Policy for Supporting
Children and Young People with
Diabetes in Education

December 2011
POLICY FOR SUPPORTING CHILDREN AND YOUNG PEOPLE WITH DIABETES IN EDUCATION

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Policy for supporting Children and Young People with diabetes in Education
Introduction

Diabetes is one of the commonest chronic diseases in children and young people. Children, and young people with diabetes, their parents and carers manage diabetes with support and education from the Paediatric Diabetes Team. Diabetes requires close monitoring and frequent treatment, pupils with diabetes will see variation in their blood glucose level, however with support and appropriate care pathways these can all be effectively managed. Good blood glucose control is essential for short and long term health and is required for optimal learning as poor control can have significant negative affects on cognitive ability, academic performance and achievement.

A sound understanding of diabetes and good communication between parents / pupils, school staff, medical staff and the Education Service, will allow the pupil with diabetes to achieve their full potential.

The support of a pupil with diabetes is a shared responsibility including pupils where they are mature enough to take responsibility. All those involved directly with a named pupil should be aware of the Health Care Plan.

This policy is designed to give clear and specific guidance on supporting pupils who have diabetes. It has been developed by the Education Service(s) in co-operation with NHS Lanarkshire.

Before a child or young person enters school / nursery

All parents/carers of pupils with diabetes will have the opportunity to have an initial health care case conference to discuss the management of the pupil’s condition and subsequent reviews will be offered as appropriate, eg where there is a change in the management of the diabetic condition. There will always be a review meeting at points of transition.

Participants in these meetings may include:

- Parents/carers
- The pupil’s appointed diabetes team nurse NHS Lanarkshire
- School nurse (Public health Nurse)
- Relevant school staff, eg Headteacher, class teacher, guidance teacher if in secondary school, support teacher, pupil support assistant and, where appropriate, school staff who have agreed to administer medication
- The pupil, if sufficiently mature and capable of understanding - (always)
- Member of the Catering and Cleaning Service management team
  - (if the parent intends to use the school meals service)
  - Dietitian if coeliac as well, copy of diet/menu sheet for schools

The purpose of meeting is to share information and formulate a Health Care Plan Appendix 1, which documents the specific support required. This must be approved by the Head of Establishment prior to implementation, this will then be copied to all relevant parties.
Diabetes in Education

Regular blood glucose monitoring is essential. Target ranges vary for individual patients, however blood glucose between 4 and 10mmol/l is generally acceptable. The Health Care plan will detail target ranges for each pupil.

Access to Blood glucose monitoring equipment is required at all times. Older pupils will be full responsible for this themselves, younger pupils will have arrangements discussed and stated in the Health Care plan once agreement has been reached. Hand washing prior to each test is essential.

Hypoglycaemia occurs when the blood glucose falls below 4mmol/l, is not uncommon in children and young people with diabetes. The Health Care Plan will detail the treatment of hypoglycaemia including the administration of Glucagel (oral glucose gel). Monitoring equipment for checking blood glucose needs to be available and accessible at all times. This would normally be held by older pupils themselves.

A “Hypo Pack” is required in a sealed container for younger pupils, this should contain: glucose tablets, carbohydrate snack (eg digestive biscuit), appropriate sugar containing drink (eg Lucozade, Coke or Fruit Juice) or tablets and Glucagel. Older pupils will carry most of this themselves.

Pupils and staff involved in carrying out blood glucose monitoring should wash their hands thoroughly before testing (wipes are generally not appropriate).

Some children and young people require for the management of their diabetes to have insulin injection during the day. If they are unable to self-manage, (ie test bloods, set insulin pen to the correct dosage, enter dose into insulin pump and administer insulin) either because of age or physical ability, then a member of staff may undertake the administration of insulin on a voluntary basis.

Education staff members will be trained and supported in taking on this responsibility, and they will be accordingly covered be indemnity insurance held by North or South Lanarkshire Council.

Where the Health care Plan specifies (after agreement) that insulin is to be administered in school, insulin will be held by the older pupils themselves, younger pupils will require the educational establishment to store the insulin. The insulin injection device (insulin pen) should be stored in a sealed container, clearly marked with the pupils details, it should be held in a secure location such as a locked cupboard not affected by extremes of temperature. If an insulin pump is being used this will be attached to the pupil (of all ages) at all times, as laid out in the Health Care Plan.

Where insulin is to be administered by education staff NHS Lanarkshire will arrange the supply of a disposal container for used sharps. Arrangements for its uplift when full will be specified in the individuals Health care Plan.

