



## DIABETES POLICY

### Policy & Guidance

- All schools are required to ensure that students with Type 1 diabetes have:
  - a current individual [Diabetes Management Plan](#) prepared by the student's treating medical team (provided by parents/carers)
  - a current [Diabetes Action Plan](#) prepared by the student's treating medical team (provided by parents or carers); and
  - a [Student Health Support Plan](#), developed by the school in consultation with the parents or carers and where appropriate the student's treating medical team
  - a [Medication Authority Form](#), detailing the medications required during regular school hours, the dose, administration and storage
- Schools have a legal obligation to consult with the student and parents/carers about the needs of the student and what reasonable adjustments must be made.
- Schools must support students with all types of diabetes.
- Diabetes is considered a disability under the [Disability Standards for Education 2005 \(Cth\)](#) and the [Equal Opportunity Act 2010 \(Vic\)](#). Therefore schools have a legal obligation to make reasonable adjustments for students with diabetes to enable them to participate in their education on the same basis as their peers, regardless of whether they are funded under the [Program for Students with Disabilities](#).
- Children and young people with diabetes are no more likely to be sick than other young people and can generally be expected to do everything their peers do. However, at times they may need additional support or special consideration to ensure they are able to participate in education and training on the same basis as other students.
- An example of a reasonable adjustment could be having an appropriately trained person administer insulin where a student is unable to self-administer safely. In addition, schools have an ongoing duty of care obligation to their students to take reasonable steps to reduce the risks of reasonably foreseeable harm.
- A student's individualised [Diabetes Management Plan](#) and [Diabetes Action Plan](#) document the treatment prescribed by the diabetes treating team, to manage the condition throughout the school day and when blood glucose falls outside the normal range.
- The [Student Health Support Plan](#), to be completed by the school, summarises how schools will implement these plans, including any reasonable adjustments the school will make to support students to participate fully at school.
- These plans, once signed by the parents/carers and school representative, authorise the school to provide the prescribed treatment and consent for the agreed supports to be put into place.
- Responsible Staff members voluntarily agree to take on responsibility for supporting students with Type 1 diabetes, as documented in the Diabetes Management Plan, Diabetes Action Plan and the Student Health Support Plan. Ideally this role is held by staff members who have regular oversight of the student at school and a close relationship. This could be the classroom or homeroom teacher, school nurse or Student Welfare Coordinator, Assistant Principal or ES staff member.

### Purpose

- The purpose of this policy is:
  - to ensure that Footscray North Primary School supports students with diabetes and
  - to provide advice for the school as we develop and implement support and management plans for students living with diabetes if applicable.

## **Definitions**

Diabetes management is a process of balancing physical activity, food intake and insulin treatment to ensure students feel well and can participate fully at school. Current type 1 diabetes management practice includes insulin replacement by injections or continuous infusion via a pump. Blood glucose monitoring is also required.

## **Annual Risk Management Checklist**

A tool for schools to review support processes and manage risks for students with type 1 diabetes. Refer to [Resources](#) tab for this checklist.

## **Diabetes Action Plan**

A tailored plan written by the student's diabetes treating team for the urgent management of blood glucose highs and lows outside their target range.

## **Diabetes Management Plan**

A tailored plan written by the student's diabetes treating team prescribing type 1 diabetes management needs during school hours.

## **Diabetes treating team**

The team of health professionals responsible for prescribing and overseeing treatment in the Diabetes Management and Diabetes Action Plans. The team may include an endocrinologist, paediatrician, dietitian, credentialed diabetes educator, social worker, mental health professional or general practitioner.

## **Hypoglycaemia (Hypo) — Low blood glucose**

Hypoglycaemia occurs when the blood glucose level drops below a normal level. Hypoglycaemia can be caused by too much insulin; delaying a meal; not enough food; or unplanned or unusual exercise. A 'hypo' can be dangerous if not treated promptly and can potentially cause irrational or confused behaviour, a seizure and possible loss of consciousness. It is important to treat hypos rapidly as students can feel unwell and their judgment and cognitive abilities may be impaired.

## **Hyperglycaemia (Hyper) — High blood glucose**

Hyperglycaemia is a condition in which the blood glucose increases above the normal level. Hyperglycaemia can be caused by insufficient insulin; too much food; common illness; and/or stress. This state should be avoided where possible and persistent high levels reported back to parents.

