maple East Elementary
 - 716-626-8810
- Maple West Elementary
 - 716-626-8850



- Casey Middle
 - 716-626-8580
- Heim Middle
 - 716-626-8605
- Mill Middle
 - 716-626-8333
- Transit Middle
 - 716-626-8762



- East High School
 - 716-626-8427
- North High School
 - 716-626-8525
- South High School
 - 716-626-8222

