

## [EXT] Public Comment re: NM PED Diabetes Proposed Rulemaking

Kasey Hanna <KHanna@risd.k12.nm.us>

Mon 10/14/2019 3:05 PM

To:FeedBack, Rule, PED <Rule.FeedBack@state.nm.us>;

To whom it may concern,

I am a registered nurse at the Roswell Independent School District. After reviewing the new diabetes training requirements, I have found some very overwhelming concerns. I am writing this email for the public comment regarding the NM PED Diabetes Proposed Ruling. First of all, a nurse must follow the nurse practice act when it comes to delegation. A nurse can delegate tasks based solely on the training/capabilities of the person being delegated. For example, a nurse can delegate medication administration to a medication aide who has been trained and certified by licensing agent. Every student with diabetes presents differently and their management plan is customized to their symptoms, medications, responses to medications, etc. Therefore, diabetes management and administering insulin takes a lot of nursing assessment, which assessments can NEVER be delegated. Secondly, insulin is a high alert medication, which by definition, is a medication that if administered incorrectly can lead to devastating outcomes, including death. In a hospital setting, a nurse that is administering insulin MUST verify the drug, dose, time, patient, and route to prevent giving the incorrect dose, preventing harm to patients. High alert medications were put in place to prevent devastating outcomes from happening.

The new bill would require nurses train and delegate insulin and glucagon administration. As mentioned above, this goes against the nurse practice act of NM and presents great risk to our diabetic students. The new law would also require 2 trained professionals to be at field trips, buses, and all extracurricular activities. These individuals could be trained in signs and symptoms of hypoglycemia and hyperglycemia and what to do, as they currently are in schools. However, the idea of having a non-licensed individual administer dangerous high alert medications does not correlate with safe patient care that nurses strive, delegated by the nurse practice act, and can have deadly results.

Thank you for taking time to review this comment and I have listed resources below backing my argument.

Consumer Med Safety <https://consumermedsafety.org/tools-and-resources/insulin-safety-center>  
Diabetes Management in the School Setting: <https://www.nasn.org/advocacy/professional-practice-documents/position-statements/ps-diabetes>

ISMP List of High-Alert Medications in Acute Care Settings:

<https://www.ismp.org/sites/default/files/attachments/2018-08/highAlert2018-Acute-Final.pdf>

New Mexico Nursing Practice Act: [https://www.ncsbn.org/New\\_Mexico\\_Nursing\\_Practice\\_Act.pdf](https://www.ncsbn.org/New_Mexico_Nursing_Practice_Act.pdf)

The Joint Commission High-Alert Medications and Patient Safety:  
[https://www.jointcommission.org/assets/1/18/sea\\_11.pdf](https://www.jointcommission.org/assets/1/18/sea_11.pdf)

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## [EXT] NM PED Diabetes Proposed Rulemaking,

Shelba Washichek <SWashichek@risd.k12.nm.us>

Wed 10/16/2019 6:20 PM

To:FeedBack, Rule, PED <Rule.FeedBack@state.nm.us>;

### To whom it may concern

I am a NM State School Nurse and I am so alarmed by the Diabetes Proposed Plan. Please reconsider this. I've talked to all my teachers whom I work with and they have all said they would refuse to be liable to provide any health care regarding giving insulin. Their exact statements have been "if I wanted to be a nurse then I would of went to college for that!" Please reconsidered this rulemaking.

Thank you!

Shelba Washichek, RN

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## [EXT] 6.12.11 NMAC, Student Diabetes Management

Holly Hagy <Holly.Hagy@magdalena.k12.nm.us>

Thu 10/17/2019 1:03 PM

To:FeedBack, Rule, PED <Rule.FeedBack@state.nm.us>;

What if no one volunteers?

We cannot compel someone to “attend all-school sponsored activities, trips, extended offsite school-sponsored excursions, extracurricular activities, and on buses where the bus driver has not been trained in diabetes care.”

As a small school with several students with diabetes in several grade levels, that would mean having a “Volunteer” for each of them if the students are engaged in several different outside activities. If the volunteer was not available to go to the outside activity would that dictate the student could not participate?

It is a responsibility to monitor and be properly trained in blood borne precautions. The volunteer would need to be responsible for knowing the students plan and what to do. My question is what if they miss read the amount to be given and give the student too much insulin? Who will be responsible for that? What if a child dies? Will the volunteer be responsible.

This bill puts a great deal of responsibility on the volunteer. And as the school nurse, according to my license, if I delegate something to another person and something goes wrong, I am the person responsible and my license is at stake. Who is going to protect my livelihood if something goes wrong?

I do not think it is the responsibility of a volunteer to monitor someone’s health. It should be the responsibility of the Primary Care Physician, the Diabetes Educator, the family and the person with diabetes to be responsible for their healthcare. The student needs to learn to be responsible as it is a lifelong commitment to their own health to become educated and proactive.

As a school, our teachers and staff are aware of the students who use insulin. We have also educated the staff on signs and symptoms of hypo and hyper glycemia with emphasis on hypoglycemia since this is the more short term concern with possibility of coma and death from a blood sugar that is too low.

We are all committed to our students and their wellbeing but to mandate volunteers is not appropriate.

Thank you,  
Holly

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