Actions for the School Psychologist, Guidance Counselor, and Social Worker

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.)
Work with the school health team to implement the student's health care and education plans. Health care plans include the Diabetes Medical Management Plan, Individualized Health Care Plan, and Emergency Care Plans for Hypoglycemia and Hyperglycemia; the education plan includes the Section 504 Plan, other education plan, or individualized education program.
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.
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 school personnel. Be aware of the school's policy for activating Emergency Medical Services (EMS) in case of a diabetes emergency.
Participate in school health team meetings and communicate with the school nurse, trained diabetes personnel, and parents/guardians regarding the student's progress or any concerns about the student.
Work with school staff to promote a supportive learning environment for students with diabetes.
Ensure that the student with diabetes is treated 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.
Be aware of and be prepared to respond to the emotional needs of the student. Children react differently to having diabetes. Some are accepting and open to discussing it; others are resentful and may attempt to hide it. Often, a child will experience both types of feelings. Be aware of the student's feelings about having diabetes and identify ways to ensure the student is treated the same as other students. (See Deal with Emotional and Social Issues .)
Recognize that students with chronic illnesses such as diabetes may rebel by discontinuing all or part of their medical regimen. For example, some adolescents may stop testing their blood glucose or give their parents/ guardians and health care providers incorrect information about their blood glucose levels. Adolescents with diabetes may also burn out from the daily demands of diabetes self-management. For teens who rebel or have "diabetes burnout," a temporary period of increased support and involvement by parents/guardians and school personnel can help to maintain the teen's health while providing needed respite from the burden of diabetes management.

Actions for the School Psychologist, Guidance Counselor, and Social Worker Continued Watch for signs of eating disorders, such as unexplained weight loss, particularly in female students. Be aware that some students may not wish to share information about their diabetes with other students or school staff, particularly if it makes them feel different from others. Promote and encourage independence and self-care consistent with the student's ability, skill, maturity, and development. Respect the student's confidentiality and right to privacy.