

Put Your
P L A N

into

ACTION

Managing Hyperinsulinism in School

Dina Tallis

About Me



- Mom of Ashlee, 11, HI-HA
- 11 years of elementary teaching
- 2 years of elementary principal

Unique Perspective?

What School Should Be

Put Your
PLAN
into
ACTION

- Fun
- Exciting
- Friendships
- safe



Educator Roles



- Teacher
 - Scared of unknown
 - Your child's main influence away from YOU
- Principal
 - Train staff
 - Encourage parents
 - Earn parental trust

How Will They Meet My Needs?



- ???
 - Depends on where you live
 - Fact, schools do not have to provide or have nurses
 - Fact, schools have to utilize current staff for medical accommodations and train accordingly
 - Fiction, that means schools don't care
 - Fiction, If I yell loud enough, they'll get me one

So What Are My Choices?



- Medical Plan
 - Plan with specifics about child’s medical condition and care
- Section 504 Plan
 - Legally binding plan with specifics about child’s medical care
- IEP
 - Legally binding plan with specifics about child’s care and academic accommodations

So What Are My Choices?



- Medical Plan

- Plan with very detailed information about child and child's care. Created with a team including child, parent, principal/administrator, teachers, specialists, etc.
- Not legally binding

So What Are My Choices?



- 504 Plan
 - Plan with very detailed information about child and child's care. Created with a team including child, parent, principal/administrator, teachers, specialists, etc.
 - Legally binding; regulated by the Office of Civil Rights

So What Are My Choices?



- IEP

- Plan with very detailed information about child and child's care; including academics.

- Created with a team including child, parent, principal/administrator, teachers, specialists, etc.

- Typically students with HI will qualify for an IEP; however, accommodations may not be academic. Assessments and data will determine if child needs academic support.

So What Are My Choices?



- IEP
 - Children with medical needs are not automatically learning disabled, which is what IEP's most often identify
 - Note, HI diagnosis and early symptoms may put some HI children at a higher risk for some learning disabilities....and IEP would address both medical and learning in this case

What Is Right For Us?

Put Your
PLAN
into
ACTION

- You have the right to chose!



What Is Right For Us?



- Scenarios
 - Medical Plan
 - Know school staff (I worked there), know they are trained, know they care about my child, and know they will take care of my child
 - 504
 - New school, no relationships with staff, student needs are extremely specific, tried medical plan which didn't get followed through with, legally binding

What Is Right For Us?



- Scenarios
 - IEP
 - Medical needs extreme, learning disabled, needs high level of extra support in learning, or, medical needs so severe they need a one-on-one aide

What YOU Can Do:



- **BE PREPARED**
 - Documents with details about HI
 - Emergency sheet created
 - Supplies full and ready
 - Binder with emergency information
 - Blank sheets for recording sugars
 - Good contact information

What YOU Can Do:



- **BE PREPARED**
 - Documents with details about HI
 - Emergency sheet created
 - Supplies full and ready
 - Binder with emergency information
 - Blank sheets for recording sugars
 - Good contact information

Sample

Updated: 08-25-2011

Quick Reference Emergency Sheet Hyperinsulinism-Hyperammonemia

Ashlee Tallis
6th Grade-Inlay City Middle School



Please do not send Ashlee to the office alone if low sugar is suspected.

Times to check blood sugar

- 45 minutes after lunch
- After gym
- Any time Ashlee acknowledges not feeling well
- Any time a staff member recognizes signs/symptoms

Symptoms that Ashlee may show if sugars are low

- Clumsy
- Seems to not be paying attention
- Clammy/sweating
- Thirsty
- Use the bathroom a lot
- Work doesn't show the normal neatness
- Lethargic
- Appears disoriented
- Head/body droopy/loses muscle tone

2 Kinds of Low Blood Sugars

- Activity induced
- Due to insulin levels- associated with protein ingestion

High Blood Sugar

- Not seen as an emergency; however there will be side-effects of wanting/needng to drink a lot.

Blood Sugar Plan 90 and up: No action needed

80-89: Allow to get a drink/juice or full sugar soda (Coke/Pepsi, etc.)

70-79: Must drink and have a carb-based snack. Recheck sugar in 20 minutes.

49-69: 1. Give drink and carb-based snack quickly, 2. Call mom, and recheck in 20 minutes.

Carb based snack = pretzels, chips, any candy (sugar), cookies, crackers, bread, etc.

