





# **Diabetes Policy**

Date policy accepted by the Governing Body:	Spring 2024
Date for review:	Spring 2025

Diabetes is a long-term medical condition in which the level of glucose (sugar) in the blood is too high because the body is unable to use it properly. This happens because:

- The pancreas does not make any or too little insulin
- The insulin produced does not work correctly
- A combination of both the above.

There are two main types of diabetes-

**Type 1- (insulin dependent)** this develops if the body is unable to produce any insulin, the individual will have to replace their missing insulin. (via injection or pump therapy)

**Type 2 – (non-insulin dependent)** Develops when the body can still make insulin but it is either not enough or does not function properly. The individual may or may not have medication for this.

#### **Recognising Signs and Symptoms**

Below is a list of common complications and how they should be treated.

# **HYPOGLYCAEMIA** (or HYPO)

This occurs when the level of blood glucose falls too low.

- Hunger
- Trembling
- Anxiety/irritability
- Tingling of the lips
- Sweating
- Blurred vision, glazed eyes
- Paleness
- Mood change e.g. angry, aggressive behaviour
- Difficulty in concentrating
- Rapid heartbeat or palpitations
- Drowsiness
- Vagueness

### A hypo may occur because:

- too much insulin
- too little food, especially carbohydrates
- delayed or missed meal/snack
- strenuous /unplanned activity

• no obvious reason

#### What to do:

Immediately give something sugary (a quick acting carbohydrate) such as:

- A glass of Lucozade, cola, fruit juice (no diet drinks)
- Three or more glucose tablets
- Glucogel (if they are conscious but find difficulty in eating/drinking)

For those who inject insulin; a longer acting carbohydrate may also be required.

### **Examples of these are:**

- Roll or Sandwich
- Portion of fruit
- Individual pack of dried fruit
- Cereal bar
- Two biscuits (e.g. Digestive, ginger nuts)
- A meal if it is due

If there is no improvement after 15 minutes something sugary should again be given.

If the individual becomes unconscious

- DO NOT give anything to eat or drink
- Ensure they are breathing and place them in the recovery position
- Contact our Welfare Assistant.
- Call 999 (ambulance)
- Contact the parents
- Continue to observe

### **HYPERGLYCAEMIA** (or Hyper)

This occurs when the levels of glucose in the blood rises above and stays high. The symptoms do not appear suddenly but will build up over time. They include:

- Thirst
- Frequent urination
- Tiredness
- Dry skin
- Nausea
- Blurred vision

#### What to do:

The pupil should be encouraged to administer extra insulin or medication to counter act the high levels of glucose.

Call 999 if any of the following occur:

- Deep and rapid breathing
- Vomiting
- Breath smells of nail polish remover

### **Treatment of Diabetes**

Our schools recognise the importance of helping pupils with this condition in achieving near normal blood glucose levels in order to improve the well being of the pupil. (Each pupil has their own Individual Treatment Plan-detailing their medication and actions to take) (This information is provided by Diabetes UK)

#### **INSULIN:**

Each pupil should be allocated a named container in a designated place in welfare and classroom where upon they can store their insulin pens, blood glucose monitors and other spare equipment. Pupils will be notified if

equipment is nearing expiry in order that fresh supplies can be brought in. A fridge will be provided for the safe storage of insulin and sharps boxes for safe disposal of needles.

#### **Meals and Snacks**

It is vital that the diabetic pupil have regular meals and snacks in order to maintain stable blood sugar levels. Our Schools recognises that the pupil may need to drink or eat snacks during lessons. The SMSA staff have a list of all pupils with medical needs with photos and Individual Treatment Plans.

#### **Exercise and Activity**

Staff will check the individual treatment plan for requirements before and during and after exercise and activity. Pupils should be encouraged to monitor their blood glucose levels prior to activity.

#### **School Trips:**

Pupils with diabetes will not be excluded from day or residential visits on the grounds of their condition. They are protected by the DDA (Disability Discrimination Act) and the DED (Disability Equality Duty)

## **Day Trips:**

These should not cause any problems; however, it is important that:

• All individual treatment plans are taken on school trips with all relevant medication and snacks.

## Residential/overnight trips

It is vital that the pupil is confident at managing their own injections and monitoring their blood glucose levels. The pupils Individual Treatment plan should be provided to the staff for the trip with all the relevant information regarding medication and snacks. All medication to be taken on the trip.

#### In school

- It is the parent's responsibility to ensure that all details of regime and treatment are updated to the Welfare Assistant including full contact details
- The parents should ensure that all supplies of snacks, glucose therapy, insulin and blood glucose testing are kept in stock and in date
- The Welfare Assistant will inform all relevant staff of any pupils with diabetes. A list of all pupils will be displayed in the Staff Room, the welfare office and in the School hall.
- Each pupil will have an Individual Treatment Plan specific to their needs.
- The school nurse/Welfare Assistant will provide regular updates to staff on diabetes.
- Pupils with diabetes should carry their own supplies of extra snacks/drinks when they take part in strenuous activities. Emergency supplies of Glucose drinks, tablets, gel and biscuits will be kept in the Welfare Room.
- Sharp boxes will be provided in the Welfare Room for safe disposal of needles/vials
- All pupils with Diabetes will be encouraged to fully take part in school life.

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