



Francis Jordan Catholic School

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DIABETES MANAGEMENT POLICY

Background

Diabetes exists when blood glucose builds up to high levels. It is not contagious. There are two main types of diabetes:

- **Type 1 diabetes** usually occurs in childhood or early adulthood however it can occur at any age. It is due to a severe deficiency of insulin and is fatal without lifelong insulin injections. Insulin allows a return to good health
- **Type 2 diabetes** occurs in adults (usually over 40 years) however it is now being seen in adolescents. It may be accelerated by lifestyle factors (obesity, lack of regular exercise, overeating) and is treated by diet, exercise, tablets and occasionally insulin injections

Purpose

The school has a responsibility to provide:

- A safe environment
- Adequate supervision

Additional care must be taken with students who have diabetes. Staff must have sufficient knowledge about diabetes to ensure the safety of those students (especially in regard to hypoglycaemia and safety in sport).

Diabetes Action Plan

A Diabetes Action Plan should be developed with the school in consultation with the parents/guardians and medical practitioner. The Diabetes Action Plan is to be signed by the parents/guardians and medical practitioner. This should be displayed in the classroom and first aid room. A copy is to be placed in the class medical file, duty files, canteen medical file, sports file, music tutor files and all specialist area medical files. The Diabetes Action Plan will be reviewed in consultation with the student's parents/guardians:

- Annually or as applicable
- If the student's condition changes
- Immediately after a severe emergency situation

Testing kit and identification

It is the responsibility of parents/guardians to:

- Provide adequate supplies of extra food/drink, 'Hypo' requirements, testing kit and Insulin (if required)
- Provide a CGM monitor for reading BGL readings (if required)
- Attach a yellow cross badge to the student's collars and hats (to be supplied by the school at a cost to the parent)

Communication

The Principal will be responsible for the provision of information to all staff, students and parents/guardians about diabetes and development of the school's diabetes management strategies.

Casual relief staff will be informed on arrival at the school if they are caring for a student with diabetes and their role in responding to the student.

Staff Training and Emergency Response

Teachers and other school staff, who have contact with the student with diabetes, are required to undertake formal and/or informal training in diabetes management and how to respond in an emergency.

At other times while the student is under the care or supervision of the school, including excursions, playground duty, camps and special event days, the principal must ensure that there is sufficient number of staff present who have training and know how to recognise and treat diabetes. Training will be provided to these staff as soon as practicable after the student enrolls or is diagnosed. Wherever possible, training will take place before the student's first day at school. Where this is not possible, an interim plan will be developed in consultation with the student's parents/guardians.

The school's Emergency Response Plan and the student's Diabetes Action Plan will be followed when responding to a diabetes 'hypo' or 'hyper'.

Emergency Response Plan

'Yellow Diabetes Alert' cards will be kept in all duty files, sports file, specialist area files, canteen medical file and classrooms. In the event of a diabetic emergency.

1. Stay with student
2. Follow Diabetes Action Plan
3. A 'Yellow Diabetes Alert' card is to be sent to office with 2 students (years 1 – 6) and 2 staff will bring the hands-free phone and fast acting carbohydrate (if applicable).
4. A staff member will contact administration (PK, Kindy, PP) to bring hands-free phone in the event an ambulance is required
5. Administration and Principal must be advised if an ambulance is called

6. Administration to contact parents

Staff members involved in an emergency response are to receive debriefing as soon as possible.

Risk Minimisation

Setting	Considerations
Classroom	<ul style="list-style-type: none"> • A copy of the student's Diabetes Action Plan to be displayed in the classroom and a copy to be placed in the classroom medical file. • A copy of the student's Diabetes Action Plan to be placed in the specialist area medical files and sports medical file. • Yellow Diabetes Alert card to be kept in specialist area medical files and sports medical file. • Casual/relief teachers should be made aware of the student's Diabetes Action Plan by the partner teacher and relief procedure guidelines. • A diabetes kit containing testing device, extra food/drink, 'Hypo' requirements and CGM monitor (if applicable) to be stored in classroom and carried with student whenever leaving the classroom. • Insulin (if required) to be stored in the classroom storeroom out of the reach of children. • Additional toilet breaks are required. • BGL is to be recorded a minimum of twice per day.
Canteen	<ul style="list-style-type: none"> • A copy of the student's Diabetes Action Plan to be placed in the canteen medical file. • Liaise with parents/guardians about food for the student.
Playground	<ul style="list-style-type: none"> • A copy of the student's Diabetes Action Plan to be placed in duty files. • Yellow Diabetes Alert cards to be kept in all duty files. • Staff trained in diabetes management should be available during non-class times (e.g. recess and lunch).
Off-site school settings - excursions	<ul style="list-style-type: none"> • A copy of the student's Diabetes Action Plan to be taken. • Student's diabetes kit to be taken • Insulin to be taken (if required) • One or more staff members who have been trained in diabetes management to accompany the student. All staff present during the excursion need to be aware if there is a student with diabetes. • Staff should develop an emergency procedure that sets out clear roles and responsibilities in the event of a diabetic emergency. • Mobile phone to be taken. • Parents/guardians may wish to accompany their child on excursions. This should be discussed with parents/guardians as another strategy for supporting the student.

Off-site school settings - camps	<ul style="list-style-type: none">• A copy of the student's Diabetes Action Plan to be taken.• Students diabetes kit to be taken• One or more staff members who have been trained in diabetes management to accompany the student. All staff present during the excursion need to be aware if there is a student with diabetes.• Staff should develop an emergency procedure that sets out clear roles and responsibilities in the event of a diabetic emergency.• Mobile phone to be taken.• Water sports need very careful planning and supervision as a hypo increases the risk of drowning• Any sport (e.g.abseiling) in which a 'hypo' may cause risk to either the student or someone called upon to help, should be modified or only considered after careful planning. It should always occur under strict supervision.• Be aware of what local emergency services are in the area and how to access them.• Advise parents/guardians of the distance to emergency services.• Be aware of mobile network availability.
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Reviewed: 2017

Reviewed: 2019

Due for review: 2021