Contact Numbers:

Mom: Dina Tallis
Home/Cell (810) 656-4030
Work (810)724-9895

Dad: Dan Tallis
Home/Cell (810) 656-6570
Work (586) 709-2867

Severe Symptoms

- Loss of consciousness
- Seizure
- Blood sugar under 40

Severe Treatment

1. Contact parents
2. Call 911
3. Stay with student

Please Note: if Ashlee has lost consciousness, 911 would be an appropriate first step.

Other Information

Medicine: Proglycem (insulin blocker) 4 ML's 1X's p/day

Allergies: Penicillin & E-mycin

Body Temperature: Ashlee will run a higher than normal body temperature, especially during times of increased activity (gym/recess & after gym/recess). This will also be accompanied with a stomach ache and usually resolves itself after a drink, snack, and lower activity levels.

Sample

Medical Plan for Jonny Appleseed

Teacher: Mrs. Tallis

Classroom: 2

- Jonny's target blood glucose level is 70-150.
- Blood glucose will be checked before eating lunch, before going home (at 3:15 p.m.) and any time he is feeling symptoms.
- If blood glucose is below 70, give him a can of pop (provided by parent).
- If blood glucose is over 400, contact father for instructions.
- Jonny will have a snack (provided by parent) at mid-morning (10:00 a.m.) and at snack time in the afternoon following the recess period (1:00 p.m.).
- The office will record Jonny's blood sugar levels and send them home to the parent at the end of each week.
- At this time, Jonny is not receiving insulin at school.
- If Jonny becomes unconscious due to low blood sugar, call 911 and wait for paramedics. Do not try to give him something to eat or drink. Dad will check with the doctor on emergency glucagon for this situation.



Sample

Section 504 Plan for Lexus
04-12-2011

Weston Elementary School
2011-2012 School Year

Name: Lexus
Birthdate: 06/01/2004
Grade: K
Teacher: Mrs. Merry Poppins

Disability: Hyperinsulinism



Sample



OBJECTIVE/GOALS OF THIS PLAN

Medical Management Plan / Quick Reference Emergency Sheet: A plan developed under Section 504 of the Rehabilitation Act of 1973, the Americans With Disabilities Act of 1990, and, as appropriate, the Individuals With Disabilities Education Act, that identifies the emergency health care needs of Lexus and services to be provided to Lexus a student with hyperinsulinism.

ACADEMIC-RELATED ACCOMMODATIONS

1. HEALTH CARE SUPERVISION

1.1. At least 2 staff members have been properly trained and will be available every day at Weston Elementary to oversee Lexus' health care in accordance with this Section 504 Plan and Lexus' Medical Management Plan / Quick Reference Emergency Sheet, including performing or overseeing blood glucose tests and responding to hyperglycemia and hypoglycemia.

2. TRAINED PERSONNEL

2.1 The following school staff members are trained in the elements required to meet the need of Lexus' Hyperinsulinism. Needs are based on individual participation and interaction levels with Lexus

Mrs. Dina Tallis, Principal
Mrs. Merry Poppins, Classroom teacher
Mrs. Sing-a-Long, Music teacher
Mr. Paint Brush, Art teacher
Ms. Jumping Jack PE teacher
Mrs. Smiles Alot, Office staff
Mrs. Likes Turtle-necks, Office staff

3. BLOOD GLUCOSE CHECKS

3.1 We will check Lexus' blood glucose levels at any time that a staff member notices Lexus seems to be portraying a symptom of a high or low sugar.

3.2 We will check Lexus' blood glucose levels at any time that she expresses feeling "high" or not right.

3.3 Lexus will get her sugars checked daily before morning snack, before lunch, and before afternoon snack.

Sample



4. SNACKS AND MEALS

4.1 Lexus will have one snack and one lunch each day at Weston. The snacks are provided by the parents. In all foods eaten, carbohydrate/protein count is considered and counted.

4.2 The parents/guardians will pack snacks for each day and will provide a supply of additional snacks to be kept at the school to treat hypoglycemia or for emergency situations. Parents will monitor snack supplies.

4.3 All school personnel will permit Lexus to eat a snack in the classroom or wherever the child is located (including, but not limited to classrooms, gym, auditorium, playground, field trips, and school bus) at times designated in the Medical Management Plan / Quick Reference Emergency Sheet and whenever needed to treat hypoglycemia or in response to a change in Lexus' regular schedule.

