



**DEPARTMENT OF THE ARMY**  
ASSISTANT CHIEF OF STAFF FOR INSTALLATION MANAGEMENT  
600 ARMY PENTAGON  
WASHINGTON, DC 20310-0600

DAIM-ZA

JUN 12 2017

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: Accommodation of Children and Youth with Diabetes in Army Child, Youth, and School Services Programs

1. References:

- a. Section 504 of the Rehabilitation Act of 1973, 29 U.S.C. § 794.
- b. Army Regulation (AR) 608-10, (Child Development Services), 11 May 2017.
- c. Army Directive 2015-44, Updated Policy for Army, Child, Youth, and School Services Programs, 14 December 2015.
- d. AR 608-75, (Exceptional Family Member Program), 27 January 2017.
- e. AR 600-7, (Nondiscrimination on the Basis of Handicap in Programs and Activities Assisted or Conducted by the Department of Army), 15 November 1983.

2. Purpose. This memorandum sets forth the procedures for requesting and processing diabetes-specific accommodations in Child, Youth, and School (CYS) Services programs and details the roles and responsibilities of the individuals and organizations involved in the accommodation process.

3. Policy. CYS Services promotes the participation and inclusion of children and youth with diabetes in CYS Services programs and activities. CYS Services will not, solely by reason of a diagnosis of diabetes, exclude children/youth from participation in, deny children/youth the benefits of, or subject children/youth to discrimination under any CYS Services program or activity. CYS Services provides reasonable accommodations to afford access to its programs and activities to children/youth with diabetes. Accordingly, only the Assistant Chief of Staff for Installation Management (ACSIM) may deny requests for accommodation. Some accommodations present a higher risk to the safety of the participants within the CYS Services program and may require additional resourcing. Pursuant to the 11 May 2017 revision of AR 608-10, paragraph 4-32, requests for accommodations that require CYS Services personnel and Family Child Care providers to determine the correct insulin dosage or to administer insulin must be approved by the ACSIM in consultation with the Office of The Surgeon General, prior to implementation.

DAIM-ZA

SUBJECT: Accommodation of Children and Youth with Diabetes in Army Child, Youth, and School Services Programs

a. Reasonable accommodations are those that do not impose an undue hardship on the Army's CYS Services program, fundamentally alter the program in which the accommodations would be made, or pose a direct threat to the health and safety of the participants in that program. Requests for accommodations will be assessed on an individual basis.

b. Reasonable accommodations may include, but are not limited to: monitoring child/youth with diabetes for symptoms of hyperglycemia and hypoglycemia; monitoring a child/youth's activity levels and/or food intake; counting carbohydrates when each meal component is labeled as to the number of carbohydrates in each serving; monitoring or assisting in monitoring blood glucose levels, including through the use of a continuous glucose monitor; checking or assisting in checking ketones; administering or assisting in the administration of rescue medication, including glucose tablets, glucose gels and glucagon; administering or assisting in the administration of insulin; storage of insulin and rescue medication and/or diabetes-related supplies; and authorization to carry insulin, rescue medication and/or diabetes-related supplies on a child/youth's person.

4. The process and procedures for requesting and approving diabetes-related accommodations are as follows:

a. Each request for accommodation will be assessed on an individual basis. No child/youth with diabetes will be required, as a condition of enrollment, to attend a program or accept a placement different from the programs or placements available to children/youth without diabetes. Parent(s)/legal guardian(s) have the right to refuse diabetes-related care offered. When care is refused, CYS Services personnel must document the refusal in the Child and Youth Management System, [militarychildcare.com](http://militarychildcare.com), and/or the child's file.

b. Requests for accommodations for a child/youth with diabetes shall originate with the parent(s)/legal guardian(s).

c. When parents(s)/legal guardian(s) request diabetes-related accommodations, the installation CYS Services program will immediately provide the parent(s)/legal guardian(s) with written materials explaining the process for requesting diabetes-related accommodations and copies of the CYS Services Diabetes Daily Medical Action Plan (MAP) (Encl 1) and CYS Services Diabetes Emergency MAP (Encl 2) to be completed by the child/youth's health care providers.

d. Parent(s)/legal guardian(s) requesting accommodations must provide the following information to the Multidisciplinary Inclusion Action Team (MIAT):

DAIM-ZA

SUBJECT: Accommodation of Children and Youth with Diabetes in Army Child, Youth, and School Services Programs

