

Diabetes Management Policy



The Hazard - Diabetes

Diabetes is a medical condition that involves the body producing insufficient amounts of insulin. Insulin is a hormone that is essential for the conversion of glucose (sugar) from food into energy.

There are two main types of diabetes, type 1 and type 2.

Type 1 diabetes is more common in children and adolescents although it can occur at any age. It is caused by a lack of insulin produced in the body and is fatal without insulin injections.

Type 2 diabetes is more common in adults. The causes of this disease are lifestyle factors such as obesity, lack of regular exercise and overeating. It is treated by diet, exercise and occasionally insulin injections. Unfortunately due to unhealthy lifestyles, some teenagers are exhibiting type 2 diabetes.

Treatment for diabetes involves balancing the level of glucose in the body so that it is neither too high nor too low. Where this balance is not achieved, a person may experience either hypoglycaemia or hyperglycaemia (see below), both of which can be fatal without proper care.

Lavalla Catholic College's Policy

Lavalla Catholic College is committed to supporting diabetic students and assisting them to participate in all College activities.

It is our policy that:

- we provide a clear set of guidelines for the management of diabetes in our College. The guidelines in this policy have been developed having regard to the publications of Diabetes Kids and Teens from the Australian Diabetes Council
- we establish procedures for assisting students manage their diabetes and respond to hypoglycaemia or hyperglycaemia
- we notify parents / guardians of any diabetes related incident requiring treatment at school as soon as possible
- individual health care plans with student photos incorporating medical recommendations are developed and updated regularly with the College, in association with parents / guardians and medical practitioner
- individual health care plans are held at Student Services at both Campuses
- where possible, we encourage students to manage their diabetes independently and keep all necessary equipment with them at all times
- we inform parents / guardians as soon as possible of concerns regarding the diabetic student, particularly where it is limiting the student's ability to participate fully in all activities
- where necessary, we modify activities for the diabetic student in accordance with their needs
- we provide education, support and resources for staff, parents / guardians, students and the wider College community on diabetes awareness
- our staff are trained to provide diabetes first aid and how to use the relevant equipment
- special consideration (e.g. exams), additional privileges (e.g. extra eating and toilet breaks, privacy to inject insulin or use their insulin pump) and additional supervision is provided to diabetic students

Hypoglycaemia (Hypo)

Low blood glucose levels or hypoglycaemia (hypo) is caused by too much insulin and / or exercise, or not enough carbohydrate foods. This causes deterioration of brain function and behaviour as the brain is not supplied with enough glucose. Treatment is needed to promptly raise the blood glucose level.

Symptoms

- sweating, paleness, trembling, hunger and weakness
- being disoriented, unaware or seemingly intoxicated
- inability to drink and swallow
- unconsciousness or seizures.

Treatment

Mild to Moderately Severe Hypo

The following hypoglycaemia treatment guidelines have been produced by the Australian Diabetes Council for kids and teens.

Mild to moderately severe hypos are treated by giving sugar containing food or drink by mouth.

Remember to:

- a) Never leave a child with hypo alone
- b) Act swiftly. Early treatment will prevent a mild hypo progressing to a severe one. If in doubt, TREAT
- c) Give easily absorbed carbohydrate foods. Any ONE of the following:
 - Fruit juice (1/3 to 1/2 glass or 125-200ml)
 - Sugar containing soft drink (1/3 to 1/2 can or 125-200ml)
 - Glucose tablets equivalent to 10-15 grams (2-3)
 - Sugar, honey, sweetened condensed milk or jam (2-3 teaspoons), or
 - Jelly beans (4 large or 7 small)

Repeat this treatment if there has been no positive response within 10-15 minutes

- d) Follow up by giving additional carbohydrate food. After approximately 10 to 15 minutes, or once a positive response is evident, give some carbohydrate food (bread, biscuits, pasta, equivalent to one slice of bread)
- e) Adult supervision is needed until the student has fully recovered.

After 15-30 minutes of treatment and there is visible improvement of symptoms, students may return to normal College activities. Parents / guardians will be notified of the incident. If symptoms remain notify parents / guardians (if not already done) or call an ambulance.

