

# **Diabetes Guidelines**

These guidelines have been written with advice from Diabetes care UK.

Whilst the individual needs of each student with diabetes drive our approach, there are several common themes in the management of diabetes within school which may be of interest to parents. Diabetes in itself should never cause limitations to a student's participation in any school activity. This policy refers to Type 1 diabetes only, as Type 2 poses very few problems for the student during school.

## **Record keeping**

At the beginning of each school year or when a child joins the school, parents/carers are asked if their child has any medical conditions on their enrolment form. As soon as the school medical room is made aware of a new student who has diabetes, or a current student with a new diagnosis, she will contact the parents before the start of term or at the time of diagnosis. A general discussion will cover the particular needs of the student and the general policy of the school. The parents and student will be invited in to school. Parents are asked to provide a signed copy of the child's individual healthcare plan including written permission for the school medical room to give glucagon by injection if necessary. We liaise closely with the specialist diabetes nurses attached to hospital out-patient departments and welcome their advice.

## **Diabetes management**

Children and young people with diabetes should have an annual review with their healthcare professional to discuss their diabetes management. They should also have reviews every three months. A pupil's diabetes specialist nurse may want to visit the pupil at school and values feedback from school staff.

Young people with diabetes should carry their blood glucose monitor at all times and may test as and when required and wherever they feel most at ease. Snacks may be brought into school and eaten quietly in class when required. The school medical room also holds emergency supplies for treating hypoglycaemic episodes which are always accessible, even outside of school hours.

Young people with diabetes may be asked to supply a single dose of glucagon injection to be held in the medical room.

## **Staff Training**

Students with diabetes must not be excluded from day or residential visits on the grounds of their condition. They are protected by the DDA (Disability Discrimination Act) and the DED (Disability Equality Duty).

The staff are made aware of any students with diabetes prior to the start of term or at diagnosis and are reminded of signs and symptoms of hypoglycaemic episodes, and also of how to treat them. If a student feels hypoglycaemic either the nurse is called to the student or the student is always accompanied to the nurse.

## **Hypoglycaemia**

All staff who come into contact with students with diabetes are aware of the procedure to follow, where emergency supplies are kept and know who to call in the event of a hypoglycaemic episode.

### **School Trips**

On school trips, the medical room goes over necessary procedures with the teacher in charge. Going on a day visit should not cause any real problems for students with diabetes. They need to remember to take their insulin and injection kit with them, even those who would not usually take insulin during school hours, in case of any delays over their usual injection time.

### **Exercise and physical activity**

Exercise and physical activity is good for everyone, including pupils with diabetes. The majority of pupils with diabetes should be able to enjoy all kinds of physical activity. It should not stop them from being active or being selected to represent school or other sporting teams. However, all pupils with diabetes do need to prepare more carefully for all forms of physical activity than those without the condition, as all types of activity use up glucose.

#### **Before an activity**

Ensure the pupil has time to check their glucose levels. Check that a pupil with diabetes has eaten enough before starting an activity, to prevent their blood glucose dropping too low and causing a hypo. Some pupils with diabetes may also need to eat or drink something during and/or after strenuous and prolonged exercise to prevent their blood glucose level dropping too low and causing a hypo

While it is important that teachers keep an eye on pupils with diabetes they should not be singled out for special attention. This could make them feel different and may lead to embarrassment. If a pupil with diabetes does not feel confident participating in physical activity, teachers should speak to the pupil's parents to find out more about the pupil's situation. The majority of pupils should be able to take part in any sport, exercise or physical activity they enjoy, as long as they are enabled to manage their diabetes.

#### **During an activity**

It is important that the person conducting the activity is aware that there should be glucose tablets or a sugary drink nearby in case the pupil's blood glucose level drops too low. If the activity will last for an hour or more the pupil may need to test their blood glucose levels during activity and act accordingly.

### **Examination Procedure**

Older students who are sitting external examinations have to follow a strict procedure should they feel unwell during an examination. This is to ensure that any claim that hypoglycaemia affected a student's performance and ultimate grade can be rigorously defended by the school, and evidence produced to back up the claim.