Pupils may use an Insulin infusion Pump, if this is the case, full explanation, appropriate training and detailed plan will be discussed and agreed prior to use in school or nursery.
Diabetes if managed effectively should not contribute to poor school attendance. Children and Young people with diabetes will require occasional periods of absence in order to attend hospital appointments usually 3 monthly (which occur on Tuesday, Wednesday or Thursday afternoon), and very rarely for short periods of hospital admission.

Poor attendance should be managed according to the local policy.

Training to raise general awareness of diabetes will be made available for all staff by NHS Lanarkshire in conjunction with colleagues from Education. This should include an awareness of the impact of diabetes on cognitive function and performance as well as the likelihood of erratic moods or behaviours. There should also be awareness of different medication, eg insulin pumps, multiple injections, etc. and implications for excursions and activities, eg sports, swimming, etc.

**Supporting Children and Young people with Diabetes in Education: Roles and responsibilities**

It is important that responsibility for pupils’ safety is clearly defined and that each person involved with pupils with health care needs are aware of what is expected of them. Close co-operation between establishments, parents, health professionals and other agencies is crucial in order to help provide a suitably supportive environment for pupils with health care needs to enable them to participate fully in educational activities.

**Parents/carers should:**

- Provide the school with information about their child’s diabetes with support from the diabetes team, this should be updated as necessary

- Provide the school with a list of contacts so that parent/carer can be notified immediately if a problem arises

- Ensure that medications (insulin, and hypoglycaemia treatment “pack”) are replaced after use and are ‘in date’ at all times

- Ensure that medications are collected from the school at the end of the term and replaced at the beginning of each new term. In addition if insulin is stored in school this will need to be sent home either weekly or monthly as specified in the Health care Plan.

- Educate with support from the diabetes team the pupil in diabetes self-management, to manage sharps safely, including general nutritional management of their condition and to immediately inform an adult when they feel unwell.

- Ensure the pupil carries with them (or a hypo pack is available) at all times treatment for mild to moderate hypos, eg glucose tablets, carbohydrate snacks as well as appropriate sugar containing juice(s)
• Provide the pupil or nursery / school with all related items for the safe management of blood glucose testing, and a working blood glucose monitor

• Where appropriate assist schools in providing reasonable support for out of school activities.

**Education Establishment and Staff should:**

• Ensure that all staff members are made aware of this policy and 'Guidance on supporting pupils with healthcare needs, in education establishment' North Lanarkshire Council

• Ensure that relevant staffs are trained as appropriate by the NHS Lanarkshire Paediatric Diabetes Nurses and that this training is updated as required.

• Ensure that the information regarding staff members with a responsibility for administering medication is updated and communicated to other staff (teaching and non teaching), the parents and the pupil

• Ensure that if not held by the (older) pupil insulin and Glucogel are appropriately stored in a secure central location and easily accessible to relevant pupils and designated staff members. If this is a locked location all staff should be aware of where the keys are held, and should be immediately available at all times. The Head of Establishment will designate members of staff who are able to implement all of the Health care plan and ensure that they are trained by the Diabetes Team. Several members of staff should be identified to ensure that someone is available at all times during the school day. In the case of secondary schools, several members of staff will require to be trained to ensure sufficient availability on a daily basis. Schools will ensure that there is cover for out of schools activities

• When medication is provided by parents/carers, the school should keep a record of when this is received along with a note of the expiry date. Parents should be asked to replace this if out of date, if they have not already done so.

• Ensure that all medications are collected by parents at the end of the term with the request that new supplies be brought back to school on the first day of each new term. In addition if insulin is stored in school this will need to be sent home either weekly or monthly as specified in the Health care Plan.

• Arrangements for access to food and beverages will be in place to ensure pupils with diabetes can eat and drink as and when required in line with the Health Care Plan.

• Ensure open channels of communication with parents with regular reviews throughout the school year or where there has been some change in circumstances, ie after an incident
Ensure pupils with diabetes are included in all school activities and not excluded from any activity on the basis of their diabetes. However, they will need to check their blood glucose/sugar levels before and after exercise and will probably need to eat or drink fast acting sugar based type food and drink before the activity or consume more complex carbohydrate before and perhaps after the activity to limit the risk of a hypoglycaemic attack (episode). In addition pupils with diabetes should be supervised when taking part in activity.

Pupils with diabetes will be allowed to eat and drink unchallenged provided this is consistent with their Health Care Plan.

No pupil with diabetes will be prevented from leaving class, detained in class over either break time or lunch time without access to food and drink and, the ability where appropriate, to ensure their Health care plan is followed in a timely manner.

