

Kids in School with Diabetes



Background

Approximately 30,000 school-aged children (1 in every 300 students) live with type 1 diabetes (T1D)¹, an autoimmune disease that causes the pancreas to stop producing insulin. These numbers suggest that likely every school across the country has one or more students with T1D. Management of T1D requires monitoring of blood glucose levels, food intake, exercise, and daily insulin by injection or infusion. Many children require a dose of insulin several times a day, including while at school. Students spend 30 to 35 hours per week in school settings, making it vitally important for them, along with their parents/guardians, health-care providers and school personnel, to know what their roles and responsibilities are in the diabetes management process and to feel comfortable with these.

Challenges

A supportive school environment is essential for the health and safety of children living with T1D. Maintaining target blood sugar levels is important for academic performance and avoiding life-threatening emergency circumstances such as hypoglycemia. With support from school personnel, most students can manage their diabetes independently. However, some students, especially those that are very young or are newly diagnosed, are unable to perform diabetes management tasks and may require someone to assist with or to administer insulin, monitor blood sugar, or supervise food intake and activity.

Children with diabetes have the right to be full and equal participants in all elements of school life. However, because of their disease, they are often stigmatized, left out of a full school experience, or placed in vulnerable circumstances. Students may have to leave the classroom and go to a designated area to test their blood sugars or treat hypoglycemia. This puts children at risk, singles them out as different from other students and leads to missed classroom time. They may be denied participation on sports teams or field trips if school personnel are unable to assist with glucose monitoring or insulin administration.

Policy Implications

Saskatchewan is the only province with no policy to support kids in schools with diabetes. British Columbia and Prince Edward Island include direct support for daily self-management, such as help administering insulin or glucagon, so they are considered the most comprehensive. All other provinces have some policies or guides in place, but these do not include direct support for self-management, which would make them more favourable to kids in school and their caregivers. A lack of policy or an incomplete policy means that parents are often required to adjust their children's diabetes treatment plan or step in and provide care during school hours. Concerned about hypoglycemia, 21% of parents reduce their child's insulin at least once a week, and almost 13 per cent take time off work to assist with their children's care at school.¹

Recommendations

To promote a safe and inclusive environment at school Diabetes Canada has developed [Guidelines](#) for the Care of Students Living with Diabetes. The Canadian Paediatric Society and the Canadian Pediatric Endocrine Group have also developed [recommendations](#). These statements provide guidance to Saskatchewan who should develop policies, and to Alberta, Manitoba, Ontario, New Brunswick, Nova Scotia, and Newfoundland & Labrador who should enhance their policies to ensure students' diabetes management needs are adequately supported (refer to chart on page 2). In addition to comprehensive school policies, schools boards and school personnel should have access to the training, supports and resources required to help students best manage their diabetes.

References

1. Canadian Paediatric Society. New Data Shows More Needs to be Done to keep Kids with Diabetes Safe at School. 2017. Accessed December 5th, 2018. Retrieved from: <https://www.cps.ca/en/media/new-data-shows-more-needs-to-be-done-to-keep-kids-with-diabetes-safe>.

Kids in School with Diabetes: Provincial Policy Development

PROVINCES	BC	AB	SK	MB	ON	NB	NS	PEI	NL
Provincial policy standards or guidelines	YES Provincial Standards: Supporting Students with Type 1 Diabetes in the School Setting (2015)	PARTIAL Guidelines for Supporting Students with Type 1 Diabetes at School (2019)	NO Managing Life-Threatening Conditions: Guidelines for SK School Divisions (2015)	PARTIAL Caring for Children with Diabetes in a Community Program (2017)	PARTIAL PPM 161: Supporting Students with Prevalent Medical Conditions in Schools (2018)	PARTIAL Policy 704 – Health Support Services / Dept. of Education Handbook for Type 1 Diabetes Management in Schools (2008)	PARTIAL Guidelines for Supporting Students with Type 1 Diabetes (and other diabetes requiring insulin) (2010) - update of policy in progress	YES Guidelines for Diabetes Management in Schools (2018)	PARTIAL Guidelines for Diabetes Management in Schools (2014)
Description (key components)	In line with Diabetes Canada's Guidelines Includes recommendations for: <ul style="list-style-type: none"> • Individual Care Plan • Direct support for students unable to self-manage • Diabetes education for school personnel • Additional training for designated school personnel • Designated (trained) school personnel permitted to administer glucagon, if included in ICP 	Provides information on how schools, school authorities, parents, HCP and community service providers can support students with type 1 diabetes at school and during school-related activities. Includes recommendations for: <ul style="list-style-type: none"> • School board policy • Education for school personnel • Emergency preparedness 	Diabetes included as a life-threatening condition Includes recommendations for: <ul style="list-style-type: none"> • Individual Care Plan • Diabetes education for school personnel 	Students with T1D or T2D using insulin are eligible for URIS Group B support Includes recommendations for: <ul style="list-style-type: none"> • Individual Care Plan • Some direct support for students unable to self-manage • Diabetes education for school personnel • Training on BG testing for designated school personnel 	Requires school boards to develop policies to support students with diabetes, asthma, epilepsy and anaphylaxis Includes recommendations for: <ul style="list-style-type: none"> • Individual Care Plan • Diabetes education for school personnel • Principal encouraged to find school personnel to assist with daily management needs of students 	Diabetes management is considered an essential routine service. Includes recommendations for: <ul style="list-style-type: none"> • Individual Care Plan • Some direct support for students unable to self-manage • Diabetes education for school personnel • Additional training for designated school personnel • Designated (trained) school personnel may administer glucagon, if included in ICP • Diabetes education for school personnel 	Includes recommendations for: <ul style="list-style-type: none"> • Individual Care Plan • Some direct support for students unable to self-manage • Diabetes education for school personnel • Additional training for designated school personnel • Designated (trained) personnel allowed to administer glucagon, if included in ICP 	In line with Diabetes Canada's Guidelines Includes recommendations for: <ul style="list-style-type: none"> • Individual Care Plan if parent requests • Direct support for students unable to self-manage • Diabetes education for school personnel • Additional training for designated school personnel • Designated (trained) personnel allowed to administer glucagon, if included in ICP 	Includes recommendations for: <ul style="list-style-type: none"> • Individual Care Plan • Direct support for students unable to self-manage • Diabetes education for school personnel • Additional training for designated school personnel • Designated (trained) school personnel may administer glucagon, if included in ICP
Cautionary Notes	Delegated Care Plan vs. Individual Care Plan, but Nursing Support Services (NSS) accommodating students who require additional blood sugar testing/ insulin administration	Not a provincial policy or standard. No specific requirement to support daily management tasks (e.g. BG testing, insulin administration) if student unable to self-manage. Does not address support for glucagon administration.	Not a provincial policy or standard. No specific requirement to assist with daily management tasks (e.g. BG testing, insulin administration) if student unable to self-manage. Other important diabetes care/ support elements also not mentioned. Glucagon not referenced.	No support for insulin administration when student unable to self-manage School personnel not permitted to administer glucagon	Should assist with daily management tasks (e.g. BG testing / Insulin administration) if student unable to self-manage. Glucagon not referenced. Policies at some boards more comprehensive than at others	Does not include/ is not clear on support for insulin administration when student unable to self-manage	Indicates insulin injections are parent responsibility		Does not include/ is not clear on support for insulin administration when student unable to self-manage

ABBREVIATIONS: BG = Blood Glucose; ICP = Individual Care Plan; PPM = Policy/Program Memorandum; TD1 = Type 1 diabetes; T2D = Type 2 diabetes; URIS = Unified Referral and Intake System.