

## **DATA Program**

### **SB 911 *Care of School Children with Diabetes***

#### **Part 5--Scenario 1**

Justin has had diabetes for 5 years. He is 12 years old now and entering your middle school. You were notified by his Health Care Team and School Nurse that he has already been in the hospital twice during the spring and summer with DKA. His parent has met with DSS and a Social Worker was assigned to him. The IHP conference has been scheduled for the second week of school.

During the first week of school Justin is in the office for 2 or more hours every day and blood sugars are running in the 200-400 range.

**What should you have Justin do at this point?**

**Whom should you notify about the problem?**

Present for the IHP conference are the mother, Justin, the DCM's, the School Nurse, the Principal, and Justin's Social Worker. You find out that the mother has 4 children and is trying to work two jobs and leaving the kids in the care of an adult cousin. Justin is pretty much on his own.

**What are some specific points that should be included in Justin's IHP?**

#### **Teaching Notes for Scenario 1:**

**(Please note that an IHP is not mandatory, but with this child's medical history and recent hospitalizations, an IHP should be in place.)**

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1. Justin should test for ketones and drink plenty of water.
  2. The DCM should contact the parent about the elevated blood sugars and the results of the ketone test. This information should also be documented for the School Nurse and Medical Team.

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3. IHP points for Justin:
    - a. Arrange for free breakfast, snacks, and lunch according to meal plan.
    - b. Have Justin report his blood sugar and insulin dose taken to the office every morning. DCM should check on this.
    - c. Test blood sugar before lunch every day and report any problems to the mother and/or Medical Health Care Team.
    - d. Follow any pre lunch insulin guidelines.
    - e. Observe all of Justin's diabetes care at school to make sure it gets done and it is accurate.
    - f. Delineate target blood sugars and when to call parent and/or Medical Health Care Team.
    - g. Notice any patterns of missing certain classes and being in the office.
    - h. Give Justin lots of positive strokes for all the good efforts he makes.

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#### **Part 5 --Scenario 2**

Marti is seven years old and has had Type 1 diabetes for two years. She is in the second grade at your school. Although you are not her primary teacher, you are involved in the activities of the class she is in during the week. This morning you noticed that Marti seemed tired and listless. You also noticed that she wet her pants and did not report this to the teacher. The school nurse is scheduled to visit your school today. Marti is a foster child and her diabetes management is primarily left up to her foster mother.

**What should be your first action?**

**Whom do you notify of your findings?**

**What is the next step?**

**Would you recommend an IHP for this student? Why or Why Not?**

#### **Teaching Notes for Scenario 2:**

1. Your first action would be to check Marti's blood sugar.
2. If her blood sugar is greater than 240, check her urine for ketones and take appropriate steps according to Marti's IHP.
3. If no ketones are present, Marti may have missed her a.m. dosage of insulin which resulted in the high blood sugar. Call her foster parents to confirm. If ketones are present, Marti may have missed a couple of insulin injections and may be severely insulin deficient that requires immediate care.
4. Because Marti is apparently embarrassed about wetting her pants, do not make an issue of it and arrange for her to discretely leave the classroom. Arrange for the foster parents to bring fresh clothing for her to change into.
5. This situation may warrant intervention by DSS. If this is a recurring event, the foster parents may not have all of the information they need in order to adequately provide for Marti's diabetes care.
6. Involving the entire team would be helpful in developing a plan of care which includes making sure Marti is receiving her insulin on schedule. An IHP for Marti is definitely indicated.

Even though the school nurse is scheduled to visit the school sometime today, it would not be appropriate to wait until she arrives to decide on Marti's care. Notify the DCM for your area. Marti needs immediate attention.

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#### **Part 5--Scenario 3**

Sarah is six years old and was diagnosed with type 1 diabetes about one year ago. Sarah is getting ready for insulin pump therapy. Prior to lunch she checked her blood sugar and it was 150. She also gave herself an injection of rapid acting insulin. Usually Sarah eats about 60 grams of carbohydrate at lunch. Today Sarah did not like the choices and only ate 30 grams. After lunch, Sarah went outside for PE. Several minutes later Sarah told her teacher that she was dizzy and weak. Her teacher noticed that Sarah's forehead was cold and sweaty.

