

The Nursing Support Services (NSS) Coordinator provides support according to the <u>Provincial Standards</u>: Supporting Students with Type 1 Diabetes in the School Setting. The NSS Coordinator delegates specific tasks in accordance with the College of Registered Nurses of BC Practice Standard <u>Delegating Tasks to Unregulated Care Providers</u>. The NSS Coordinator is responsible for determining that delegating a task is in the best interest of the student. This includes assessing the care needs of the student, the complexity of the task, the environment in which the task will be performed, and the suitability of the school staff person(s) to carry out the task. Delegation may not be suitable or possible in all situations.

I. Promoting Student Independence

Standard:

- Students are supported to work towards independence in managing their diabetes care
 in the school setting, to the extent that is appropriate for their functional and cognitive
 ability, maturity and experience with their diabetes.
- Goals toward independence are developed in consultation between the parent/guardian, the NSS Coordinator, school personnel, and student if appropriate. The health care team¹ is also available to consult as needed.

II. Blood Glucose Monitoring

Standard:

NSS Coordinators are available to delegate to school staff the task of blood glucose
monitoring (BGM) or the supervision of the student who is not yet fully independent in
the task.

Procedures:

- If delegation is deemed appropriate for an individual student, the NSS Coordinator completes an NSS Delegated Care Plan in consultation with the parent, and the school. Training and ongoing monitoring of caregiver competence is provided.
- All students with type 1 diabetes (T1D) require routine BGM at a minimum before lunch
- BGM is also recommended at the following times:
 - midmorning/recess;
 - two hours after lunch is completed;

¹ The student's health care team is typically the medical and nursing team that manage the student's diabetes including a Pediatric Diabetes Clinic.



- before sport or exercise;
- o whenever there are signs or symptoms of low or high blood glucose
- Special considerations regarding blood glucose monitoring may be required for students that have long bus rides to and from school.
- Student-specific BGM schedules are included in the NSS Delegated Care Plan Frequency of BGM will not exceed the parameters listed above.
- NSS Coordinators will not delegate the operation or monitoring of Continuous Glucose Monitoring devices.
- Delegation of tasks related to BGM may include any or all of the following:
 - Caregiver performing BGM and intervening appropriately based on results;
 - Caregiver assisting with BGM and/or supervising a student performing BGM, and intervening appropriately based on results;
 - Caregiver assisting a student, who is independent in the psychomotor skill of blood glucose monitoring, with interpreting the results of BGM and intervening appropriately.

III. Insulin Administration

Standard:

- NSS Coordinators are available to delegate to school staff the administration of rapid insulin via insulin pump or insulin pen and the supervision of self-administration of insulin for the student who is not yet fully independent in the task.
- Safely delegating tasks related to the administration of insulin requires that judgment and decision making needed by school staff is *kept to a minimum*.

Procedures:

- If delegation is deemed appropriate for an individual student, the NSS Coordinator completes an NSS Delegated Care Plan in consultation with the parent, and the school. Training and ongoing monitoring of caregiver competence is provided.
- The following cannot be accommodated:
 - Overriding the calculated dose;
 - Entering an altered carbohydrate count for foods in order to change the insulin dose;
 - Changing settings on the pump; or
 - Deviating from the NSS Delegated Care Plan

Timing of insulin dosing

• For best effect, insulin will be administered by school staff before regularly scheduled meals and snacks. For students with unpredictable eating habits, insulin may be administered after food consumption to allow for accurate carbohydrate counting.



- For students using an insulin pen:
 - Insulin may be administered at lunchtime only due to the inability to accurately calculate insulin on board.
- For students using an insulin pump:
 - Insulin can be administered by school staff at midmorning/recess, lunch and two hours after lunch.
- In consultation with the parent/guardian, special arrangements can also be made to administer insulin when food is consumed during a special event, based on availability of school staff.

Determining the bolus insulin dose

Parents are responsible for determining each bolus insulin dose. This may be achieved in different ways. The method of determining the bolus insulin dose should be the same every day for each student.

For students using an insulin pump:

• The parent pre-programs child-specific parameters into the pump and labels the student's food with the correct number of carbohydrates. The number of carbohydrates consumed and the student's blood glucose are entered into the pump, which calculates the insulin dose that will be given.