(1) Completed CYS Services Diabetes Daily MAP

(2) Completed CYS Services Diabetes Emergency MAP

(3) Provide any additional medical information from the child/youth's health care provider relevant to the request for accommodations. These forms must be completed by the child/youth's health care provider and include detailed written instructions indicating the child/youth's diabetes-related needs, to include both daily and emergency care while participating in the CYS Services program. These forms must be returned as soon as possible to CYS Services to initiate a MIAT meeting. The instructions must also address when and how CYS Services personnel will personally conduct or supervise the child/youth in each aspect of diabetes management.

e. A MIAT must be convened as soon as possible, but not later than 30 calendar days after the receipt of all requested medical documentation. The MIAT will assess the completed MAPs, supporting documents, and requested accommodations for a child/youth prior to the child/youth beginning or continuing to participate in CYS Services programs.

(1) The members of the MIAT will include: the Army Public Health Nurse (APHN), parent(s)/legal guardian(s), CYS Services Program Managers, CYS Services personnel who will be working with or have objectively observed the child/youth in a program setting, the CYS Services Coordinator, and the Exceptional Family Member Program Manager. Parent(s)/legal guardian(s) may bring the child's health care provider(s) or other representatives to MIAT assessment meetings. When appropriate, the installation should request legal support from the Installation Office of the Staff Judge Advocate (OSJA) (e.g., in requests that may require assessment of whether the accommodation requested is reasonable).

(2) All members of the MIAT must participate in the assessment of the request for accommodation and the preparation of a recommended Accommodation Plan in accordance with (IAW) paragraph 6. As part of their assessment, the MIAT will review the CYS Services Diabetes Daily MAP, the CYS Services Diabetes Emergency MAP, and additional information provided by the parent(s)/legal guardian(s). The MIAT will identify what is required of the parent(s)/legal guardian(s), the child/youth, and the CYS Services program to enable the child/youth to safely participate in the program. The MIAT will provide meeting minutes, accommodation plan, and recommendations to the CYS Services Coordinator within two working days of the meeting.

f. As soon as possible, but not later than four working days after the MIAT meeting, the CYS Services Coordinator shall inform the parent(s)/legal guardian(s) in writing of

DAIM-ZA

SUBJECT: Accommodation of Children and Youth with Diabetes in Army Child, Youth, and School Services Programs

either the approval of all requested accommodations or of the need for further review by the installation OSJA and Garrison Commander/Manager of the accommodations that s/he does not have the authority to approve. At the same time, parent(s)/legal guardian(s) will be advised of their option to submit additional information to the Garrison Commander/Manager. Parent(s)/legal guardian(s) must submit any additional information as soon as possible, but not later than three working days after receipt of the CYS Services Coordinator's notice.

(1) If all accommodations can be met, the CYS Coordinator must ensure that the program prepares for the child/youth's participation by completing all requirements in paragraph 7 of this memorandum. Once an accommodation is approved, CYS Services should immediately begin efforts to accommodate the child/youth. The child/youth must be permitted to begin participation as soon as possible, but not later than 30 calendar days after the approval date.

(2) When the CYS Services Coordinator determines that s/he may only approve some of the requested accommodations at the installation level, an Interim Accommodation Plan addressing the approved accommodations should be initiated. Parent(s)/legal guardian(s) must be provided the option of enrolling the child/youth while the remaining accommodations are reviewed. Any child/youth already participating in a CYS Services program when diagnosed with diabetes should remain enrolled under an Interim Accommodation Plan.

g. The installation OSJA must provide a legal review of all requested accommodations requiring the ACSIM approval. As soon as possible, but not later than five working days of receipt of relevant documentation, the installation OSJA will review the MIAT and CYS Coordinator's recommendations on accommodations and advise the Garrison Commander/Manager on whether or not a higher level review is required.

h. As soon as possible, but not later than five working days of receipt of the legal review and all MIAT documentation, the Garrison Commander will submit the request for accommodation to the ACSIM IAW procedures outlined in paragraph 5 below.

5. Processing Requests Requiring the ACSIM Approval. The Garrison Commander will make recommendations through the Installation Directorate and Commander, Installation Management Command (IMCOM) to the ACSIM for all requests for accommodations not within the approval authority of the CYS Services Coordinator.

a. The recommendation and its enclosures must include the following information:

DAIM-ZA

SUBJECT: Accommodation of Children and Youth with Diabetes in Army Child, Youth, and School Services Programs

(1) The name of the installation, name of the child/youth, sex, date of birth, program child/youth will be attending and program type.