## **Hypo kit**

Includes prescribed fast-acting and slow-acting carbohydrates and is easily accessible by students and staff for prompt treatment of hypoglycaemia in line with the Diabetes Action Plan.

## **Medication Authority Form**

This form should be completed by the student's medical or health practitioner. It details medications required during regular school hours, specifying the dose, how it is to be administered and storage.

## **Personal liability of school employees**

The Department of Education and Training policy clarifying protections for teachers and other school employees against legal proceedings concerning personal injuries of students.

## **Responsible staff**

Agree to undertake training and provide treatment and support to students with type 1 diabetes as outlined in the Diabetes Management Plan, Diabetes Action Plan and Student Health Support Plan.

## **Student Health Support Plan**

A plan that outlines how the school will support a student's health care needs and make adjustments to support their full participation in school life. An individualised plan must be developed in consultation with parents or carers and students (where applicable) for all students with type 1 diabetes. The Student Health Support Plan is based on health advice received from the student's diabetes treating team.

### **Type 1 diabetes**

An auto-immune condition which occurs when the immune system damages the insulin producing cells in the pancreas. Insulin is the hormone that controls blood glucose levels (BGLs). This condition is predominantly treated with insulin replacement via multiple injections each day or a continuous infusion via a pump. Without insulin treatment, type 1 diabetes is life threatening.

### **Type 2 diabetes**

Occurs when either insulin is not working effectively (insulin resistance) or the pancreas does not produce sufficient insulin (or a combination of both). Type 2 diabetes accounts for around 85 per cent of all cases of diabetes, but less than 5% of cases in the school-based population. Type 2 diabetes usually develops in adults over the age of 45 years, but it is increasingly occurring at a younger age. Type 2 diabetes is initially managed with a healthy diet and lifestyle and/or medication that could include tablets and/or insulin.

### **Implementation**

- The Principal will ensure the following training requirements:
  - all staff complete basic level training so they have an awareness of what Type 1 diabetes is and how to respond safely to an emergency
  - that responsible staff undertake appropriate training to develop confidence and competence to implement a student's Diabetes Management Plan and Diabetes Action Plan
  - training is up-to-date and appropriate in light of any changes to a student's Health Support Plan
- The school will refer to the [Supporting Students with Type 1 Diabetes in Victorian Schools Guidelines](#) (the Guidelines) in the Guidance tab at the website below for additional assistance to support students with Type 1 diabetes.

### **Diabetes Management Plans**

Upon enrolment or when a health care need, such as diabetes, is identified, the school, in conjunction with parents/carers and the student's treating medical team are required to develop a clear and tailored health support plan to support the student's individual health care needs.

Diabetes Management Plans and Action Plans (with companion documents) must be completed and signed by the hospital treating team responsible for the student's diabetes care before being provided to the school by the student's parents/carers.

To ensure all relevant parties have been consulted and are in agreement with the stated plan of care for school the Diabetes Management Plan must be signed by the parent/carer; diabetes educator or doctor (specialist endocrinologist or paediatrician) and the Principal.

The school will develop a Student Health Support Plan in consultation with parents/carers when appropriate for the student and where appropriate the student's treating medical team.

### **Support to students**

The school will consult initially with parents/carers and on an ongoing basis through regular [Student Support Groups](#) or other meetings or methods of communication.

We will ensure that at least three people on staff hold the role of Responsible Staff member to allow for staff absences.

Please note: The Principal cannot compel a staff member to become a Responsible Staff member. It is a voluntary role.

We will work closely with families to plan, implement and review agreed strategies to support students to participate fully at school. To achieve this, a focus on communication, training, treatment and reasonable adjustments is recommended. Refer to [Guidance](#) tab for further information.

Students will be supported to learn to take responsibility for the management of their own health needs in non-emergency situations where possible. However, diabetes management in younger students may be harder to achieve given their various stages of development and complexity of Blood Glucose Levels (BGL) monitoring and treatment. Individual children will become independent at various ages therefore additional support by educators and support staff may be necessary until this time occurs.