Severe Hypo

Severe hypo causes unconsciousness, seizures and extreme disorientation. It requires urgent treatment in the form of a special injection of medication called Glucagon. Call an ambulance and refer to the **First Aid Policy**. Food or drink should not be given to unconscious people.

Hyperglycaemia

High blood glucose levels or hyperglycaemia is caused by not enough insulin or too much food.

Symptoms

- feeling excessively thirsty
- frequently passing large volumes of urine
- fatigue
- blurred vision.

Treatment

- check your blood glucose levels frequently and administer insulin as necessary
- drink extra water or low calorie fluids to keep up with the fluid lost by passing more urine
- administer first aid in cases of emergency and call an ambulance. Refer to the **First Aid Policy**.

Management

Diabetes can be managed at the College in the following ways:

Blood Glucose Checking

Not all children will need to check their blood glucose level (BGL) at the College but where necessary, the College should discuss specific requirements with parents / guardians.

The Australian Diabetes Council recommends children check their BGL in class because:

- blood glucose levels may be declining or rising since recess or lunch time, and the levels must be monitored in order to maintain the correct balance
- hypo is common during class time
- to avoid missing out on class work if they are sent to the office
- it assists other children to understand and familiarise themselves with the affected student's diabetes management.

Insulin Injections, Insulin Pumps and Continuous Glucose Monitoring (CGM) Devices

The College should discuss specific requirements for insulin injections, insulin pumps and CGM devices with parents / guardians of diabetic students. Younger students may require more supervision than adolescents. Students may need additional help or take particular care when detaching insulin pumps or CGM devices for sport. Privacy provisions should also be considered for students who are injecting insulin or using insulin pumps or CGM devices.

Sharps Disposal

When disposing sharps after insulin injections, care must be taken to wear gloves and place sharps in an appropriate container provided by the College or the student's own diabetes equipment.

Physical Activity

All students, including diabetic students are encouraged to participate in regular physical activity. However, diabetic students should plan ahead and exercise extra care, as exercising muscles uses more glucose for energy. This means blood glucose levels may fall during, immediately after or several hours after physical activity. To prevent hypoglycaemia, extra carbohydrate foods should be consumed before, during and after sport and more supervision of the student is required during sport.

Special care should be taken especially with water sports. Always ensure the student is observed as hypoglycaemia increases the risk of drowning.

Exams

Diabetic students perform best when their diabetes is in good control as poor control adversely affects brain function.

Prior to their exams, students may apply for special provisions and consideration to the College or the Board of Studies in their State or Territory. Examples of special provisions that may be requested include:

- access to food (hypo treatment) to maintain blood glucose levels
- separate exam rooms to ensure they do not disturb others when eating
- easy access to toilets in case blood glucose levels are high and there is a need to urinate more frequently.

Camps and Excursions

All students can attend camps and excursions with early planning and effective communication between the College and parents / guardians.

Parents / guardians may be invited to attend the camp or excursion if the diabetic student cannot manage their diabetes independently. Older students may be able to independently manage their diabetes. All necessary equipment and medication should be carried by diabetic students on all camps and excursions.

Prior to the camp or excursion, parents / guardians need to meet up with the College to provide:

- a written list of special needs
- adequate supplies for treatment and checking
- details of insulin dosage
- extra food and snacks when necessary, and
- emergency contact details.

All staff must be aware of diabetic students and their needs. Staff need to know about:

- Food planning
- Blood glucose checking and insulin treatment
- Prevention, recognition and treatment of hypoglycaemia and hyperglycaemia, and
- During emergencies, when to call for help and any specific medical details.

The student's friends and classmates should also be aware to assist in case of emergency situations.

Staff Responsibility

All staff must follow the guidelines as set out in this policy.

Signage

Individual health care plans with photos of diabetic students are displayed in Student Services at both campuses.

Implementation

This policy is implemented through a combination of:

- staff training
- individual health care plans
- effective incident notification procedures
- effective communication procedures
- allocation of overall responsibility for this policy to a senior member of staff
- initiation of corrective actions where necessary.

Discipline for Breach of Policy

Where a staff member breaches this policy, Lavalla Catholic College may take disciplinary action.