(2) An assessment of whether the requested accommodation would impose an undue hardship on the Army CYS Services program, fundamentally alter the program in which the child/youth with diabetes would participate, or pose a direct threat to the health and safety of the participants in that program. This assessment must include a detailed analysis of any installation resource, training, personnel, and funding gaps.

(3) A written legal review.

(4) The MIAT's Accommodation Plan prepared IAW paragraph 6

(5) Any additional materials submitted by the parent(s)/legal guardian (s)

b. The Commander, IMCOM, will ensure all requests for accommodations, including those requiring an ACSIM determination, are processed as soon as possible, but not later than five working days after receipt of the legal review, and will forward the request to the Office of the Assistant Chief of Staff for Installation Management (OACSIM) points of contact (POCs) listed in this memorandum.

6. Accommodation Plan Requirements. The MIAT's recommended Accommodation Plan must include the following information:

a. The names, positions, and special qualifications if any of the CYS Services personnel who will be performing and/or supervising the requested health practices.

b. A plan, coordinated with the APHN and CYS Services nurse, for providing initial and sustainment training to CYS Services personnel performing the requested functions or health practices, including the name, position, and credentials of the person and/or organization that will coordinate and provide the training, as well as the frequency of sustainment training (e.g., quarterly, semiannually). Additional training resources include, but are not limited to:

(1) The child/youth's certified diabetes educator

(2) American Diabetes Association: <http://www.diabetes.org/living-with-diabetes/parents-and-kids/diabetes-care-at-school/school-staff-trainings/diabetes-care-tasks.html>

(3) Training and resources provided by the state where the installation is located

DAIM-ZA

SUBJECT: Accommodation of Children and Youth with Diabetes in Army Child, Youth, and School Services Programs

c. The frequency, timing, and conditions under which the CYS Services personnel will be performing the requested health practices (e.g., before or after meals, location, concurrent responsibilities, presence of other children/youth, proximity to child/youth's nap time, availability of assistance and verification, means of documenting completion of health practices).

d. The plan for insulin dosage determination and administration of insulin. If pre-meal insulin dosing is prescribed, the plan for ensuring the child/youth consumes the number of carbohydrates used to determine the dosage of insulin and; if post-meal insulin dosing is prescribed, the plan to accurately track the amount of carbohydrates consumed to correctly determine the dosage of insulin.

e. An assessment of the child/youth's ability to recognize and communicate symptoms of diabetes-related conditions (e.g., hypoglycemia, hyperglycemia, diabetic ketoacidosis).

f. A copy of the CYS Services Health Assessment, Health Screening Tool, CYS Services Diabetes Daily and Emergency MAPs, Special Diet Statements, and any other medical documentation relevant to the accommodation request.

g. A Consent to Perform Caregiving Health Practices and Authorization for Disclosure of Health Information (Encl 5) from the parent(s)/guardian(s) of the child/youth for CYS Services personnel to provide care in the manner outlined in the Accommodation Plan.

7. Prior to implementing any accommodation plan for a child/youth with diabetes, the CYS Services Coordinator will ensure the following measures are in place.

a. Required Training. All CYS Services personnel supporting a child/youth with diabetes must be trained by a qualified professional on the specific procedures in the child's care plan, as well as on each of the following areas, if relevant to the child/youth's care:

- (1) Recognizing the signs/symptoms of hypoglycemia and hyperglycemia
- (2) Performing/supervising blood glucose testing
- (3) Actions to take when the results of the blood glucose tests are abnormally high or low
- (4) Conducting/supervising blood and/or urine ketone testing

DAIM-ZA

SUBJECT: Accommodation of Children and Youth with Diabetes in Army Child, Youth, and School Services Programs

- (5) Tracking and documenting of carbohydrates consumed
- (6) Actions to take if the insulin pump becomes dislodged
- (7) When to contact parent(s)/legal guardian(s) and/or health care personnel
- (8) The administration of glucagon, glucose tablets, and/or glucose gel in the case of hypoglycemia

b. Parent(s)/legal guardian(s) and the child's/youth's medical providers may be invited to participate in the above required training.

c. A sufficient number of trained CYS Services personnel must be present to cover the hours of attendance for each specific child/youth with diabetes.

d. Medical Waste Disposal. Programs attended by children with diabetes will maintain and dispose of regulated medical waste (sharps) IAW state and local laws, regulations, and policies.

e. Medication Storage. The parent(s)/guardian(s) are responsible for providing all required diabetes supplies, equipment, sharps container, and medication and ensuring that it is in usable/serviceable condition. Programs attended by children/youth with diabetes will provide secure storage that provides immediate accessibility of diabetic materials, equipment, supplies, medications (glucagon, glucose tablets, glucose gels and insulin as prescribed) and food to trained CYS Services personnel members. If an insulin pump is to be disconnected during activities, it must be stored in a secure location.

