

Diabetes Policy

Sacred Heart College is committed to providing a safe, healthy and supportive environment for all students. For students with diabetes, additional care must be taken to ensure the safety and support of these students. It is essential that diabetes is managed as well as possible. This reduces the risk of emergency situations and long-term complications.

Diabetes is a chronic (long term) condition, in which a high levels of glucose (sugar) is present in the bloodstream. A hormone called insulin allows glucose to move from the blood to the body's cells, which then use the for energy. Insulin is made in the pancreas and diabetes occurs when there is either not enough insulin, or the body doesn't respond correctly to insulin. There are two main types of diabetes:

Type 1 diabetes: the most common type of diabetes affecting children and teenagers in Australia. Type 1 diabetes is caused by the body not having enough insulin. Without insulin, glucose levels will build up in the blood. Type 1 diabetes is treated by replacing the insulin and managing blood glucose levels.

Type 2 diabetes: rarely occurs during childhood and adolescence. Type 2 diabetes is caused by the body being resistant to insulin. Type 2 diabetes is treated with diet, weight loss and oral medications in the majority of cases.

Definitions

BG – Blood Glucose

BGLs - Blood Glucose Levels

Target range – BGL between 4.0mmolL and 8.0mmol/L

Glucometer is a medical device used to determine the approximate concentration of glucose in the blood via finger prick. It can measure glucose and ketones.

Hypoglycaemia (Hypo) or blood glucose levels below 4.0mmol/L. Hypoglycaemia can be caused by too much insulin; delaying a meal; not enough food; or unplanned or unusual exercise. Symptoms can include weakness, trembling or shaking, sweating, irrational behaviour, light headedness, lack of concentration, irritability, crying, dizziness or becoming unconscious. Student's management plans should be followed for a hypoglycaemic episode.

Hyperglycaemia (Hyper) or blood glucose levels above 15 mmol/L. Hyperglycaemia can be caused by insufficient insulin; too much food; common illness; and/or stress. Symptoms can include excessive thirst, tiredness, blurred vision, frequent urination and lack of concentration. Blood ketones should be checked, please follow the student's individual management plan for direction for ketone testing and hyperglycaemic episodes.

Ketoacidosis is a potentially life-threatening condition that can occur during illness or as a result of insufficient insulin which results in very high blood glucose levels and the build-up of ketones. Ketones are a potentially toxic as they are a by-product of the breakdown of fat. Symptoms can include nausea, vomiting and/or abdominal pain, deep rapid breathing or breathlessness, extreme drowsiness and a 'fruity' odour to the breath.

Glucagon is a hormone that is involved in controlling blood glucose levels produced by the pancreas. Manufactured glucagon may be injected to help raise blood glucose levels in a person with severe hypoglycaemia who is unable to eat due to a low level of consciousness. This can only be administered by trained staff.

Insulin Pen – Pen like devices used to inject insulin under the skin. These have largely replaced the need for syringes.

Insulin Pump – a small battery-operated electronic device that holds a reservoir of insulin. It is about the size of a mobile phone and is worn 24 hours a day. The pump is programmed to deliver insulin into the body through thin plastic tubing and is worn outside the body.

CGM – Continuous Glucose Monitor, a device worn by the young person which continually monitors their glucose levels and can give alerts if levels are outside the target range.

Management Plan – A plan written by the diabetes team and the young person's family/carer to provide diabetes management information and guidance specific to the young person.

Responsible staff voluntarily agree to undertake training and provide treatment and support to students with type 1 diabetes as outlined in the Diabetes Management Plan, Diabetes Action Plan and student Health Support Plan.

Policy Statement

To provide, as far as practicable, a safe and supportive environment in which students with diabetes can participate equally in all aspects of the student's schooling.

This policy aims to be both educational and preventive in nature so that staff, students and parents/carers take proactive steps to ensure their awareness and understanding of diabetes.

Responsibilities

Responsibilities of College

• Ensure compliance with legislative requirements.

Communication

- Ensure staff and parents are familiar with the College's Diabetes Policy.
- Arrange a meeting with Parent/Carer to discuss student's management and treatment for diabetes prior to commencement at the College.
- Inform staff of students with diabetes through the students SIMON profile and through the twice-yearly medical briefings.
- Contact the parent/carer if there are any concerns regarding diabetic management at school.
- Contact the parent/carer when the student is unwell.
- Raise awareness of diabetes in the wider College Community.
- Liaise with the students Diabetic Educator if the need arose.
- Encourage student's independence and communication with staff as needed.

