



Guidelines for the Care Needed for Students with Diabetes

for the implementation of

**O.C.G.A. 20-2-779 Care of students with diabetes;
definitions; training of school employees; diabetes medical
management plan; no liability for staff; application to
private schools**

Version 2.0

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1) DEFINITIONS

(a) **Diabetes medical management plan (DMMP)** – a document developed and signed by the student's physician or other health care professional that outlines the diabetic-related services, including the student's target range for blood glucose levels, needed by the student at school and is signed by the student's parent or guardian.

(b) **Diabetes** – a chronic disease in which blood glucose (sugar) levels are above normal. People with diabetes have problems converting food to energy. After a meal, the body breaks down food into a sugar called blood glucose, which the blood carries to cells throughout the body. Insulin, a hormone made in the pancreas, allows blood glucose to enter the body's cells, which use it for energy. People develop diabetes because the pancreas produces little or no insulin or because the cells in the muscles, liver, and fat do not use insulin properly. As a result, the blood glucose builds up in the blood and is transported to the kidney, where it is eliminated from the body in the urine. Thus, the body loses its main fuel source even though the blood contains large amounts of blood glucose. When insulin is no longer made, it must be obtained from another source—insulin injections or an insulin pump. When the body does not use insulin properly, people with diabetes may take insulin or other blood glucose-lowering medications. Neither insulin nor other medications, however, are cures for diabetes; they only help to manage the disease. (American Diabetes Association)

(c) **Health Care Professional** – a Doctor of Medicine or osteopathy, Physician's Assistant, or Advanced Practice Nurse licensed by the state of Georgia.

(d) **Certified Diabetes Educator** – a health professional possessing comprehensive knowledge of and experience in diabetes prevention, prediabetes, and diabetes care and management. (American Diabetes Association)

(e) **Trained Diabetes Personnel** – a school employee who volunteers to be trained in accordance with State Board of Education Rule 160-4-8-.18. Such an employee shall not be required to be a health care professional.

(f) **Undesignated Ready-to-Use Glucagon** – a glucagon rescue therapy approved by the United States Food and Drug Administration prescribed in the name of a school. It does not require reconstitution for treating severe hypoglycemia in a dosage form and it can be rapidly administered to the patient in an emergency, including prefilled injectable or nasally administered glucagon.

2) OVERVIEW

(a) These guidelines are to help schools and school districts establish a safer learning environment for students with diabetes. These materials are based on the belief that students with diabetes can participate in all academic and non-academic school-related activities. For students with diabetes to be successful in school, a comprehensive health plan must be collaboratively developed by families, students, school personnel, and health care professionals. The individualized health plan (IHP) implements the Diabetes Medical Management Plan (DMMP) provided by the health care professional, including the provider's orders and provisions appropriate to each student's needs during the school day and for other school-related activities. The IHP must be based upon and consistent with the DMMP.

(b) Federal laws that protect children with diabetes include Section 504 of the Rehabilitation Act of 1973 (Section 504), the Individuals with Disabilities Education Act (IDEA), and the Americans with Disabilities Act (ADA). Students with diabetes may be eligible for protection under Section 504 and the ADA, and some of these students may also be eligible under IDEA. Title II of the ADA prohibits discrimination based on disability by public entities. These federal laws (ADA, IDEA, and Section 504) mandate that all public school students have access to health care during the school day and for extracurricular school activities, if necessary, to allow the student to participate fully in these activities. Confidentiality and privacy of the student's medical information, including diabetes diagnosis, should be respected and protected in accordance with applicable laws and regulations, such as the Health Insurance Portability Act (HIPAA) and the Family Educational Rights and Privacy Act (FERPA).

(c) In Georgia, the Rules and Regulations Regarding the Delegation of Nursing Tasks do not allow the professional registered nurse to delegate nursing functions to Unlicensed Assistive Personnel (UAP). However, many schools in Georgia do not have a school nurse as the designated diabetes provider. Even when a nurse is assigned to a school full time, they are not always available to provide direct care during the school day. Thus, it is often necessary for specific tasks for the care of a student with diabetes to be performed by trained diabetes personnel. Such tasks may include medication administration, blood sugar monitoring, and emergency interventions, including Glucagon, according to the student's IHP, DMMP, or both.

3) REQUIREMENTS FOR SAFE MANAGEMENT OF STUDENTS WITH DIABETES IN THE SCHOOL SETTING.

(a) The parent or guardian of each student with diabetes who seeks diabetes care while at school shall submit to the school a DMMP, which shall be reviewed and implemented by the school upon receipt.

