



## Scarborough College

### MANAGEMENT OF DIABETES POLICY

*This is a whole College policy, including EYFS and the boarding community.*

This policy has been written in line with information provided by Diabetes UK. Scarborough College recognises that diabetes is a common condition affecting children and welcomes all children with diabetes to the school. We aim to support children with diabetes in all aspects of school life and encourage them to achieve their full potential.

#### What is Diabetes?

Diabetes is a long-term medical condition where the amount of glucose (sugar) in the blood is too high because the body cannot use it properly. This happens because:-

- The pancreas does not make any or enough insulin.
- The insulin does not work properly.
- It can be a combination of both.

Insulin is the hormone produced by the pancreas that helps glucose, from digestion of carbohydrate, move into the body's cells where it is used for energy. The body's cells need glucose for energy and it is insulin that acts as the 'key' to 'unlock' the cells to allow the glucose in. Once the door is 'unlocked' the glucose can enter the cells where it is used as fuel for energy.

When insulin is not present or does not work properly, glucose builds up in the body.

There are two main types of diabetes:-

**Type 1** - diabetes develops if the body is unable to produce any insulin. The majority of children who have Type 1 diabetes need to have daily insulin injections, or are fitted with an insulin pump and they monitor their blood glucose levels and to eat regularly counting their carbohydrates.

**Type 2** - diabetes develops when the body can still make some insulin but not enough, or when the insulin that is produced does not work properly. Children with Type 2 diabetes are usually treated by diet and exercise alone.

#### Medication and Control

Diabetes in children is controlled by injections which can be a twice a day insulin regime of a longer acting insulin, or may be on multiple injections or on an insulin pump. Most Senior School pupils can manage their own injections or pumps but if extra doses are required at school, pupils can attend the Medical Centre.

Pupils with diabetes need to ensure that their blood glucose levels remain stable and may monitor their levels using a blood glucose monitoring machine at regular intervals. They may need to do this during the school at lunch and break and more regularly if their insulin needs adjusting due to activities and games lessons.

Pupils with diabetes must be allowed to eat regularly during the day. This may include eating snacks during class-time or prior to exercise. School may need to make special arrangements for pupils with diabetes if the school has staggered lunchtimes. If a meal or snack is missed, or after strenuous activity, particularly in extremes of weather, the pupil may experience a hypoglycaemic episode (a hypo) during which his or her blood sugar level falls to too low a level. Staff in charge of physical education classes or other physical activity sessions should be aware of the need for pupils with diabetes to have glucose tablets or a sugary drink to hand.

### **What to Do When a Pupil with Diabetes Joins Scarborough College**

When a pupil with diabetes joins Scarborough College, or a current pupil is diagnosed with the condition, the School Nurse arranges a meeting with the pupil and parents/guardians to establish how the pupil's diabetes may affect their school life. This should include the implications for learning, physical activity, social development, and out of school activities. They will also discuss any special arrangements the pupil may require. The diabetic specialist nurse may also attend the meeting to talk through any concerns the family or school may have, and assess training needs.

With the pupil's and parents/guardians permission, diabetes will be addressed with the child's classmates so they are aware of warning signs of a hypo or hyper reaction and can summon help if required.

### **Record Keeping**

During the meeting the School Nurse will agree and complete a record of the pupil's diabetes, learning and health needs. This information may include issues such as agreeing to administer medicines and any staff training needs. This information will be agreed by the parents, and the health professional, if present, and kept safe and confidentially in the pupils health record in the medical centre and updated when necessary.

Staff will be notified of the pupil's condition and any changes through regular staff briefings. This will make staff aware of any particular warning signs and maintain communication between parents/guardians and school ensuring the pupil maintains good diabetic management.

Following the meeting, an individual healthcare plan (IHCP) will be drawn up by the School Nurse/diabetic specialist nurse. It will contain the information highlighted above and identify the pupils monitoring and medication regime and first aid issues of which staff need to be aware. It will also contain the names of staff trained to administer medicines and carry out blood glucose monitoring if required, and how to contact these members of staff. The IHCP will be agreed by the pupil, parents/guardians, School Nurse and signed. It will be stored confidentially in the Medical Centre along with any emergency medication as required.

### **Medicines**

We will follow the manufacturer's guidelines for the correct storage procedures for any medicines required. Emergency procedures will be identified on the IHCP with a list of staff who are trained to administer emergency medication. Medication will be either carried by the pupil if appropriate or kept in pre-school office/prep-school common room or the Medical Centre in the emergency box

### **Exercise and Physical Activity**

The majority of pupils with diabetes should be able to enjoy all kinds of physical activity. It should not stop them from being active or being selected to represent school or other sporting teams. However, all pupils with diabetes do need to prepare more carefully for all forms of physical activity than those without the condition, as all types of activity use up glucose. This may include monitoring blood glucose levels pre and post activity and ensuring sugary snacks/drinks are available during the activity and starchy foods consumed after.

The IHCP will identify what the pupil/and teacher needs to do when they take part in physical activity.

