

	<h2 style="text-align: center;">Diabetes Procedure</h2>
Linked Policy Document	This procedure details actions and processes pursuant to the <i>Diabetes Policy</i> .
Version No.	Version 3.0 November 2021 (approved)
Authorisation	General Manager Community Services
Expiry Date	Policy to be reviewed by December 2024
Responsible Officer	Manager Families & Children
Policy Owner	Early Childhood Coordinator

1. Purpose

This procedure will provide a process to ensure that enrolled children with Type 1 Diabetes and their families are supported, while children are being educated and cared for by the service. This procedure should be read in conjunction with the *Dealing with Medical Conditions Procedure*.

2. Scope

This procedure applies to services responsible for the direct education and care of children and applies to the Approved Provider, Person in day to day charge, Responsible Person Nominated Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Melton City Council.

3. Definitions

For terms that relate specifically to this procedure refer to the *Diabetes Policy*. For commonly used terms e.g. Approved Provider, Regulatory Authority etc. refer to the *Glossary of Terms*.

4. Procedure

- All educators are required to hold a current approved First Aid certificate, Anaphylaxis management certificate and Asthma management certificate (where required by Law).
- When a child has been diagnosed with Diabetes, the parent/guardian is required to provide a current medical management plan, including a current photograph of the child, prior to the child accessing care, developed and signed by a medical practitioner.
- All staff, educators and volunteers are to follow the processes outlined in the medical management plan.
- The medical management plan, or a description of its location, is required to be displayed at the service.
- Prior to accessing the service, the staff/educators will develop a Risk Minimisation Plan in consultation with the parent/guardian, which includes the identified risk, identifies the child, their medical management plan and the location of their medication.
- Educators will ensure that the child does not attend the service without the medication prescribed by the child's medical practitioner.
- A Communication Plan will be developed to ensure all relevant staff, educators and volunteers are informed of the *Administration of Medication Policy*, medical management plan, Risk Minimisation Plan, and how the parent/guardian can communicate any changes to the medical management plan and Risk Minimisation Plan for their child.

- Educators will be instructed in how to carry out the procedures required before the child attends the service.
- All medication administered needs to be documented as per the *Administering Medication Policy*.
- The coordinator or team leader must notify the Department of Education & Training (DET) as soon as practicable and no later than 24 hours if emergency services have been called.

4.1. In terms of impact at the service

Most children with Type 1 Diabetes can enjoy and participate in children's services to the full. Some children may require additional support from educators to manage their Diabetes, and while attendance at children's services should not be an issue, they may require some time away from children's services to attend medical appointments.

Services should ensure that medical advice is received from the child's health practitioner.

4.2. Different ways children's services can support children in managing Diabetes

- Monitoring blood glucose (BG) levels

Checking blood glucose levels requires a blood glucose monitor and finger pricking device. The child's Diabetes management plan should state the times and the method of relaying information about any changes in blood glucose levels. Depending on the child's age, a communication book can be used to provide information about the child's change in BG levels between parents/guardians and the children's service.

Checking of BG occurs at least four times a day to evaluate the Insulin dose. Some of these checks may need to be done at the children's service and some younger children may need supervision when performing BG checks.

- Administering Insulin

Administration of Insulin during children's service operational hours may or may not be required in the children's Diabetes management plan.

As a guide Insulin is commonly administered:

- twice a day, before breakfast and dinner, or
- by a small Insulin Pump worn by the child that provides continuous Insulin delivery, or
- four times a day with pen Insulin (children may need assistance from parents/guardians or a designated educator to administer pen Insulin).

Should a child whose health condition(s) requires additional care and attention during children's service operational hours, consultation is required with the parents/guardians and health professionals to ensure that educators are undertaking tasks within their scope of practice and training.

- Infection control

Infection control procedures must be followed. These include having instruction about ways to prevent infection and cross infection when checking BG levels and administering Insulin, hand washing, one child/one device, disposable lancets and syringes and the safe disposal of all medical waste.

- Timing meals

Most meal requirements will fit into regular children's service routines. Young children may require extra supervision at meal and snack times. It needs to be recognised that if an activity is running overtime, children with Diabetes cannot delay mealtimes.

- Physical activity
A serve of carbohydrates should precede exercise.
Exercise is not recommended for children whose BG levels are high as it may cause them to become even more elevated.
- Special event participation
Special event participation including service parties can include children with Type 1 Diabetes in consultation with their parents/guardians. Children's services need to provide alternatives when catering for special events, such as offering low sugar or sugar-free drinks and/or sweets.
- Communicating with parents
Services should communicate directly with the parents/guardians to ensure the children's individual Diabetes management plan is current. This should also include a separate excursion plan if required. Depending on the age of the child, establish a home-to-service means of communication to relay health information and any health changes or concerns. Setting up a communication book is recommended and where appropriate.

4.3. Melton City Council believes in ensuring the safety and wellbeing of children who are diagnosed with Diabetes, and is committed to:

- providing a safe and healthy environment in which children can participate fully in all aspects of the program
- actively involving the parents/guardians of each child diagnosed with Diabetes in assessing risks, and developing risk minimisation and risk management strategies for their child
- ensuring that all staff/educators and other adults at the service have adequate knowledge of Diabetes and procedures to be followed in the event of a Diabetes related emergency
- facilitating communication to ensure the safety and wellbeing of children diagnosed with Diabetes.