(b) The school district is required by Georgia state law, O.C.G.A. § 20-2-779, to follow a written DMMP completed by the student's healthcare provider.

(c) The school nurse is the most appropriate person in the school setting to provide care for and manage a student with diabetes. Other trained diabetes personnel shall be available as necessary. The school nurse or at least one trained diabetes personnel shall be on-site at each school and available during regular school hours to provide care to each student with a diabetes medical management plan being implemented by the school.

(d) In accordance with the request of a parent or guardian of a student with diabetes and the student's DMMP, the school nurse or, in the absence of the school nurse, trained diabetes personnel shall perform functions including, but not limited to, responding to blood glucose levels that are outside of the student's target range; administering glucagon; administering insulin, or assisting a student in administering insulin through the insulin delivery system the student uses; providing oral diabetes medications; checking and recording blood glucose levels and ketone levels, or assisting a student with such checking and recording; and following instructions regarding meals, snacks, and physical activity. As provided in O.C.G.A. § 20-2-779, these activities do not constitute the practice of nursing. They are exempted from all applicable statutory and regulatory provisions that restrict what activities can be delegated to or performed by a person who is not a licensed health care professional.

(e) Upon written request of a student's parent or guardian and if authorized by the student's DMMP, a student with diabetes shall be permitted to perform blood glucose checks, administer insulin through the insulin delivery system the student uses, treat hypoglycemia and hyperglycemia, and otherwise attend to the monitoring and treatment of the student's diabetes in the classroom, in any area of the school or school grounds and at any school-related activity, and the student shall be permitted to possess at all times all necessary supplies and equipment to perform such monitoring and treatment functions.

(f) For purposes of field trips, the parent, guardian, or designee of such parent or guardian of a student with diabetes may, at the school's discretion, accompany such student on a field trip.

4) TRAINING SCHOOL EMPLOYEES IN THE CARE NEEDED FOR STUDENTS WITH DIABETES.

(a) Georgia law, O.C.G.A. § 20-2-779, requires each local board of education and state-chartered school to ensure the training outlined below.

(b) Schools must train at least two school employees in the care needed for students with diabetes at each school attended by a student with diabetes.

(c) A school employee shall not be subject to any penalty or disciplinary action for refusing to serve as trained diabetes personnel.

(d) Each local school system and state-chartered school shall provide information in the recognition of diabetes-related emergency situations to all bus drivers responsible for the transportation of a student with diabetes.

(e) Training shall be conducted by a school nurse or other health care professional with expertise in diabetes and shall take place prior to the commencement of each school year, or as needed when a student with diabetes enrolls at a school, or when a student is newly diagnosed with diabetes. Local boards of education shall ensure that the school nurse or other health care professional provides follow-up training and supervision, as necessary.

(d) Training shall include, at a minimum:

1. Recognition and treatment of hypoglycemia and hyperglycemia;
2. Understanding the appropriate actions to take when blood glucose levels are outside of the target ranges indicated by a student's diabetes medical management plan;
3. Understanding physician instructions concerning diabetes medication dosage, frequency, and the manner of administration;
4. Performance of finger-stick blood glucose checking, ketone checking, and recording the results;
5. Administration of insulin and glucagon, an injectable used to raise blood glucose levels immediately for severe hypoglycemia, and the recording of results;
6. Performance of basic insulin pump and continuous glucose monitor functions;
7. Recognizing complications that require emergency assistance;
8. Recommended schedules and food intake for meals and snacks, the effect of physical activity upon blood glucose levels, and actions to be implemented in the case of schedule disruption; and
9. The requirements of O.C.G.A. § 20-2-779 and State Board of Education Rule 160-4-8-.18 *Diabetes Medical Management Plans*.

(e) Suggested tools for providing training are [Helping the Student with Diabetes Succeed](#) by the National Institute of Diabetes and Digestive and Kidney Diseases, [Managing Diabetes at School](#) by Centers for Disease Control, and Prevention and [Training Resources for School Staff](#) by the American Diabetes Association.

(5) SUGGESTED COMPONENTS OF DIABETES MEDICAL MANAGEMENT PLANS (DMMP)

(a) Sample forms of DMMPs are provided in Appendix A.

(b) A DMMP shall be signed by a health care professional or a certified diabetes educator (once a health care professional has signed the initial plan) and the student's parent or guardian.

(c) A DMMP should include the dosage, delivery system, and schedule for blood glucose monitoring; insulin/medication administration; glucagon administration; ketone monitoring schedule and amounts of meals and snacks; physical activity and instructions to address blood glucose levels; the symptoms of hypoglycemia and hyperglycemia and their recognition and treatment; emergency contact information; and address the student's level of self-care and management.