### Staff training

The Principal will:

- ensure all staff are aware of which students have Type 1 diabetes, have a basic understanding of diabetes and know how to safely respond in an emergency
- ensure a sufficient number of Responsible Staff are trained, capable and available daily to provide the treatment prescribed in a student's individual Diabetes Management Plan and Diabetes Action Plan
- fund and facilitate professional development for school staff, appropriate to a student's individual needs

### All staff need:

- a basic understanding of Type 1 diabetes and how to respond in an emergency. It's recommended that schools use the Diabetes Victoria [Diabetes at School](#) online education package that can be accessed by all school staff.  
(The 3 to 5-minute, self-directed learning modules will help to ensure that all school staff understand Type 1 diabetes and how it impacts on a student's day to day life, provide knowledge about how to respond appropriately to students experiencing hypoglycaemia and hyperglycaemia and information about Diabetes Action and Management plans.)

### Responsible staff must:

- undertake appropriate training to develop confidence and competence to provide the treatment prescribed in the Diabetes Management Plan and Diabetes Action Plan

Additional resources are also available on the [Resources](#) tab for staff wanting to further their knowledge of Type 1 diabetes.

(Training seminars for teachers and school support staff to develop confidence and competence in supporting students with diabetes and in implementing a student's Diabetes Management Plan and Diabetes Action Plan are held regularly by Diabetes Victoria. For details on upcoming sessions, refer to: [Professional Development](#).)

### Impact at school

Most students with diabetes can enjoy and participate in school life and curriculum to the full. However, due to their diabetes they may need:

- special consideration when participating in sport, excursions, camps and other activities
- extra diabetes management plans for overnight camps and excursions prepared by the student's treating medical team
- special consideration during exams and tests
- extra toilet provisions
- extra consideration if unwell
- some individual supervision
- to eat at additional times, especially when involved in physical activity
- special provisions for privacy when checking blood glucose levels and injecting insulin, if required

Students may require some time away from school to attend medical appointments, but in general, attendance at school will not be an ongoing issue.

### Strategies

The school will support students in managing diabetes and make reasonable adjustments to enable students to participate in their education on the same basis as their peers who don't have diabetes as applicable:

- Monitoring Blood Glucose Levels (BGLs)
- Administering Glucagon
- Administering insulin

For details, please refer to the website below.

### Communication

We will establish a culture of inclusion and to support young people with diabetes so they can participate fully and safely at school.

We will work with parents/carers to determine what method will best facilitate regular and reliable communication between parties. We will be proactive in establishing effective communication lines to

ensure parents/carers can regularly and easily relay health changes or updates to a student's individual Diabetes Management Plans. Communication books, emails and text messages to a nominated contact are strategies that may be considered.

#### Infection control

Infection control procedures will be followed. These include providing clear instructions to relevant staff on how to prevent infection and cross contamination when checking blood glucose levels and administering insulin. This includes measures such as hand washing, one student or child one device, disposable lancets and syringes and the safe disposal of all medical waste.

#### Activities, special events, school camps and excursions

Camps, excursions and special events enhance self-esteem, promote confidence and independence and are an important part of school education. Students with diabetes can generally participate fully in camps, excursions and special events.

We will make reasonable adjustments in order to enable the student to attend activities including excursions and camps.

The student's Health Support Plan will be reviewed before a student attends an excursion or camp and a specific diabetes camp plan must be created by the student's treating medical team, in consultation with the parents/carers.

Staff members who will provide assistance with the diabetes management will be identified.

The school cannot require parental attendance as a condition of the student attending the excursion or camp. However, if the parents/carers wish to attend the excursion or camp and this is consistent with school policy and practice in relation to parents attending excursions or camps, then this may be agreed to at the discretion of the Principal.

The school will develop risk assessment plans in consultation with the student's parents/carers that identify foreseeable risks and provide reasonable steps to minimise and manage those risks. The plan must consider the potential for injury to the student and/or others and include details about the camp or excursion, including the location, remoteness, risk-level of the activities, transport and sleeping arrangements, proposed supervision and information relating to the student's needs and diabetes.

If the school is providing food for camps or other special events, reasonable adjustments must be made to allow students with diabetes to participate. A discussion with the parents/carers prior to the event, camp or excursion is recommended to develop an appropriate response for each case.

#### Classroom Management and Special Activities

School staff will make reasonable adjustments in their management of classroom activities and other special events to ensure students with diabetes are able to fully and safely engage in education and related activities.

