

Warradale Community Children's Centre acknowledges the traditional custodians of the land we live on today and we pay our respects to the Aboriginal and Torrens Strait Islander People past, present and emerging.



Diabetes Management Policy

National Quality Standard (NQS)

Quality Area 2: Children's Health and Safety		
2.1	Health	Each child's health and physical activity is supported and promoted
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	Safety	Each child is protected
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard

Education and Care Services National Regulations

Children (Education and Care Services) National Law NSW	
90	Medical conditions policy
90(1)(iv)	Medical Conditions Communication Plan
91	Medical conditions policy to be provided to parents
92	Medication record
93	Administration of medication
94	Exception to authorisation requirement—anaphylaxis or asthma emergency
95	Procedure for administration of medication
96	Self-administration of medication

Aim

At Warradale Community Children's Centre, we have a strong commitment to providing a safe and healthy environment that is inclusive for all children, staff, visitors, and family members that are at diagnosed with diabetes. The aim of this policy and procedure is to minimise the risk of a diabetic medical emergency whilst at our centre, also ensuring that educators can support the management of the illness.

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Description

Diabetes in children can be a diagnosis that has a significant impact on families. It is imperative that educators and staff in our centres understand the responsibilities of diabetes management. Most children will require additional support from educators to manage their diabetes whilst in attendance.

- Type-1 Diabetes is an autoimmune condition, which occurs when the immune system damages the insulin producing cells in the pancreas. This condition is treated with insulin replacement via injections or a continuous infusion of insulin 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 affects between 85 and 90 per cent of all cases of diabetes and usually develops in adults over the age of 45 years, but it is increasingly occurring at a younger age. **Type-2 diabetes is very unlikely to be seen in children under the age of 4 years old.**

Duty of Care

Warradale Community Children's Centre has a legal responsibility to provide.

- a. A safe environment
- b. Adequate Supervision

Educators, including casual and relief staff, need to know enough about diabetes to ensure the safety of children (especially in regards to hypoglycaemia and the increased risk of a hypoglycaemia event when involved in sport and exercise).

Implementation

We will involve all educators, families, and children in regular discussions about medical conditions and general health and wellbeing throughout our curriculum. Warradale Community Children's Centre will adhere to privacy and confidentiality procedures when dealing with individual health needs.

It is important that communication is open between families and educators so that management of diabetes is effective.

Children diagnosed with diabetes will not be enrolled into the centre until the child's medical plan is completed and signed by their Medical Practitioner and the relevant staff members have been trained on how to manage the individual child's diabetes.

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It is imperative that all educators and volunteers at the centre follow a child's Medical Management Plan in the event of an incident related to a child's specific health care need, allergy or medical condition.

Leadership will ensure that:

- Parents/guardians of an enrolled child who is diagnosed with diabetes, are provided with a copy of the Diabetes Management Policy and the Medical Conditions Policy.
- All staff members including volunteers are provided with a copy of the Diabetes Management policy along with the Medical Conditions Policy that are reviewed annually.
- A copy of this policy is provided and reviewed during each new staff member's induction process when a child with diabetes is present at the centre.
- All staff members have completed first aid training approved by the Education and Care Services National Regulations at least every 3 years and is recorded, with each staff members' certificate held in their file.
- When a child diagnosed with diabetes is enrolled, all staff will attend regular training on the management of diabetes and, where appropriate, emergency management of diabetes.
- At least one staff member who has completed accredited training in emergency diabetes first aid is always present in the Centre, whenever children with diabetes are being cared for.
- There is a staff member who is appropriately trained to perform finger-prick blood glucose or ketone monitoring and knows what action to take if these are abnormal.
- The family supplies all necessary glucose monitoring and management equipment.
- A Medical Conditions Risk Minimisation and communication plan is completed for each child diagnosed, outlining procedures to minimise the risks involved. The plan will cover the child's known triggers and where relevant other common triggers which may lead to a diabetic emergency.
- All staff members are trained to identify children displaying the symptoms of a diabetic emergency and know the location of the Diabetic Management Plan as well as the Emergency Management Plan.
- All staff, including casual and relief staff, are aware of children diagnosed with diabetes attending the centre, and the symptoms of low blood sugar levels.
- Each child with type -1 diabetes has a current individual Diabetes Management Plan prepared by the individual child's diabetes medical specialist team, at or prior to, enrolment.

