

This Policy has been written in line with information provided by Diabetes UK, Diabetes guidelines 2014 and the local education authority, the school and Governing Body.

Robert Peel Primary School recognises that Diabetes is a common condition affecting children and as a school we welcome all pupils with diabetes and will support in the management of every day medical issues.

As a school we support children with diabetes in all aspects of school life and encourage them to aspire to achieve their full potential. This will be done by having a policy that is understood by the staff. This policy ensures all staff have received training about diabetes.

Diabetes - is a condition where the level of glucose in the blood rises. This is either:

- Due to lack of insulin (Type 1 diabetes) or because there is insufficient insulin for the child's needs.
- Or the Insulin is not working properly (Type 2 diabetes).

The majority of children have type 1 diabetes. They normally need to have daily insulin injections, to monitor their blood glucose level and to eat regularly according to their personal dietary plan.

Children with Type 2 diabetes are usually treated by diet and exercise alone.

The commonest problem encountered is Hypoglycemia (Hypo's) when the blood sugar level goes too low. The onset of Hypoglycemia occurs in a matter of minutes and untreated the child may then go unconscious within minutes. The child may recognise the symptoms which include:

- Feeling faint
- Unsteadiness
- Sweating
- Pallor
- Irrational, argumentative and aggressive behaviour.

The more rare problems of Hyperglycaemia (Hyper's) can lead to a diabetic coma. This develops more slowly over a period of hours. The symptoms include:

- Drowsiness
- Thirst
- Vomiting

Treatment

If a child has a hypo, it is very important that the child is not left alone and that a fast acting sugar, such as a glucose tablet, a glucose rich gel, or a sugary drink is brought to the child and given immediately. Slower acting starchy food, such as a sandwich or two biscuits and a glass of milk, should be given once the child have recovered, some 10-15 minutes later. An ambulance should be called if:

The child' recovery takes longer than 10-15 minutes or if the child becomes unconscious.



If a child has a hyper then the pupil's parents or guardians should be contacted immediately. If they are not available then an ambulance must be called.

Record Keeping

When a child with diabetes is admitted to Robert Peel Primary school, or a current pupil is diagnosed with the condition, the head teacher arranges a meeting with the parents and pupils to establish how this may affect school life. This should include the implications for learning, playing, P.E lessons, social development and out of school activities. All children with additional medical needs will have a Health care plan which will outline the medical need of the child and then the treatment plan to follow

Medication

After the medical health care plan has been formulated a treatment plan will show the information clearly to be followed. For Diabetes the majority of children are supported by two required doses of insulin a day and it is unlikely that insulin will need to be administered during the day at school. Although for those children that do need insulin it may be necessary for an adult to administer the injections.

Older children can manage their own injections, but if doses are required at school supervision may be required, and also a suitable, private place to carry it out. Children with diabetes need to ensure that their blood glucose levels remain stable and may need to have their levels checked by a trained adult by taking a small sample of blood and using a small monitor at regular intervals. They may need to have this done during the school lunch break, before P.E. or more regularly if their insulin needs adjusting.

When staff agree to administer blood glucose tests or insulin injections they must be trained by an appropriate health professional. Children with diabetes need to be allowed to eat regularly during the day. This may include eating a snack during class-time or prior to exercise and at a consistent time for lunch.

Supplies of lucozade and other glucose drinks (not diet) should be kept in the classroom, in date with the child's name written on them for emergency use only.

If a child is unwell with vomiting or diarrhoea this can lead to dehydration. If the child is giving off a smell of pear drops or acetone this may be a sign of ketosis and dehydration and the child will need urgent medical attention.

Making the School Diabetes Friendly

With the permission of the pupil and parents an introduction to diabetes will be given to the school/year group/ class in PSHCE lessons. Staff will be notified of any changes in the pupil's condition through regular staff briefings to make staff aware of special requirements.