

AMERICAN NURSES ASSOCIATION

CONSENT ACTION REPORT

to the Board of Directors

on

DELIVERY OF CARE IN SCHOOLS FOR CHILDREN WITH DIABETES

ISSUE STATEMENT:

Schools are required by law to provide an environment that allows for the management and safe delivery of care for children with diabetes during the school day. Obstacles to effective diabetic care still exist in many schools and are of mutual concern to health care providers, parents, and educators. Legislative and regulatory initiatives are being promoted at the state level to address these barriers to care. ANA has been working with representatives from the CMAs, the National Association of School Nurses, and the American Federation of Teachers to address this issue.

PROPOSED ACTION:

Whereas:

Approximately 17 million people in the United States, or 6.2 percent of the population have diabetes and approximately 151,000 diabetics are children with one in every 400 school children diagnosed with diabetes; and

Whereas:

Each year more than 13,000 young people are newly diagnosed as having Type I diabetes, referred to as juvenile diabetes; and

Whereas:

An increasing number of new cases of childhood diabetes are being diagnosed as Type 2 diabetes which has traditionally been associated with an older population, obesity and inactivity; and

Whereas:

Diabetes is a serious complex disease requiring daily, long term, comprehensive, safe

management; and

Whereas:

Schools are required by law to provide an environment that allows the effective management and safe delivery of care for children with diabetes during the school day; and

Whereas:

Despite these legal protections obstacles to effective and safe diabetic care still exist in many schools and are of mutual concern to children, parents, educators and health care providers; and

Whereas:

To fill in the gaps in care in the school setting for students with diabetes, a number of state legislatures are being asked to consider legislation that would allow the training of nonmedical staff (teachers, paraprofessionals, and others) to provide routine as well as emergency care to students with diabetes; and

Whereas:

ANA supports the concept of providing broad support for diabetic students and is simultaneously concerned about details of the proposed legislation related to delegation of nursing services and the training of non-medical school employees and volunteers to care for the health care needs of diabetic students; and

Whereas:

The CMAs, in states targeted for legislative action in 2005, now find themselves needing to address the issues related to safe effective care for diabetic children in the school setting as well as protecting the nurse practice act in their respective states; and

Whereas:

State nurse practice acts define the scope of practice, vary state to state and delineate what if any nursing services may be delegated and the conditions under which the delegation takes place. In some states, delegating to anyone other than another nurse is a clear violation of the nurse practice act. Nursing assessment is a function of the registered nurse and cannot be delegated; and

Whereas:

School nurses who are licensed registered nurses are necessary to provide safe quality care to students with diabetes, which includes development of an individualized plan of health care; as well as working with parents and the school personnel to achieve effective diabetes management in order to minimize emergency situations and foster appropriate self management for students with diabetes; and

Whereas:

The best solution for caring for students with diabetes is to ensure that there is a full time registered nurse in every school building and increasing the proportion of the nation's

elementary, middle, junior and senior high schools that have a nurse to student ratio of at least 1 to 750 is a stated goal of Healthy People 2010; and

Whereas:

In situations where it is not feasible for a school nurse to be on site at all times then guidelines for care of each child with diabetes in the school must be accessible and on file; and.

Whereas:

The Committee on Legislation is a Committee of the American Nurses Association Board of Directors whose charge is to examine legislative and regulatory issues related to health care issues and recommend courses of action;

THEREFORE BE IT RESOLVED

That the American Nurses Association promote the management and safe delivery of diabetes care in schools and facilitate advocacy on this issue which includes the following:

- ANA supports delegation of routine management tasks for the care of students with diabetes only if state law permits delegation of nursing services and only when the registered nurse determines who will be trained and what aspects of the care shall be delegated. In addition, the registered nurse will conduct the training, oversight, and evaluation of all care delivered by the nonmedical personnel; and
- ANA does not support delegation of those registered professional nursing services that require assessment and/or emergency care; and
- ANA advocates that, if a registered nurse is not available to attend to an emergency situation involving a child with diabetes, emergency services should be activated immediately by dialing 911 or the appropriate local emergency number for assessment and treatment by a qualified health care professional; and
- ANA will work collaboratively with the CMAs, the National School Nurses Association and the American Federation of Teachers to advocate for policy, legislation and/or regulation related to the safe delivery of care in schools for children with diabetes that protect both the children and the registered nurses in these settings; and
- ANA will continue to advocate for public policy and funding that provides for at least one full time licensed registered nurse in every school building.

