

Diabetes Policy

St Albans East Primary School



Date: June 2014

Rationale	Appropriate preparations and safeguards should ensure that students with diabetes are able to participate fully in the school's educational programs.
Aim	To ensure that students with diabetes are happy, safe and participatory members of the school.
Implementation	<ul style="list-style-type: none">• The school will ensure that each student with type 1 diabetes has a current individual diabetes management plan prepared by that student's medical specialist. The student's diabetes management plan provides schools with all required information.• The student's diabetes management plan should state the times and the method of relaying information about any changes in blood glucose (B.G.) levels. Depending on the student's age, a communication book can be used to provide information about the student's change in BG levels between parents/guardians and the school.• Parents/guardians should notify the school immediately with changes to the student's individual diabetes management plan.• Students with diabetes will be identified and their confidential details retained in student files in the First Aid room, in the classroom and in specialist rooms.• Staff will receive professional development relating to diabetes and its management.• 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 for doing so. 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 reactions and to take sugar when they occur, 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.• 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 (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. The 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.• In general, the student should 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 (e.g. fruit, biscuits, fruit juice) at the normal meal time while waiting for the meal. A diabetic student



should be permitted to take extra food before extra physical activities to prevent insulin or hypoglycemic reactions if required. 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 three year review cycle

Review Year

2017