4.4 Snacks and Meals will occur at the same time every day.

4.5 Parents will provide carbohydrate counts/protein counts on a daily basis for snacks or food brought from home. School will make available hot lunch and help assist in carb/protein counts.

5. WATER AND BATHROOM ACCESS

5.1 Lexus shall be permitted to have immediate access to water and to use the drinking fountain without restriction.

5.2 Lexus shall be permitted to use the bathroom without restriction.

6. TREATING HIGH OR LOW BLOOD SUGAR

6.1 When any staff member believes Lexus is showing signs of high or low blood sugar, or Lexus verbalizes she feels high or off, the staff member will send Lexus to the office for a blood sugar check. If symptoms are severe in nature, an adult will walk him up. If he is acting normally, a buddy will accompany him. **Never send Lexus with actual – or suspected – high or low blood sugar anywhere alone.**

6.2 High or low blood sugar levels should be treated as set out in the attached Medical Management Plan / Quick Reference Emergency Sheet.

6.3 Upon a blood sugar test and a number is obvious, the plan of action will follow as detailed in the Quick Reference Emergency Sheet (attached.)

6.4 The location of supplies for testing and treating Alex's blood sugar numbers will be in the office.

Sample



7. GLUCOSE TESTS

7.1 Glucose tests may be done at any location at school including, but not limited to, the classroom, on school grounds, the cafeteria, at field trips or sites of extracurricular activities, or on the school bus.

7.2 Glucose tests will be done at the times designated, or whenever Lexus feels that his blood sugar level may be high or low, or when a staff member observes symptoms of hypoglycemia or hyperglycemia.

7.3 Lexus' usual symptoms of high and low blood sugar levels are set out in the attached Medical Management Plan / Quick Reference Emergency Sheet.

8. TESTS AND CLASSROOM WORK

8.1 At this point, Lexus' academics are not showing as being effected by his Hyperinsulinism or the time out of classroom due to the testing and maintenance of Hyperinsulinism. However, Lexus will always have needed accommodations and be given extra time for any work or activities he misses due to be out of the classroom.

9. EQUAL TREATMENT AND ENCOURAGEMENT

9.1 Encouragement is essential. Lexus must not be treated in a way that discourages Lexus from eating snacks on time.

9.2 Lexus shall be provided with privacy for blood glucose testing and medicine needs.

9.3 All staff will keep Lexus' diabetes confidential, except to the extent that Lexus decides to openly communicate about it with others.

10. PARENTAL NOTIFICATION

10.1 NOTIFY PARENTS/GUARDIANS IMMEDIATELY IN THE FOLLOWING SITUATIONS:

- Symptoms of severe low blood sugar such as continuous crying, extreme tiredness, or loss of consciousness.
- Lexus' blood glucose test results are below 70 mg/dl and symptomatic or above 300 mg/dl. Lexus has any number glucose results and he is showing extreme symptoms, and when #'s are below 70 mg/dl and symptomatic or above 300 mg/dl after actions taken (glucose tabs, insulin.)
- Lexus refuses to eat or cooperate with medical needs.

Sample

- Any injury.
- If Lexus' blood glucose results are below 70 mg/dl near dismissal time to ensure the safest measure of returning home.

10.2 EMERGENCY CONTACT INSTRUCTIONS

1. Call Lexus' mom
2. Call Lexus' father
3. Call Lexus' grandfather
4. Repeat

EMERGENCY CONTACTS:

Mom: XXXX XXXX (H) 555-555-5555 (C) 555-555-5555
Dad: XXXX XXXX (H) 555-555-5555 (C) 555-555-5555
Grandfather: XXXX XXXX (H) 555-555-5555

This Plan shall be reviewed and amended at the beginning of each school year or more often if necessary.

Approved and received:

Parent/Guardian

Date

Parent/Guardian

Date

Approved and received:

School Representative and Title

Date



Conclusion

Put Your
PLAN
into
ACTION

- You have rights
- You are your child's greatest advocate



Resources



- <http://www.washington.edu/doit/Stem/articles?52>
- <http://www.ldonline.org/article/6086/>
- <http://www.drcnh.org/IDEA504.pdf>
- <http://congenitalhi.org/>
- <http://sur1.congenitalhi.org/hyperinsulism.htm>
- <http://abcnews.go.com/Health/DiabetesScreening/story?id=3812946#.T1jQAsD2af4>