(d) A DMMP should be completed and submitted to the school annually or when changes are made by the student's health care professional.

6) UNDESIGNATED READY-TO-USE GLUCAGON

(a) A school may acquire and stock undesignated ready-to-use glucagon with a prescription in accordance with O.C.G.A. § 26-4-116.4, which allows a physician, advanced practice registered nurse, or physician assistant who is licensed to practice in Georgia, the ability to prescribe undesignated ready-to-use glucagon for schools. This also allows pharmacists the ability to dispense undesignated ready-to-use glucagon with a prescription based on O.C.G.A. § 26-4-116.4.

(b) The school shall designate an employee or agent trained in the possession and administration of glucagon who shall be responsible for the storage, maintenance, and distribution of the stocked undesignated ready-to-use glucagon.

(c) Undesignated ready-to-use glucagon shall be authorized and made available by the school for any student with a DMMP signed by the parent or guardian. This also applies to students deemed independent for diabetes care activities on the DMMP.

(d) A school may obtain free or reduced-priced undesignated ready-to-use glucagon from manufacturers or third-party suppliers.

(7) ADDITIONAL REQUIREMENTS

(a) A student's school choice under O.C.G.A. § 20-2-2131 or other applicable law shall in no way be restricted because the student has diabetes.

(b) No physician, nurse, school employee, local school system, or state chartered special school shall be liable for civil damages or subject to disciplinary action under professional licensing regulations or school disciplinary policies because of the activities authorized or required by O.C.G.A. § 20-2-779 when such acts are committed as an ordinarily reasonably prudent physician, nurse, school employee, local school system, or state chartered special school would have acted under the same or similar circumstances.

APPENDIX A

Form 1: [Sample Diabetes Medical Management Plan \(DMMP\)](#)

Form 2: [Sample Hyperglycemia Emergency Care Plan](#)

Form 3: [Sample Hypoglycemia Emergency Care Plan](#)

Form 4: [Safe at School: Tips for Teachers](#)

Form 5: [Classroom Management FAQs](#)

Note: The hyperlinks above link directly to resources created and distributed by the [American Diabetes Association](#)®.

APPENDIX B

Form 1: Sample Memorandum of Agreement

Form 2: Sample School Request for Prescription

Form 3: Sample Emergency Medication Use Administration Reporting

Legal Disclaimer: Please note that the forms listed above are sample forms. Please consult your school district's legal counsel before implementing the use of any legally binding documents.

Memorandum of Agreement Undesignated Ready-to-Use Glucagon for Diabetic Students

A school or school system may choose to use a Memorandum of Agreement if a formal agreement is preferred or requested by the licensed provider to define relationships and protocols with respect to the provision of a prescription.

Effective Date: _____ **End Date:** _____

MEMORANDUM OF AGREEMENT BETWEEN _____ **AND**
(Physician)

(School or School System)

Physician and School or School System enter into this Agreement to support the safe and effective management of severe hypoglycemia due to diabetes in the school setting consistent with O.C.G.A. § 20-2-779 by stocking and administering undesignated ready-to-use glucagon for severe hypoglycemic episodes in diagnosed diabetic students.

1) Physician agrees to:

- a) Write a prescription in the name of the school or school system for the stocking of undesignated ready-to-use glucagon for severe hypoglycemic episodes in diagnosed diabetic students. The physician is in no way responsible for training staff on when to use the undesignated ready-to-use glucagon or for assuring the students have a DMMP on file.

2) School or School System agrees to:

- a) The school has approved policies governing the administration of undesignated ready-to-use glucagon by school personnel.
- b) The unlicensed school personnel authorized to administer undesignated ready-to-use glucagon will complete training in recognizing the symptoms of hypoglycemia and the correct method of administering ready-to-use glucagon.
- c) The school will maintain a list of school personnel (licensed and unlicensed) authorized and trained to administer undesignated ready-to-use glucagon when a school nurse is not immediately available.
- d) Undesignated ready-to-use glucagon will only be administered in accordance with a written medication administration plan.
- e) When undesignated ready-to-use glucagon is administered, the local emergency medical services system (911) should be notified immediately, followed by notification of the school nurse, student's parents, or, if the parents are not available, any other designated person(s), and the student's physician.
- f) When undesignated ready-to-use glucagon is administered, the school nurse should complete the Report of Administration and fax to the Physician within 72 hours of administration.
- g) There are written procedures for the following for undesignated ready-to-use glucagon:
 - i) proper storage
 - ii) development of the medication administration plan
 - iii) documentation of administration

- iv) notification of administration
- v) recording receipt and return of medication by the school nurse or trained diabetes personnel
- vi) reporting medication errors
- vii) reviewing any incident involving the administration of undesignated ready-to-use glucagon to determine the adequacy of the response and to consider ways to reduce risks for the student and the student body in general
- viii) planning and working with the emergency medical system to ensure the fastest possible response

Termination Upon Thirty Days Notice: This Agreement may be terminated by either party at any time, for any reason, or for no reason, upon thirty days (30) written notice.