For students using an insulin pen:

- The parent labels the student's food with the correct number of carbohydrates and provides a Bolus Calculator Sheet or an InsuLinx® Meter that allows school staff to select an appropriate dose of insulin based on the blood glucose and the number of carbohydrates consumed, OR;
- The parent may send a set number of carbohydrates for snack/lunch each day and provides an appropriate tool (such as a variable dose insulin scale) that allows caregivers to select a dose of insulin based on blood glucose. Details of how such a tool is used are outlined in the NSS Delegated Care Plan.

Double checking the insulin bolus

- It is not necessary for another adult to double check that the documented blood glucose and number of carbohydrates consumed is correct.
- For students using an insulin pump, double checking an insulin bolus by another adult is not needed. This is because an insulin pump calculates the insulin dose and records the dose actually given.
- For students using an insulin pen, a second adult needs to check that the appropriate dose has been selected and is dialled correctly into the insulin pen. The



- second adult will require some training by the NSS Coordinator but does not need to be a delegated caregiver.
- Once the student is able to select the appropriate dose and administer their own insulin, the delegated caregiver double checks the insulin bolus. A second staff person is not needed to double check the dose.

Where support is needed in adding carbohydrates consumed, it is the parents' responsibility to:

- Clearly and consistently label all snacks and meals with the correct carbohydrate number.
- If a student does not routinely consume an entire food item (such as a sandwich), the item should be provided in divided portions with carbohydrates clearly labeled for each portion.
- Some students will require an extra snack prior to a period of activity/exercise. This
 snack is to be separate from the lunch and clearly labelled that it is to be eaten before
 exercise. This extra snack for activity does not need to be labelled with a carbohydrate
 number.

IV. Nursing Tasks Not Delegated by NSS

Standard:

- Without exception, tasks below are not delegated by the NSS program:
 - Any insulin pump site care;
 - Administration of insulin via an open needle and syringe;
 - Calculating an insulin dose using a mathematical formula;
 - Troubleshooting pump operation. Should there be difficulties managing pump operation such as frequent or erroneous alarms, the parent or designate must be available by phone, or to respond to the school in person, to assist the student;
 - o Filling the reservoir/priming the tubing, and;
 - Changing the battery.

V. Recording

Standard:

 The NSS Coordinator records nursing activities including delegation in a consistent manner.



Procedures:

- The NSS Delegated Care Plan is completed by the NSS Coordinator in consultation with the parent/guardian and the school.
- The NSS Delegated Care Plan is to be easily accessible by school staff responsible for the student's delegated care.
- The NSS Delegated Care Plan is updated annually at a minimum or whenever there is a change in the student's diabetes care. Changes to delegated diabetes tasks must be communicated by the parent to the NSS Coordinator before changes are made to the care plan. In some circumstances, the NSS Coordinator may consult with the student's health care team regarding proposed changes to the care plan. The NSS Coordinator will make changes to the NSS Delegated Care Plan and train school staff in any new care needs. The parent is responsible for providing care until the NSS Coordinator and school staff have signed off on the new care plan.
- A Bolus Calculator Sheet may be created by parents using the Bolus Calculators for school lunches that can be found on the BC Children's Hospital Endocrinology and Diabetes Team's website, at the following URL: http://www.bcchildrens.ca/health-info/coping-support/diabetes.
- All Insulin Sliding Scales and Bolus Calculator Sheets must be signed and dated by a
 parent and approved by the NSS Coordinator before being added to a child/youth's NSS
 Delegated Care Plan. The NSS Coordinator is responsible for checking that the tool is
 complete and legible. In some circumstances, NSS Coordinators may need to consult
 with the diabetes care team.
- The Diabetes Medication Administration Form must be signed by the physician before any medication can be administered at school.
- School staff are required to document care as outlined in the NSS Delegated Care Plan.

VI. Discharge

Standard:

Discharge is based on the student's knowledge, comprehension, and independent skill
performance related to diabetes management during the school day. Students can
continue to receive support from school staff following discharge from NSS delegated
care, including reminders and assistance in treating low blood glucose and care in the
event of a diabetic emergency.