**What should be the teacher's first action?**

**What do you think is happening to Sarah?**

**What could have possibly prevented this from happening?**

#### **Teaching Notes for Scenario 3:**

1. First determine whether Sarah is actually having a true low blood sugar reaction by checking her blood sugar.
2. If Sarah's blood sugar is less than 70-80, she is having a low blood sugar reaction or hypoglycemia. It would be appropriate to treat with about 3 glucose tablets or 4 ounces of juice. David
3. After about 15 minutes her blood sugar should be rechecked.
4. In talking with Sarah, the teacher found out that Sarah had eaten only part of her lunch. At this time Sarah would probably need a carbohydrate and protein, such as peanut butter and crackers. The extra snack is needed because Sarah will not have her after-school snack for about three hours.
5. Sarah should be instructed to tell her teacher if she is not going to eat all of her lunch. Sarah needs to have some other food items which could be substituted and would add up to the missing 30 grams of carbohydrate.

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#### **Part 5--Scenario 4**

Keesha is in the third grade and has had type 1 diabetes for 1 year now. Her mom called you for some help with Keesha. For the past 2 weeks, Keesha has been coming home from school with very high blood sugars and feels bad. Appropriate insulin adjustments have been made. Mom has asked Keesha about it and Keesha states that she is eating what mom packs. The mother wants you to help find out if anything unusual is occurring. Mom packs her lunch for her each day according to her meal plan.

#### **What are some first steps you can take?**

You discovered that Keesha is very talented in making bead and string bracelets. She has been trading her bracelets for extra food from classmates during lunch, cookies, chips, etc.

#### **What next steps could you take with Keesha?**

#### **Teaching Notes for Scenario 4:**

1. First tell Keesha that her mom called and is concerned and you want to know if Keesha has any thoughts or ideas about where the high numbers are coming from.
2. Keesha states, "No, I don't know."
3. If you are not in the lunchroom at the same time Keesha is there, have another school staff member check on her without making any comments to her, just observe.
4. The TA discovered that Keesha is trading her bracelets for food from other students' lunches. She eats all her mom is sending in her lunch box.
5. First you need to talk with Keesha because she does need to trust you and know you don't go behind her back.
6. Arrange a meeting very soon with Keesha to discuss the matter. Explain that her mom wanted you to follow up on the matter and that you discovered that she was very talented at making bracelets.
7. Keesha confesses at this point and gets teary.
8. She is not being a "bad" kid; she just wants to enjoy what other kids are having. She explained that she never gets chips and cookies at home like she used to get.
9. Ask her if it would be OK if you both talk to mom together and figure out a way that she could have those things occasionally. (No food is off limits with carb counting--We just need to know how much to eat.)
10. She agrees that this may be a good idea and asks if you could talk to mom today and she said she was sorry she lied.
11. She then declares that maybe she could sell her bracelets on the weekends for money and just give them as friendship bracelets to

special people at school.

12. You agree that this is a great solution and that you want her to feel she can always be honest with you.

13. She leaves the meeting smiling and tells you she will make you a friendship bracelet too.

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#### **Part 5--Scenario 5**

Davis is a 12 year old who was diagnosed with Type 1 diabetes about five years ago. He is on the soccer team and has recently had several episodes of low blood sugar. He has hypoglycemia unawareness and no longer has symptoms of low blood sugar. The coach notices that David has walked off the soccer field during the game. David appears dazed and confused. When approached by the coach David is combative and tells the coach to leave him alone.

**What should be the first action of the coach?**

**What would be the next steps?**

#### **Teaching Notes for Scenario 5:**

1. David is having a severe hypoglycemic episode which could rapidly cause him to pass out. It is important to treat his low blood sugar as rapidly as possible. At this time, treating the low blood sugar is more important than checking his blood sugar prior to treatment.

2. David may be combative and refuse to eat or drink any carbohydrates. It may be necessary to use some glucose gel or frosting gel and place between his gums and cheeks. If David refuses, it would be necessary to talk gently to him until he will accept some form of carbohydrate.

3. If David passes out because of a severe low blood sugar, it will be necessary to inject Glucagon (if available and on his Diabetes Care Plan. Placing David on his side would help to prevent aspiration. The coach should get someone to call 9-1-1 and stay with David.