BACKGROUND:

- Approximately 17 million people in the United States, or 6.2 percent of the population

have diabetes and approximately 151,000 diabetics are children with one in every 400 school children diagnosed with diabetes. Each year more than 13,000 young people are newly diagnosed as having Type I diabetes, referred to as juvenile diabetes. In addition, an increasing number of new cases of childhood diabetes are being diagnosed as Type 2 diabetes which has traditionally been associated with an older population, obesity and inactivity. Researchers at the Centers for Disease Control and Prevention (CDC) estimate that among new cases of childhood diabetes, between 8 percent and 43 percent are diagnosed as Type 2.

- Federal law requires any school that receives federal funding to make reasonable accommodations for the special needs of children with diabetes including an individualized assessment and plan. These federal laws include: Section 504 of the Rehabilitation Act of 1973; Americans with Disabilities Act (ADA); Individuals with Disabilities in Education Act (IDEA); and the Family and Medical Leave Act of 1993. Several states have also adopted laws aimed at improving access to education and safety of schools. Despite these legal protections, children in the classroom may not be provided with the support they need to maintain their blood glucose levels through self monitoring and administration of insulin as well as access to snacks and there may be no registered nurse available nor staff trained to assist students with diabetic emergency situations.
- To address these issues and other gaps in care, the American Diabetes Association (ADA) is moving ahead at the state level with the promotion of model legislation that emphasizes the central role of the school nurse, but authorizes the training of volunteer non-medical personnel in the performance of diabetes care tasks and emergency care. ADA's constituency is comprised of those with diabetes and their families. ADA has developed a guide to support diabetic children in schools which is being enacted through school policy, regulations and legislation. ADA believes that in order to facilitate appropriate care of the diabetic student, school personnel must have an understanding of diabetes and be trained in its management and emergency treatments for students.
- In October, 2004, ANA staff met with ADA representatives to discuss their model legislation and concerns related to the delegation of nursing services. ANA agrees with the concept of providing broad support for diabetic students but is concerned about details of the ADA plan related to delegation of nursing services and the training of non-medical school employees to care for the health care needs of diabetic students. These plans include student assessments and the administration of Insulin and Glucagon. The lines of communication remain open between ADA and ANA. ADA continues to seek ANA support for their model legislation and to look for areas of agreement on the issue.
- The CMAs, in states targeted for legislative action in 2005, now find themselves on the front line dealing with the issues related to safe effective care for diabetic children in the school setting as well as protecting the nurse practice act in their respective states. In those states, where the nurse practice act does not currently allow the delegation of nursing services, there is a strong probability that efforts will be made to authorize the training of volunteer non-medical personnel to provide diabetic care.

- During November 2004, ANA convened a conference call with representatives from the CMAs and the National Association of School Nurses (NASN) for a discussion about the essential components that should be included in a policy statement on care of students with diabetes.
- ANA has also been working with the American Federation of Teachers (AFT) on this issue. Both NASN and AFT have developed positions that reflect the general principles identified by the CMAs as being essential for safe diabetic care in the school setting. This fact provides ANA and CMAs with the opportunity to work collaboratively with these strategic organizations as they are asking for ANA's support of their positions.
- ANA Government Affairs staff met with members of the Congress of Nursing Practice and Economic's Delegation Workgroup to discuss this issue and to obtain guidance. The workgroup informed staff that current draft delegation guidelines do not address the delegation of nursing services in community based settings.
- ANA through our CMAs is well placed to provide leadership and advocacy in state legislatures on the diabetic care issue, the delegation issue, as well as promoting the need for a registered nurse ratio of 1 registered nurse to 750 students (as recommended by Healthy People 2010).