- Provide a private diabetic station preferably in the student's Homeroom area for insulin injection and general diabetic management.
- The College supports the wearing of medical alert jewellery on school grounds or during school activities.
- Ensure that equipment and consumables, including the medication and hypo kits that
 are supplied and kept in First Aid or at student's diabetic stations are in date and
 updated as required.
- Ensure extra supplies of sweet drinks, Glucodin tablets, muesli bars, glucometer, glucose and ketone strips are available at students own diabetic stations and/or First Aid
- Ensure student Glucagon and extra insulin are kept in the Health Centre fridge.
- Supervise and/or assist students with BGL less than 4 mmol/l.
- Adhere to the student's individual Diabetes Action Plan and Management Plan.

In the Classroom

- Consider the needs of the student with diabetes when planning class food, excursions, camps, exams and sporting activities.
- Recognise the signs and symptoms of hypoglycaemia and act promptly.
- Support the student to access:
 - Extra toilet privileges,
 - Drinking water
 - o Additional foods as appropriate especially when involved in Physical activity.
 - Blood glucose testing equipment
 - Hypo kit
 - Privacy as needed
- Give extra consideration if unwell. Supervise and do not leave unattended including when sending student to First Aid.
- Report concerns with the student's health or diabetes to the parent/carer and School Nurse.

On Camps and Excursions

- Consulting with parents when the student is participating in excursions, camps and other activities
- Careful planning including a risk assessment, making considerations for a diabetic diet, meal and snacks times, BGL monitoring, toilet access, physical activity, illness etc
- Ensure Camp Management Plans and Action Plans are accessible for the staff members attending the camp.
- Ensure Camp Management Plans and Action Plans are adhered too.
- Supervision of the 2am testing is performed by two College staff members.
- Ensure Diabetic "Hypo Kits" are packed on all excursions and/or camps where a diabetic student is attending.

Exams

- Allow reasonable adjustments during exams, assessment tasks and tests, these could include
 - o Additional times for rest and to check their BGL before, during and after an exam, and or take any medication.
 - Consumption of food and water to prevent and/or treat a hypoglycaemic episode.
 - Easy access to toilets as high BGL causes the need to urinate more frequently.

o Permission to leave the room under supervision.

Staff training

- Provide professional learning opportunities to develop staff skills in management of diabetic health issues for responsible staff.
- Ensure adequate staff have a current First Aid qualification and follow first aid procedures for diabetes management.

Responsibilities of the students

- To carry a glucometer and a hypoglycaemic kit at all times.
- To advise staff/First Aid staff of any diabetic symptoms or if unwell.
- If appropriate and able, independently manage their diabetes. This includes administering insulin by injection and/or pump and calculating insulin doses. Checking their BGL regularly before all meals and before bed and overnight on camps.
- Manage glucometers and CGM and all recordings.
- Recognise and treat 'Hypo' and 'Hyper' conditions, checking for ketones if BGL greater than 15 mmol/L.
- Store and dispose of sharps safely.
- Be able to demonstrate a clear understanding of their condition and dietary requirements.
- Inform Health Centre and/or staff/parents for replenishment of all supplies including medication, glucose tablets, carbohydrate of choice, equipment (spares and supplies for Glucometers lin pens, pump line change equipment, batteries, Glucagon injection etc.)
- Be responsible for choosing a healthy diet and counting carbohydrates for administration of insulin.
- Ask for assistance as needed.

Responsibilities of Parents/Carers

- To inform the School upon enrolment, or if the student is enrolled, as soon as possible after diagnosis, that their child has diabetes.
- To consult with the Health Centre Coordinator regarding Diabetes Management and Action Plans.
- Ensure Diabetes Management and Action Plans are reviewed annually or when changes in diabetes management occurs.
- Ensure specific Management Plans for overnight camps and excursions are prepared by the student's treating medical team. Failure to have an overnight management plan will result in non-attendance.
- To provide a current and up-to-date Operoo profile for their child, reflecting a diabetes diagnosis and the relevant diabetic plans.
- To consult with the School staff in the development of additional plans for off campus activities such as camps and excursions.
- To advise the Health Centre Coordinator of the student's need to test BGL and administer insulin in accordance with the student's ability to manage their health needs.
- To provide a written request for responsible school staff to administer a prescribed medication including insulin (if required) or blood glucose testing. Medication dosages should be reflective on the Management plan
- To provide equipment and consumables, including medication and spares to the Health Centre and ensure it is in date.
- To replace medication, equipment and consumables as it expires or has been used.

- To provide medical identification jewellery where appropriate.
- To ensure their child has a fully stocked Hypo Kit with them at all times.
- To keep their child home if unwell.
- To ensure that they or nominated emergency contacts are accessible to provide advice regarding management or pick up if their child if unwell

Review History:

Version	Date	Next	Author	Approved
	Released	Review		
1.0	May 2020	May 2022	Health Centre Coordinator	Principal
2.0	May 2022	May 2024	Health Centre Coordinator	Principal