#### 8. Approval Authorities.

a. Only the ACSIM may disapprove a request for accommodation of a child/youth with diabetes. For a requested accommodation that cannot be approved by the CYS Service Coordinator, the ACSIM shall make a determination as soon as possible, but not later than 15 working days after receipt of the Garrison Commander's recommendation and associated documents from IMCOM.

b. The ACSIM approval is required before implementation of any accommodation that requires CYS Services personnel to determine the correct insulin dosage or to administer insulin, including making an adjustment to an insulin pump. The MIAT must provide a detailed plan to mitigate the medical risk for each recommended accommodation.

DAIM-ZA

SUBJECT: Accommodation of Children and Youth with Diabetes in Army Child, Youth, and School Services Programs

c. The CYS Services Coordinator may approve Accommodation Plans which include the following accommodations:

(1) Insulin. An Accommodation Plan which provides that insulin will be administered in one of the following manners:

(a) The parent(s)/guardian(s) (or appointed back-up(s)) will administer insulin for the child/youth, or

(b) The youth has approval from parent(s)/legal guardian(s) and the child/youth's health care provider to self-administer insulin. CYS Services personnel may store insulin and the medical equipment used to administer the insulin

(c) Administration of insulin will be recorded and tracked using the Blood Glucose and Ketone Monitoring Log at (Encl 4)

(2) Carbohydrate Tracking. An Accommodation Plan which provides that CYS Services personnel will tally the amount of carbohydrates consumed, provided that the following:

(a) The parent(s)/legal guardian(s) provide premeasured meals/snacks that are accurately labeled with the number of carbohydrates contained in each meal component, or

(b) The meals/snacks provided by CYS Services are prepared using standardized menus that include the number of carbohydrates in each meal component/serving

(c) Immediately after each meal/snack, CYS Services personnel will document the amount of food eaten on the CYS Services Weekly Food and Carbohydrate Log (Encl 3), to assist the designated person administering insulin with the insulin dosage calculation

(3) Blood Glucose and Ketone Monitoring. An Accommodation Plan which provides that CYS Services personnel will provide blood glucose or ketone monitoring, provided it will be performed by a trained individual IAW a prescribed schedule and/or in response to symptoms identified on the CYS Services Diabetes Daily MAP and CYS Services Diabetes Emergency MAP. Blood glucose or ketone monitoring will be documented on the Blood Glucose and Ketone Monitoring Log (Encl 4). Requests for urine ketone checks should be assessed by the MIAT to ensure the method for urine collection and disposal is aligned with other prescribed CYS Services regulations and policies.



DAIM-ZA

SUBJECT: Accommodation of Children and Youth with Diabetes in Army Child, Youth, and School Services Programs

(4) Prescribed Diabetes Rescue Medication. An Accommodation Plan which provides that CYS Services personnel will store and/or administer prescribed diabetes rescue medication (e.g., glucagon) for the treatment of hypoglycemia as specified in the CYS Services Diabetes Emergency MAP.

9. The final determination on requests for accommodations is made on a case-by-case basis and is entirely fact-dependent. For this reason, accommodations made for a child/youth at one installation cannot be transferred to another installation. The Parent Central Services will assist service members and Department of Defense Families who are relocating in obtaining access to CYS Services programs and in submitting an updated accommodation request to the receiving installation's MIAT.

10. Forms. The enclosed forms must be used in all requests for diabetes-specific accommodations until the approved Department of the Army Forms are published.

11. The information in this memorandum is effective immediately.

12. The OACSIM POCs are Ms. Helen Roadarmel, Army Child, Youth & Schools Program Manager, [helen.a.roadarmel.civ@mail.mil](mailto:helen.a.roadarmel.civ@mail.mil), 571-256-8658 and Ms. Donna Garfield, Program Analyst, [donna.k.garfield.civ@mail.mil](mailto:donna.k.garfield.civ@mail.mil), 571-256-8683.

6 Encls

1. CYS Services Diabetes Daily MAP
2. CYS Services Diabetes Emergency MAP
3. Weekly Food and Carbohydrate Log
4. Blood Glucose and Ketone Monitoring Log
5. Authorization for Caregiving Health Practices
6. Request for Accommodation Timeline



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SUBJECT: Accommodation of Children and Youth with Diabetes in Army Child, Youth, and School Services Programs

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