

Sec. 19a-428-7. Monitoring of Diabetes

(a) Policy and Procedures

(1) All youth camps at which designated staff members will be administering finger stick blood glucose tests shall have written policies and procedures governing the administration of finger stick blood glucose tests to children diagnosed with diabetes mellitus. The policies and procedures shall include, but not be limited to, the following areas:

(A) Parental responsibilities;

(B) Staff training and responsibilities;

(C) Proper storage, maintenance, and disposal of test materials and supplies;

(D) Record keeping;

(E) Reporting test results, incidents, and emergencies to the child's parent and the child's physician, physician assistant, or advanced practice registered nurse; and

(F) A location where the tests occur that is respectful of the child's privacy and safety needs.

(2) Said policies and procedures shall be available for review by the Office during inspections or upon demand.

(b) Training

(1) Prior to the administration of finger stick blood glucose tests, such designated staff members shall have completed the following training requirements:

(A) A first aid course described in subsection (a) of section 19a-428-5 of the Regulations of Connecticut State Agencies, as verified by a valid first aid certificate on file at the youth camp; and

(B) Additional training given by a pharmacist, physician, physician assistant, advanced practice registered nurse, registered nurse, certified emergency medical technician, or the child's parent according to written guidelines provided by the child's physician, physician assistant, or advanced practice registered nurse. The additional training shall include, but not be limited to:

(i) The proper use, storage and maintenance of the child's individual monitoring equipment;

(ii) Reading and correctly interpreting test results; and

(iii) Appropriate actions to take when test results fail to fall within specified ranges indicated in the written order from the child's physician, physician assistant, or advanced practice registered nurse.

(2) The training shall be updated at least every three years when a child with diabetes mellitus who requires finger stick blood glucose testing is present at the youth camp.

(A) Documentation that such designated staff members have been trained to administer finger stick blood glucose tests shall be in writing and kept at the youth camp for a period of three (3) years for review by the Office. Such documentation shall indicate:

(i) The subjects covered in training;

(ii) The signature and title of the instructor;

(iii) The signature and title of the trainee; and

(iv) The date the training was given.

(c) Administration of Finger Stick Blood Glucose Test

(1) Except as provided in subdivision (3) of this subsection, only designated staff

members trained in accordance with subsection (b) of this section may administer the finger stick blood glucose test in youth camps. No staff member under eighteen years of age shall administer finger stick blood glucose tests to another person at a youth camp.

(2) Whenever a child diagnosed with diabetes mellitus has orders to receive finger stick blood glucose monitoring is enrolled and present at the youth camp, a designated staff member who has been trained to administer finger stick blood glucose tests shall be present at the youth camp.

(3) Upon the written authorization of the child's physician, physician assistant or advanced practice registered nurse, and the child's parent, a child may self-administer the finger stick blood glucose test under the direct supervision of a designated staff member who has met the training requirements in subsection (b) of this section.

(d) Equipment

(1) The child's parent shall supply the licensee with the necessary equipment and supplies to meet the child's individual needs. Such equipment and supplies shall include, but not be limited to, the following items:

(A) The child's blood glucose meter and strips;

(B) An appropriate retracting lancing device used in accordance with infection control procedures;

(C) Tissues or cotton balls; and

(D) Fast acting carbohydrates to be given to the child as indicated in the written order from the child's physician, physician assistant, or advanced practice registered nurse for hypoglycemia.

(2) Such equipment and supplies shall be labeled with the child's name and shall remain in a locked storage area when not in use.

(3) The licensee shall obtain a signed agreement from the child's parent that the parent agrees to check and maintain the child's equipment in accordance with manufacturer's instructions, restock supplies, and remove material to be discarded from the facility. All materials to be discarded shall be kept locked until it is given to the child's parent for disposal. The youth camp may dispose of medical waste if it has a contract with a medical waste disposal contractor, in accordance with local, state, and federal laws.

(e) Record Keeping

(1) The licensee shall keep the following records at the youth camp as part of the child's medical record, and shall update them annually or when there is any change in the information:

(A) A current, written order signed and dated by the child's physician, physician assistant, or advanced practice registered nurse indicating:

(i) The child's name;

(ii) The diagnosis of diabetes mellitus;

(iii) The type of blood glucose monitoring test required;

(iv) The test schedule;

(v) The target ranges for test results;

(vi) Specific actions to be taken and carbohydrates to be given when test results fall outside specified ranges;

(vii) Diet requirements and restrictions;

- (viii) Any requirements for monitoring the child's recreational activities; and
- (ix) Conditions requiring immediate notification of the child's parent, emergency contact, the child's physician, physician assistant, or advanced practice registered nurse.

(B) An authorization form signed by the child's parent which includes the following information:

- (i) The child's name;
- (ii) The parent's name;
- (iii) The parent's address;
- (iv) The parent's cell phone numbers and telephone numbers at home and at work;
- (v) Two adult, emergency contact people including names, addresses and telephone numbers;
- (vi) The names of the staff member(s) designated to administer finger stick blood glucose tests and provide care to the child during testing;
- (vii) Additional comments relative to the care of the child, as needed;
- (viii) The signature of the parent;
- (ix) The date the authorization is signed; and
- (x) The name, address and telephone number of the child's physician, physician assistant or advanced practice registered nurse.

(C) The youth camp director or the youth camp director's designee shall notify the child's parent in writing of the results of all blood glucose tests and any action taken based on the test results, and shall document the test results and any action taken in the child's medical record.

(Effective September 25, 2017)