INDIVIDUALIZED HEALTHCARE PLANS
Confidentiality of student health information is to be maintained at all times

• Health information may be shared with school staff with a “legitimate educational interest”
• You may obtain a release of medical information permission form from the parent/guardian in order to be able to share information with school staff
• If there is a question, written consent is best
**Confidentiality**

*Confidentiality of student health information is to be maintained at all times*

- While a nurse may contact a prescriber to clarify orders, the prescriber should not discuss any other health issues.
- A release of medical information form signed by the parent/guardian may be obtained in order for the school staff to communicate directly with the student’s primary care provider as necessary regarding health concerns.
Individualized Healthcare Plan (IHP)

- Document that combines all the student’s healthcare needs into one document for managing the health needs of the student in the school setting
- Written by the school nurse in collaboration with the parent, student, teachers/other school personnel and health care provider
IHP for the Student with Diabetes

- Must be student-specific and current
- Based on the medical orders (Diabetes Medical Management Plan or DMMP)
- Must address all phases of the school day, including:
  - Bus transportation
  - Field trips
  - Special classes (PE, music, art, etc.)
  - Classroom and education accommodations
  - Extra curricular activities
  - Emergency situations
IHP

- The school nurse develops the IHP and communicates to school staff, parent, and health care provider
- Any needed changes or updates are made to the IHP throughout the school year
- The IHP is effective only for the current school year
  - A new IHP specific to the student must be developed each year
- The IHP is provided to school staff with a “legitimate educational interest”
An IHP can also include action plans for:

- Lock down or “Shelter in Place” situations
- Severe weather emergencies
- School building evacuations
Lock Down or “Shelter in Place”

- Students will be confined to the classroom or the building
- Considerations:
  - How will the student access food?
  - How will the student access testing supplies (glucometer)?
  - How will the student access the insulin?
- Make plans BEFORE an incident occurs
Lock Down or “Shelter in Place”

Additional considerations:

• If the student is confined to a classroom – is the school employee in that classroom trained on how to handle the needs of the student with diabetes?
• How long might the situation continue?
• Does the designated health care individual in that building have a means of communication with the classroom where the student is confined?
• Are there extra supplies in the student’s kit, backpack or classroom?
• What is the age/self-care ability of the student?
The same questions will arise for weather emergencies:

- How will the student access the needed supplies, medication and food during a weather emergency?
- Does the student carry a diabetes care kit or back pack?
Emergency Action Plan (EAP)

Diabetes has the potential to develop into a medical crisis. The EAP:

- Is developed by the nurse in collaboration with the parent/guardian, prescriber and school staff based on the IHP and medical orders
- Should include:
  - Emergency contact information
  - Plain English description of how to recognize a health crisis
  - Clear, simple, step-by-step emergency actions to be taken by school staff
- Is shared with all staff who are responsible for the student such as the principal, teacher, playground aid, cafeteria aid, bus driver, etc.

*Training on how to implement the EAP must be provided to all identified staff*
Emergency Action Plan (EAP)

Plan of action must be specifically spelled out for:

- HYPOglycemia (LOW blood glucose)
- HYPERglycemia (HIGH blood glucose)
- Diabetic Ketoacidosis (DKA)

Must include instructions for symptoms and treatment