

Policies



Diabetes

Status: September 2014
Education Sub-Committee

Rationale:

This Policy provides support for students who have been diagnosed with Diabetes.

Aims:

Our aim is to promote safe and inclusive practices to fully support students with Diabetes and their families.

Guidelines:

Schools have a legal responsibility to provide a safe environment and adequate supervision. In schools with students who have diabetes, additional care must be taken. Staff, including relief staff, must have sufficient knowledge about diabetes to ensure the safety of those students (especially in regard to hypoglycaemia and safety in sport).

Students with diabetes can do everything their peers do but will need:

- extra supervision,
- extra toilet privileges,
- to eat at additional times, especially before or during sport,
- extra consideration if unwell,
- special provisions for privacy if testing blood glucose levels and injecting insulin at school or using an insulin pump.

Implementation:

1. All staff will receive professional development relating to diabetes and its management.
2. Classmates of diabetic students will be educated about signs and symptoms of diabetes.
3. A written individual Management Health Care Plan incorporating medical recommendations should be developed by medical practitioners and then copies provided to the school. This should be attached to the student's records and be accessible to all staff who come into contact with the student.
4. Students whose parents indicate that they are capable of managing their own diabetes will be encouraged to do so. To be deemed capable of self-management, students will have demonstrated they can carry out blood glucose tests, can measure an insulin dose accurately, can recognise the early signs of hypoglycaemia and to treat accordingly, understand the need to take extra food before increased physical activity and to have meals and snacks on time consistent with their diabetes management plan.
5. Students not capable of managing their own diabetes will be managed by staff in accordance with an agreed management plan developed by the student's medical practitioner and provided to the school.
6. A student's management kit (or hypo kit) may be kept in the First Aid room or with the student where appropriate. The kit will also accompany a student on any camp or school excursion. The kit may contain adequate supplies of insulin, syringes or pen injector devices, blood glucose testing equipment and glucose or equivalent to prevent or treat hypoglycaemia.
7. Care should be taken to place sharps in an appropriate container either provided by the school or by the student with their diabetes equipment.
8. All school snack and meal times should be adhered to as closely as possible. A student with diabetes should be permitted to take extra food when required, especially prior to physical activity. The student should not exchange meals with another child.
9. Students with diabetes should never be sent to the First Aid Room alone or be left unattended when feeling unwell. Vomiting is a danger sign. Students with diabetes who are unwell need to



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see a doctor urgently. If parents or guardians are not available, transfer to hospital by ambulance without delay.

10. Emergency medical aid should be available at all times for the student's personal safety. If a severe hypo occurs, call an ambulance and inform the operator that there is a **diabetes emergency**.

Evaluation:

The Diabetes Policy shall be reviewed every 3 years by the Education Sub-Committee of School Council.

Reference:

<http://www.diabetesaustralia.com.au/>
<http://www.education.vic.gov.au/school/principals/health/Pages/outdoorresmedic.aspx>
<http://www.rch.org.au/diabetes/>
<http://www.dhs.vic.gov.au/home>
<http://www.healthdirect.gov.au/>