Signatures:

Physician: _____ **Date:** _____

Print/Type Name: _____

School/District Rep.: _____ **Date:** _____

Print/Type Name: _____

Title: _____

SCHOOL REQUEST FOR PRESCRIPTION (UNDESIGNATED READY-TO-USE GLUCAGON)

The Request for Prescription should be completed and signed by the school or school district and sent to the Physician for a prescription for the undesignated ready-to-use glucagon from the prescribing medical provider. **Once the prescription has been received, the school or school system should keep a copy on file.**

School: _____
Address: _____ <div style="display: flex; justify-content: space-between; font-size: small; margin-top: 5px;">(Street)(City)(State)(Zip Code)</div>
School Nurse Contact Name: _____

The above-named school or district requests a prescription from a Physician for the limited purpose of stocking and administering undesignated ready-to-use glucagon to any student with diabetes upon the occurrence of a hypoglycemic event.

- 1) The school has established policies governing the administration of undesignated ready-to-use glucagon by school personnel.
- 2) All school personnel trained in recognizing the symptoms of severe hypoglycemia and the correct method of administration may administer undesignated ready-to-use glucagon.
- 3) When undesignated ready-to-use glucagon is administered, the local emergency medical services system (911) shall be notified immediately, followed by notification of the school nurse, student's parents, or, if the parents/guardians are not available, any other designated person(s).
- 4) There are written procedures, in accordance with any standards established by the Physician for:
 - a) proper storage of the undesignated ready-to-use glucagon.
 - b) documentation of administration.
 - c) notification of administration.
 - d) recording receipt and return of medication by the school nurse.
 - e) reporting medication errors.
 - f) reviewing any incident involving the administration of undesignated ready-to-use glucagon to determine the adequacy of the response and to consider ways to reduce risks for the student and the student body in general.
 - g) planning and working with the emergency medical system to ensure the fastest possible response.

I certify that I have read and agree to the above and all requirements of undesignated ready-to-use glucagon and that the information provided in this request is accurate.

PHYSICIAN (print name): _____

Signature: _____ Date: _____

Address: _____
(Street) (City) (State) (Zip Code)

Telephone: _____ Fax: _____ Email: _____

PRINCIPAL/HEADMASTER (print name): _____

Signature: _____ Date: _____

Address: _____
(Street) (City) (State) (Zip Code)

Telephone: _____ Fax: _____ Email: _____

SCHOOL NURSE CONTACT (print name): _____

Signature: _____ Date: _____

Address: _____
(Street) (City) (State) (Zip Code)

Telephone: _____ Fax: _____ Email: _____

**UNDESIGNATED READY-TO-USE GLUCAGON EMERGENCY MEDICATION
ADMINISTRATION REPORTING FORM**

SCHOOL DISTRICT: _____ SCHOOL: _____

ADDRESS: _____

CONTACT PERSON COMPLETING FORM: _____

TITLE: _____

EMAIL: _____ TELEPHONE: _____

DATE OF INCIDENT: _____ TIME OF INCIDENT: _____ A.M. _____ P.M.

1. Age of Individual receiving emergency undesignated ready-to-use glucagon: _____

2. Description of the person receiving emergency medication: (circle one only)

- a. Student
- b. Staff Member
- c. Visitor
- d. Other (please specify) _____

3. Were there any contributing factors triggering the need to use the medication? (*Circle all that apply*)

- a. Not enough food intake (missed a meal/snack)
- b. Too much insulin taken
- c. Excessive physical activity
- d. Equipment failure (insulin pump)
- e. Illness
- f. Other not listed _____

4. Location of where symptoms developed: (Check all that apply)

- a. Within school building
- b. On school grounds
- c. Other (e.g., school activity location, field trip location, etc.) _____

5. Type of person administering the emergency medication: (Circle all that apply)

- a. Licensed School Nurse
- b. Trained Personnel
- c. Student
- d. Other (please specify) _____

Signature:

School/District Rep.: _____ **Date:** _____