Any pupil with diabetes who is experiencing a hypoglycaemic attack (hypo) (episode) or is otherwise unwell will be accompanied by a responsible person at all times while medical support is being sought.

Flexible opportunities based on need and an appropriate designated area will be made available for the pupil to manage their diabetes according to the Health care plan. This will require a varying degree of support from staff depending on the age and capability of the pupil, as delineated in the Health Care Plan.

Staff working with younger pupils should ensure where ever possible that the pupil actually eats their snack or lunch as provided (or an appropriate carbohydrate alternative). Actions if this is not the case will be detailed in the Health care Plan.

Ensure that there is more than one carbohydrate option on the menu.

Ensure that a pupil with diabetes is served their lunch without delay when requested in the Health care Plan.

**The pupil should:**

The ability of a pupil to take responsibility for their diabetes will be entirely dependent upon their age, individual capabilities and level of understanding. However pupils should be encouraged to -

- know who to contact if help is required
- eat regularly and appropriately, ie meals and snacks should include some form of carbohydrate
- be honest in telling staff how they are feeling and recognise when there is a need to test their blood glucose/sugar as well as a need to eat and drink regularly
- access fluids/food where necessary with minimal disruption to the class
• share with friends, where appropriate, by making them aware of when they might require assistance
• wash their hands before testing their blood glucose.

NHS Lanarkshire Diabetes Team

The diabetes team should:

• Inform parents to contact the school, to inform them about any relevant medical conditions including diabetes, well before school entry, transition or as soon as possible after the diagnosis

• At enrolment, or at subsequent diagnosis education materials will be made available such as the Diabetes UK leaflet (and website) Children with diabetes in school - What all staff need to know (www.diabetes.org.uk) through the Diabetes Team

• Provide appropriate education and information to patients and carers on the management of diabetes whilst at school.

• Attend when invited any meetings to discuss a patient’s diabetes in school, and advise on the Health Care Plan for each pupil with diabetes. Information will be provided to enable this be updated as required

• Provide relevant training to school staff who are supporting pupils with diabetes

• In cases of unusual complexity or where insulin is administered by Education staff, following appropriate training, a supplemental plan will be completed by the Diabetes Team, to add to the Health Care Plan.

• Provide detailed individual information (written) when insulin is required in school, to supplement the Health Care Plan

• Provide appropriate input to sessions aimed at raising general awareness of diabetes for education staff when organised in conjunction with Education authorities

The Public Health nurse:

• Support schools with the development of the Health Care Plan in conjunction with the diabetes specialist nurse where required

Review of policy

This policy will be reviewed in 2014.

Thanks to colleagues in NHS Fife and Grampian who provided documents: “Policy for the management of diabetes in school” and “Guidelines for managing the Health Care needs of
children and Young people with diabetes in education”. These documents provided a basis upon which this policy was developed.
APPENDIX 1 - HEALTH CARE PLAN

CONDITION: DIABETES MELLITIS - SHOULD BE TYPE 1 DIABETES

TREATMENT FOR HYPOGLYCAEMIA

HYPOGLYCAEMIA IS A COMPLICATION OF DIABETES, WHERE THE BLOOD GLUCOSE LEVELS FALL TOO LOW – BELOW 4. EACH CHILD HAS THEIR OWN SIGNS AND SYMPTOMS OF HYPO.

TEST THEIR BLOOD IF THEY SAY THEY FEEL UNWELL
IF READINGS ARE UNDER 4 TREATMENT IS REQUIRED

MILD SYMPTOMS

MODERATE SYMPTOMS

SEVERE HYPO
IF THE CHILD BECOMES UNCONSCIOUS

PLACE THE CHILD IN THE RECOVERY POSITION AND DIAL 999

Nominated people within school

SIGNATURES:
Doctor: 
Parent: 
Headteacher: 

INFORM PARENT:
Name: 
Tel:
Work: 
Home: 

GP DETAILS:
Name: 
Tel: 
Address: 

Policy for supporting Children and Young People with diabetes in Education
Individual requirement for regular blood glucose testing, including whether this requires to be tested in class

Information regarding the pupil’s need to get out of class or eat or drink throughout the day

Pupil’s requirement to have an emergency How to Treat a Hypo Card possibly combined with a “get out of class/eat/drink card”

Information regarding the pupil’s need to eat unchallenged as and when required keeping in mind the variable nature of the condition.

Information regarding the pupil’s requirement to drink unchallenged as and when required – diet drinks/water if “bloods” high e.g. diet coke. Sugary drinks e.g. full fat/sugar coke, irn bru or other sugary drink if bloods are low