## **Actions for the Teacher**

Understand your responsibilities under Federal and State laws that may apply to students with diabetes, including Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, and the Individuals with Disabilities Education Act. Understand the procedures for implementing these laws. (See School Responsibilities Under Federal Laws.)
Participate in the school health team meeting(s). The teacher(s) who has primary responsibility for the student participates in the school health team meeting(s) when the student's health care plans (Diabetes Medical Management Plan, Individualized Health Care Plan, and/or Emergency Care Plans for Hypoglycemia and Hyperglycemia) and education plan (Section 504 Plan, other education plan, individualized education program) are discussed. (See How Do You Plan Effective Diabetes Management in the School Setting?)
Work with other members of the school health team to implement the student's health care and education plans.
Consult with the school nurse and the principal to determine the appropriate level of diabetes management training you should attend for carrying out your responsibilities and complete the training.
Review the information about diabetes in this guide and refer to it, as needed, to help the student with diabetes.
Recognize that a change in the student's behavior could be a symptom of blood glucose changes. Be aware that a student with low or high blood glucose levels may have some cognitive impairment that could adversely affect classroom performance, especially in timed-testing situations.
Be prepared to respond immediately to the signs and symptoms of hypoglycemia (low blood glucose) and hyperglycemia (high blood glucose) in accordance with the student's Emergency Care Plans for Hypoglycemia and Hyperglycemia. These plans include information on when and how to contact the school nurse or trained diabetes personnel. When experiencing hypoglycemia, the student should never be left alone, sent anywhere alone, or sent with another student.
<b>Be aware of the school's policy for activating Emergency Medical Services (EMS)</b> in case of a diabetes emergency. Know where supplies to treat low blood glucose are kept and where students with diabetes normally keep their supplies.
Know your role in helping the student with diabetes in a disaster, lockdown, or emergency situation.
Provide a supportive learning environment for students with diabetes to manage their diabetes safely and effectively at school. This includes enabling students to: check blood glucose; use smartphones and other monitoring technology; administer insulin and other medications; eat snacks for routine diabetes management and for treatment of low blood glucose levels; have bathroom privileges; have access to drinking water; and participate in all school-sponsored activities.
<b>Provide accommodations for students with diabetes</b> such as alternative times and arrangements for exams and permission for absences—without penalty—for health care appointments and illness, as indicated in the student's health care and education plans.

## Actions for the Teacher Continued Provide instruction to the student if he or she misses school and opportunities to make up missed classroom assignments or exams due to diabetes-related care or illness.

Recognize that eating meals and snacks on time is a critical component of diabetes management. Failure to eat lunch on time or not having enough time to finish a meal could result in low blood glucose levels, especially if a student has missed a morning snack or has had a physically strenuous or otherwise active morning at school.

Provide information for substitute teachers about the day-to-day and emergency needs of the student. Leave a copy of the Emergency Care Plans for Hypoglycemia and Hyperglycemia readily available.

Notify the parents/guardians in advance of changes in the school schedule, such as class parties, field trips, and other special events.

Communicate with the school nurse, trained diabetes personnel, or parents/guardians regarding the student's progress or any concerns about the student.

Treat the student with diabetes the same as other students, except when necessary to respond to their medical needs and any resulting educational needs. Be alert for teasing and bullying of the student with diabetes due to peers' curiosity and lack of information about injections, blood glucose monitoring, or why the student with diabetes gets to eat snacks in the classroom.

Respect the student's confidentiality and right to privacy.