



diabetes information for schools a note for parents

a note for parents

Most schools are very supportive of children with special needs, however communicating clearly with the school and your child's teacher is vital. The following guide has been developed to assist you in giving your child's teacher the information they need to keep your child happy and well. Being aware of some of the common misconceptions about diabetes and problems that may occur at school can guide you in what to discuss.

Make an appointment with your child's teacher and other relevant people (Principal, sports teachers, after school carers).

 Assume people know nothing about diabetes. Give them a quick summary; let them know it is serious but manageable. Indicate that all teachers will need to know about diabetes, including relief teachers.

Common misconceptions about diabetes

- Your child should be totally self-caring.
- Your child fully understands diabetes.
- Activity should be restricted.
- 2. Demystify the tools. Explain equipment used and show the teachers blood glucose testing equipment and insulin delivery devices. Children and adolescents should always have access to their blood glucose monitoring equipment. Children of primary school age should be supervised when monitoring and/or taking insulin and most schools are able to provide this supervision. In some cases school staff may be trained to assist with monitoring, insulin pump management, injections and glucagon administration.

Common problems around blood glucose monitoring and injections

- Lack of privacy for diabetes routines.
- No supervision of insulin administration, insulin pump management or blood glucose testing.
- Insulin monitoring equipment kept in difficult to access location e.g. locked in office.
- 3. Talk about hypos your child's symptoms and treatment. Show the teachers the hypo kit and discuss where it is to be kept and how it is to be used.

Common problems about hypos

- Children are sent alone to get treatment or left alone in sick bay.
- Child's condition worsens but treatment not repeated.
- Teachers are unsure when to treat.
- Parents are not informed that a hypo has occurred at school.

The National Diabetes Services Scheme (NDSS) is an initiative of the Australian Government administered by Diabetes Australia. In NSW, syringes and disposable needles under the NDSS are co-funded by the NSW Department of Health. The NDSS Agent in NSW is Australian Diabetes Council.

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4. Discuss food and eating schedule and why it is

so important. Obtain permission for snacks to be consumed by your child in class and on school buses if required.

Common problems about food

- Meal routine altered e.g. detentions at meal times.
- Access to food and drinks restricted.
- Changed meal routines during excursions.

5. Discuss the care required during sport and physical activity, particularly extra care during water sports.

Common problems about physical activity

- Extra snack not given for sport.
- Child restricted from participating in sport.
- Lack of awareness that increased physical activity can cause hypos.
- Need for reduced insulin and ready access to food at all times at school camps and have access to water as needed.

6. Briefly discuss high blood glucose levels and what

to do. Explain that your child may need to drink extra water and go to the toilet more often.

Common problems about high blood glucose levels and sick days

- Child left alone in sick bay.
- Access to toilets and drinking water restricted.
- Emergency contact telephone numbers (for
- doctor and diabetes centre) not being available.

7. General guidelines.

Provide the school with your contact details and a photo of your child.

It is important to leave contact details about emergency services in case you or your doctor cannot be contacted. If your child is unconscious or very unwell, help can always be obtained by calling 000 and indicating that your child has diabetes.

You are encouraged to formalise your discussions by negotiating a written Management Healthcare Plan. Your child's diabetes educator and doctor in discussion with your child's school can assist you with this.

Remember you will need to keep in touch with your child's teachers on a regular basis. As your child grows, their needs will change. Also new teachers will come into the school. The school will welcome your feedback.

In some circumstances your diabetes educator can visit your school. If your child is newly diagnosed or you are unable to resolve an issue with the school, your child's diabetes educator can be an invaluable resource person facilitating communication and negotiation.

Emergency phone number 000 Australian Diabetes Council Kids and Teens Careline 1300 136 588



A joint initiative of Australian Diabetes Council and International Diabetes Federation