Strategies include restricting food-based rewards, ensuring suitable food or snack alternatives are available for class parties and altering food-based curriculum activities (such as cooking and hospitality) to improve safety for students with diabetes. Staff should note that food sharing between students is not safe for students with diabetes.

#### Physical activity

Students will be encouraged to participate in physical activity as it has broad health and wellbeing benefits for the individual. However, special precautions are necessary for students with diabetes.

Exercise may affect blood glucose levels and as a result student's Diabetes Management Plans, Diabetes Action Plans and Health Support Plans must include specific advice on how staff should assist and monitor students participating in physical activity.

Exercise is not recommended when BGLs are outside of the target range particularly for students with high BGL levels as exercise may further increase BGLs.

Extra caution will be taken when considering water sports for young people with diabetes as the environmental factors combined with unstable BGLs may increase the risk of drowning. Refer to the student's Diabetes Management Plan and Diabetes Action Plan.

#### Timing meals

Most students will have a food plan that fits in with regular school and care routines, avoiding the need to eat regularly in class or at unusual times. Younger students may require extra supervision at meal and snack times to ensure they eat the food provided and do not share food with other students.

Meal requirements of students will be communicated to all supervising staff. All supervising staff must understand that students with diabetes cannot delay meal times and special consideration must be given to students with diabetes if an activity is running overtime. Families are responsible for providing schools with the food and drink needed by their child.

#### Staff continuity

Consideration will be given to maintaining adequately trained staff during times of staff changeover, while students are in the playground or under the supervision of relief, specialist and/or non-contact teachers.

For good practice examples of making reasonable adjustments for students to allow them to fully participate in school, see the Diabetes Guidelines in the Guidance tab.

#### Summary of treatment roles

The below information summarises the treatment roles of those involved in supporting a student with Type 1 diabetes:

##### Role of the student (if age appropriate)

- participate in their health care and management
- follow their Diabetes Management Plan and Diabetes Action Plan with support from school staff
- ask for help if they are feeling unwell or in need assistance
- agree to trained school staff supporting and Responsible Staff administering treatment as prescribed in the Diabetes Management Plan and Diabetes Action Plan
- tell teachers and parents/carers if they need more assistance or support

##### Role of responsible staff

- are familiar with each student's treatment regimen and the level of support they need
- assist students to follow their daily routine as outlined in their Diabetes Management and Action Plans
- ensure equipment and supplies are easily accessible to students at all times
- are familiar with the student's Diabetes Management Plan and Diabetes Action Plan and have easy access to the Diabetes Action Plan and hypo kit in their classroom
- follow safe needle disposal and infection control procedures

##### Role of all staff

- have a duty of care to students which includes ensuring that medical assistance is provided if they are sick or injured. This can include emergency first aid to students experiencing a severe hypo

##### Role of parents/carers

- consent to Responsible Staff supporting and administering treatment where required by the Diabetes Management Plans and Diabetes Action Plans
- supply and monitor all equipment the student needs to safely manage their diabetes, including a clearly labelled hypo kit
- inform the school of any changes in a student's condition where it is causing concern
- provide signed copies of updated Diabetes Management Plans and Diabetes Action Plans as they are amended
- use a medication log book to inform Responsible Staff of any changes to a student's insulin regime

##### Role of the diabetes treatment team

- work with parents/carers and the student to identify and prescribe an appropriate treatment regime

#### Diabetes Guidelines

- The guidelines (in the guidance tab):
- supplement the Department's Diabetes policy and can be used in conjunction with the [Mastering Diabetes in preschools and schools resource](#)
- will help schools to meet their legal and policy obligations and inform student health support planning
- provide practical advice on effective communication, staff training, implementing treatment plans and making reasonable adjustments to optimise student's engagement in school life

- Please refer also to the school's *Duty of Care Policy, the Health Care Needs, Medication Policy, First Aid for Students & Staff Policy, the Excursions (Including Camps)* and the *Swimming Instruction/Water Safety Education Policies*.

### **Evaluation**

- This policy will be reviewed as part of the school's three-year review cycle or if guidelines change (latest DET update mid-June 2020).

An operational policy  
School Council Approval No Longer Required

Reference:  
<https://www2.education.vic.gov.au/pal/diabetes>