5. Responsibility/Accountability

5.1. The Approved Provider, according to Regulations is responsible for the implementation of the *Diabetes Policy*. This will be achieved through the Leadership Group and their service staff:

- *Diabetes Policy* is developed and implemented at the service
- Nominated Supervisor, Person in day to day charge, Responsible Person, educators, staff, students and volunteers at the service are provided with access to the *Diabetes Policy*
- programs delivered at services are inclusive of children diagnosed with Diabetes (refer to *Inclusion and Equity Policy*) and that children with Diabetes can participate in all activities safely and to their full potential
- parents/guardians of an enrolled child who is diagnosed with Diabetes are provided with access to the *Diabetes Policy* (including procedures) and the *Dealing with Medical Conditions Policy* (National Regulations 91)
- Nominated Supervisor, Person in day to day charge, Responsible Person, staff/educators and volunteers at the service are aware of the strategies to be implemented for the management of Diabetes at the service
- each enrolled child who is diagnosed with Diabetes has a current Diabetes management plan prepared specifically for that child by their Diabetes medical practitioner, at or prior to enrolment
- Nominated Supervisor, Person in day to day charge, Responsible Person, educators, staff, students, volunteers and others at the service follow the child's

Diabetes management plan in the event of an incident at the service relating to their Diabetes

- a Risk Minimisation Plan is developed for each enrolled child diagnosed with Diabetes in consultation with the child's parents/guardians and staff/educators, in accordance with National Regulations 90.
- a Communication Plan is developed for staff/educators and parents/guardians in accordance with National Regulations 90 and encouraging ongoing communication between parents/guardians and staff/educators regarding the management of the child's medical condition
- children diagnosed with Diabetes are not discriminated against in any way and are able to participate fully in all programs and activities at the service.

5.2. The Nominated Supervisor/Person in day to day charge, Responsible Person is responsible for:

- ensuring that the *Diabetes Policy* is implemented at the service
- compiling a list of children with Diabetes and placing it in a secure but readily accessible location known to all staff/educators. This should include the Diabetes management plan for each child
- following the strategies developed for the management of Diabetes at the service
- ensuring that all staff/educators, including casual and relief staff, are aware of children diagnosed with Diabetes, symptoms of low blood sugar levels, and the location of medication and Diabetes management plans
- following the child's Diabetes management plan in the event of an incident at the service relating to their Diabetes
- following the Risk Minimisation Plan for each enrolled child diagnosed with Diabetes
- following the Communication Plan for each enrolled child diagnosed with Diabetes
- ensuring that programmed activities and experiences take into consideration the individual needs of all children, including children diagnosed with Diabetes
- communicating with parents/guardians regarding the management of their child's Diabetes
- ensuring that children diagnosed with Diabetes are not discriminated against in any way and are able to participate fully in all programs and activities at the service.

5.3. All other staff/educators are responsible for:

- reading and complying with this *Diabetes Policy* and the *Dealing with Medical Conditions Policy*
- following the strategies developed for the management of Diabetes at the service
- following the Risk Minimisation Plan for each enrolled child diagnosed with Diabetes
- following the Communication Plan for each enrolled child diagnosed with Diabetes
- knowing which children are diagnosed with Diabetes, and the location of their medication and Diabetes management plans
- following the child's Diabetes management plan in the event of an incident at the service relating to their Diabetes
- communicating with parents/guardians regarding the management of their child's medical condition

- ensuring that children diagnosed with Diabetes are not discriminated against in any way and are able to participate fully in all programs and activities at the service.

5.4. Parents/guardians are responsible for:

- reading and complying with the *Diabetes Policy*, Diabetes management strategies and the *Dealing with Medical Conditions Policy*
- parents/guardians of children diagnosed with Type 1 Diabetes are responsible for:
 - providing the service with a current Diabetes management plan prepared specifically for their child by their Diabetes medical specialist team
 - working with the Nominated Supervisor, Person in day to day charge / Responsible Person's or other relevant staff/educators to develop a Risk Minimisation Plan for their child
 - working with the Nominated Supervisor Person in day to day charge / Responsible Person's or other relevant staff/educators to develop a Communication Plan
 - ensuring that they provide the service with any equipment, medication or treatment, as specified in the child's individual Diabetes management plan prior to commencement of care.

5.5. Volunteers and students, while at the service, are responsible for following the *Diabetes Policy* and its procedures.

6. References, Sources, Links to Legislation and Other Documents

6.1. Please refer to Reference and Sources page located on the Melton City Council Website.

<http://www.melton.vic.gov.au/Services/People/Children/Childrens-Services-policies-and-procedures/Sources-and-References>

6.2. Related service policies:

- *Administration of First Aid Policy*
- *Administration of Medication Policy*
- *MCC Child Safe Policy, Procedure and Code of Conduct*
- *Dealing with Medical Conditions Policy*
- *Enrolment and Orientation Policy*
- *Excursions and Service Events Policy*
- *Food Safety Policy*
- *Hygiene Policy*
- *Incident, Injury, Trauma and Illness Policy*
- *Inclusion and Equity Policy*
- *Nutrition and Active Play Policy*
- *Occupational Health and Safety Policy*
- *Privacy and Confidentiality Policy*
- *Supervision of Children Policy.*