

Diabetes Policy

The school is aware that diabetes is a wide spread condition affecting many children. We welcome all students with the condition and recognises our responsibility in caring for them. All relevant staff will be given training on diabetes management as part of their first aid training.

There are two main types of diabetes

Type 1 diabetes

Type 1 diabetes is an autoimmune condition which requires life-long insulin treatment. This is commonly found in most children which means they can no longer produce insulin because the insulin producing cell in the pancreas have been destroyed, without insulin the child's body cannot use glucose properly.

Type 2 Diabetes

People that have type 2 diabetes can still produce some of their own insulin however this may be insufficient for their needs or the insulin produced may not be able to work effectively which is called "resistance". Type 2 diabetes is most commonly found in adults, but the number of children with type 2 diabetes is also increasing due to the lifestyle and an increase in childhood obesity. Type 2 diabetes can be managed with diet and exercise alone, but may require tablets or even insulin.

Young people particularly can have emotional and behavioural difficulties as a result of their condition and much support is required.

School requirements

- All students with diabetes have a Health Care Plan
- Parents are asked to provide spare supplies e.g., Glucose tablets, biscuits, Glocogel, hypo kit, blood checking machine, strips and needles, insulin etc. This should be in a named box in the medical cupboard in the welfare room
- All first aid staff have a clear understand of diabetes and are able to recognise common signs and symptoms associated with the medical condition.
- Staffs are informed each year of those students that have diabetes.

As a result the sugar builds up in the blood causing HYPERGLYCAEMIA. People with diabetes control their blood levels with diet which provides predictable amounts of sugar, carbohydrate and insulin injections. Below is information on how to treat a child with a hypo.

1

Mild Hypo. (Glucose levels 4 or below) Follow this box if child is co-operative and able to tolerate oral fluids Give 10-15g of fast acting oral carbohydrate such as:

- 3-4 Glucose tablets
- 60-90 mls Lucozade Energy
- 150ml (half cup) sugary drink (not diet) such as cola (15g) or Lucozade Sport (10g)
- 3 Jelly babies

2

Moderate Hypo. (Glucose levels 4 or below) Follow this box if child refuses to drink, is uncooperative, but is conscious

Give Glocogel or Dextrogel (formerly known as Hypostop) this is a fast acting sugary gel, in an easy twist top tube.

Each tube contains 10g glucose.

Squirt tube content in the side of each cheek evenly and massage gently from outside enabling glucose to be swallowed and absorbed quickly.

DO NOT use Glocogel in an unconscious or fitting child.

After 10-15 minutes recheck blood glucose levels:

1. If child is still low (below 4) and able to take oral fluids repeat BOX 1 above (once)
2. If still low (below 4), refuses to take oral but is conscious, follow BOX 2 above (once)
3. If better and blood glucose levels are above 4, follow BOX 3 below

Severe Hypo. Follow this box if child is unconscious or fitting.

- DO NOT put anything into their mouth.
- Place child in recovery position.
- Call an ambulance.
- Give Glucagen HypoKit if trained and available.
- Contact parents

3

If feeling better and blood glucose levels and above 4, give 10-15g slow acting carbohydrate snack (or normal meal if it is meal time) such as:

- One slice of toast
- One piece of fresh fruit
- A cereal bar (max 15g CHO)
- One plain digestive or hobnob biscuit
- Glass of milk (200ml)

If hypo is just before meal time (when insulin is usually given) the hypo should be treated first and once the blood glucose levels are above 4 the insulin should be given as usual. **DO NOT OMIT INSULIN.**