

DIABETES

SCHOOL SPECIFIC POLICY

Rationale:

A considerable number of students in schools are diabetics. In general, the appropriate preparations and safeguards should ensure that students with diabetes are able to participate fully in the school's educational programs.

Aims:

To ensure that schools support students with diabetes and ensure plans are in place and communicated to all staff. This will enable students with diabetes to participate safely in all aspects of the school program with reasonable adjustments provided to ensure this occurs.

Implementation:

- All staff complete basic level training so they have an awareness of what type 1 diabetes is and how to respond safely to an emergency.
- That Responsible Staff undertake appropriate training to develop confidence and competence to implement a student's Diabetes Management Plan and Diabetes Action Plan.
- Upon enrolment or when a health care need is identified, students diagnosed with diabetes, school will work in conjunction with parents/carers and treating medical teams to develop a clear and tailored health management plan to support the student's individual health care needs.
- The school will have a current individual Diabetes Management Plan prepared by the student's medical team (provided by the parents/carers).
- The school will have a current Diabetes Action Plan prepared by the student's treating medical team (provided by the parents/carers)
- A Student Health Support Plan, developed by the school in consultation with the parents/carers and where appropriate the student's treating medical team.
- The principal will make reasonable adjustments for students with diabetes and take reasonable steps to prevent reasonably foreseeable risks of injury.
- The students' confidential details will be retained in the First Aid room. The student's medical alert will be on Xuno which is accessible by all staff. All staff will be informed of these students diagnosis and all staff working with students with diabetes will be provided with access to the above mentioned plans.
- Open communication between the school and parents/carers and students in order to identify risks and plan for management of activities such as physical activity, sports days and swimming programs and special activities that will involve food.
- Food based rewards should be restricted.
- Students whose parents indicate that they are capable of managing their own diabetes will be encouraged to do so, and will be provided with an appropriate private space to manage their diabetes. To be deemed capable of managing their own diabetes, students will have to demonstrate that they have the ability to measure an insulin dose accurately, inject an insulin dose reliably, carry out blood glucose tests accurately, recognise the early signs of hypoglycaemic or hyperglycaemic reactions and to take sugar as necessary, estimate their diet in portions if necessary, understand the need to take extra food before increased physical activity, and have meals and snacks on time consistent with their diabetes management plan.
- Students not capable of managing their own diabetes will be managed by staff in accordance with an agreed management plan developed by a doctor, and provided by parents.

- A student's diabetes management kit or 'Hypo Box' (which may include adequate supplies of insulin, disposable syringes or pen injector devices, blood testing equipment, and glucose or suitable sugar products to prevent or treat an insulin reaction) may be kept in the first aid room, or with the child as appropriate. Two kits are preferable, one for each location. One kit will always accompany the child on any camp or school excursion.
- It may be desirable that a student's friends be aware of the student's diabetes to give moral support if needed, to save embarrassment at blood testing and insulin giving times, and to give appropriate help if needed should the student have an insulin reaction.
- The school will make reasonable adjustments to ensure the student can undertake all educational activities including school camps and excursions, so long as emergency medical aid is available within two hours. Some free time before breakfast and before the evening meal during camps may be needed for blood testing and insulin injections, and before bed for urine testing. Special considerations need to be undertaken during swimming programs.
- All school meal times should be adhered to as closely as possible. If a meal is delayed, the student should have access to food containing some complex carbohydrate (for example, fruit, biscuits, fruit juice) at the normal meal time while waiting for the meal. A diabetic student should be permitted to take extra food at odd times before extra physical activities to prevent insulin or hypoglycaemic reactions. The student or teacher must take some extra carbohydrate form of food or confectionery on excursions.

Evaluation:

This policy will be reviewed as part of the school's review cycle.

This policy was last ratified by School Council in...

June, 2020