Teachers and sports coaches need to be aware of the warning symptoms of hypoglycaemia and hyperglycaemia and ensure the pupil has easy access to blood glucose monitoring machine/drinks/snacks and insulin.

### **School Visits**

Pupils with diabetes must not be excluded from day or residential visits on the grounds of their condition. They are protected by the Disability Discrimination Act 1992 and the Equality Act 2010.

Pupils need to remember to take their insulin and administration equipment, even those who would not usually take insulin during school hours, in case of any delays over their usual injection time. They will have to take some snacks. Diabetics should also take their monitoring equipment and their usual hypo treatment with them.

### **Residential and Overnight Visits**

It is important to know how confident a pupil with diabetes is at managing their own injections and monitoring their own glucose levels before deciding on appropriate staffing for an overnight visit. If a pupil is not confident in managing all aspects of their condition for an overnight visit including administration of medication, then a trained member of staff will need to accompany the pupil to assist. It is parents/guardians responsibility to ensure the pupil has all the correct equipment with them for a residential visit. If any medical equipment has been lost or left behind, the Paediatric department or Accident and Emergency department at the nearest hospital should be able to help. If the pupil is travelling outside the UK on a school trip, Diabetes UK publishes country guides. These contain useful information about local foods and diabetes care, and translations of useful phrases.

### **When a Child or Young Person is Falling Behind in Lessons**

If a pupil is missing a lot of time from school due to their diabetes or is experiencing symptoms due to poor management of their diabetes, the form tutor will initially talk to the parents to work out how to prevent their child from falling further behind. The form tutor should keep the School Nurse informed of all discussions and if appropriate, talk to the special education needs coordinator about the pupil's needs.

## **School Environment**

We recognise the importance of having a school environment that supports the needs of pupils with diabetes. The medical centre is kept available and equipped with a bed in case a pupil needs to recover following a hypoglycaemia. It is parents/guardians responsibility to provide school with all the necessary equipment to effectively manage their child's condition. We will work closely with the pupil, parents and diabetic specialist nurse to ensure excellent diabetic management. This diabetes policy applies equally within the school and at any outdoor activities organised by the school and residential stays. Any concerns held by the pupil, parents/guardians or member of staff will be addressed at a meeting prior to the activity or stay taking place.

## **Boarding Students**

The policy equally applies to boarding students, in addition extra training will be provided for boarding staff to ensure they are competent in managing diabetes and fully aware of emergency procedures. Diabetes will be addressed with the boarding community to ensure safety of the pupil and risk assessment carried out as necessary. The School Nurse and school doctor will ensure boarders with diabetes have an annual review with their healthcare professional to discuss their diabetes management and a review every three months. Close contact will be kept with the diabetes specialist nurse who may want to visit the pupil at school and gain feedback from school/boarding staff.

## **Hypoglycaemia**

Hypoglycaemia or (hypo) - occurs when the level of glucose in the blood falls too low (usually under 4 mmol/l). A blood glucose monitor is available for use by the School Nurse to establish the blood sugar level.

## **Watch Out For**

- Hunger.
- Trembling or shakiness.
- Sweating.
- Glazed eyes.
- Pallor.
- Mood change, especially angry or aggressive.
- Behaviour.
- Anxiety or irritability.
- Fast pulse or palpitations.
- Lack of concentration.
- Tingling.
- Vagueness.
- Drowsiness.

Each pupil may experience different symptoms and this should be discussed when drawing up the healthcare plan.

Immediately give something sugary, a quick-acting carbohydrate such as one of the following:-

- Five jelly babies or soft fruit sweets.
- A glass of Lucozade.
- Glucose tablets.
- Glucogel if severe.

The exact amount needed will vary from person to person and will depend on individual needs and circumstances. This will be sufficient for a pump user but for pupils who inject insulin a longer-acting carbohydrate will be needed to prevent the blood glucose dropping again.

- Bread Roll/sandwich.
- Two biscuits, e.g. digestive/ginger nut.
- A meal if it is due.

If the pupil still feels hypoglycaemic after 15 minutes, something sugary should again be given. If the pupil is unconscious do not give them anything to eat or drink and call for the School Nurse, parents or an ambulance.

### **Hyperglycaemia**

Hyperglycaemia - (hyper) is if a pupil's blood glucose level is high (over 10mmol/l) and stays high.

Common symptoms:-

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

The School Nurse will administer a bolus of insulin or the pupil may feel confident to give extra insulin.

If the following symptoms are present, then call the emergency services:-

- Deep and rapid breathing (over-breathing).
- Vomiting.
- Breathe smelling of nail polish remover or pear drops.

If the child is unwell, vomiting or has 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.

Greater than usual need to go to the toilet or to drink, tiredness and weight loss may indicate poor diabetic control, and staff will naturally wish to draw any such signs to the parents' attention.

### **Acknowledgements**

Supporting Pupils in School with Medical Conditions

Diabetes UK.

***Policy Last Reviewed*** – September 2018