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- Ensure that a child's Diabetes Management Plan is signed by a Registered Medical Practitioner and inserted into the enrolment record for the child. This will describe any prescribed medication for that child as well as the emergency management of the child's medical condition.
- Before the child's enrolment commences, the family will meet with the Director and educators to begin the communication process for managing the child's medical condition, in consultation with the registered medical practitioner's instructions.
- A communication plan is developed for staff and parents/guardians encouraging ongoing communication between parents/guardians and staff regarding the management of the child's medical condition, the status of the child's medical condition, this policy and its implementation within the centre, prior to the child starting at Warradale Community Children's Centre.
- Individual Diabetes Management and Emergency Medical Management Plans will be displayed in key locations throughout the centre.
- A staff member accompanying children outside the centre carries the appropriate monitoring equipment, any prescribed medication, hypo treatment, a copy of the Diabetes Management and Emergency Medical Management Plan for children diagnosed with diabetes, attending excursions and other events.
- The programmes delivered at the centre are inclusive of children diagnosed with diabetes and that children with diabetes can participate in all activities safely and to their full potential.
- All staff and volunteers are aware of the strategies to be implemented for the management of diabetes at the centre in conjunction with each child's diabetes management plan.
- Updated information, resources and support is given to families for managing childhood diabetes should it come to light.
- That no child diagnosed with diabetes attends the centre without the appropriate monitoring equipment and any prescribed medications.
- Meals, snacks, and drinks that are appropriate for the child and are in accordance with the child's Diabetes Management plan are available at all times.
- Contact Diabetes Australia for further information to assist Educators to have comprehensive understanding about treating diabetes.

Educators will:

- Read and comply with this Diabetes Management Policy and the Medical Conditions Policy.

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- Know which children are diagnosed with diabetes, and the location of their monitoring equipment, Diabetes Management and Emergency Management/Medication Plans and any prescribed medications.
- An appropriately trained staff member will perform finger-prick blood glucose or ketone monitoring and will act by following the child's diabetes management plan if these are abnormal.
- Communicate with parents/guardians regarding the management of their child's medical condition and keep a daily log of blood glucose levels after finger prick readings.
- Ensure that children diagnosed with diabetes are not discriminated against in any way and are able to participate fully in all programmes and experiences at the centre.
- Follow the strategies developed for the management of diabetes at the service.
- Follow the Risk Minimisation Plan for each enrolled child diagnosed with diabetes.
- Ensure, with permission from the parent, a copy of the child's Diabetes Management Plan is visible and known to staff in a service.
- Take all personal Diabetes Management Plans, hypo treatment, monitoring equipment, medication records, Emergency Management/Medication Plans and any prescribed medication on excursions, and other events outside the centre.
- Recognise the symptoms of a diabetic emergency and treat appropriately by following the Diabetes Management Plan and the Emergency Management /Medication Plan.
- A suitably trained and Diploma qualified Educator will administer prescribed medication if needed according to the Emergency Management/ Plan in accordance with Warradale Community Children's Centre's Administration of Medication Policy.
- Identify and where possible minimise possible triggers as outlined in the child's Diabetes Management Plan and Risk Minimisation Plan.
- Ensure that children with diabetes can participate in all activities safely and to their full potential.
- Increase supervision of a child diagnosed with diabetes on special occasions such as excursions, incursions, parties, and family days.
- Regularly check and record the expiry date of the prescribed medication relating to the medical condition.
- Provide information to the centre's community about resources and support for managing childhood diabetes.

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Families will ensure they provide the centre with:

- Details of the child's health problem, treatment, medications, and allergies.
- Their doctor's name, address and phone number, and a phone number for contact in case of an emergency.
- A Diabetes Care Plan and Emergency Medical/Medication Plan following enrolment and prior to the child starting at the centre which should include:
 - a) When how and how often the child is to have finger-prick or ketone monitoring
 - b) What meals and snacks are required including timing, food content, and amount to be given.
 - c) What activities and exercise the child can or cannot do
 - d) Whether the child can go on excursions and what provisions are required
 - e) What symptoms and signs to look for that might indicate hypoglycaemia (low blood glucose) or hyperglycaemia (high blood glucose)
 - f) What action to take including emergency contacts and what first aid to implement
 - g) An up-to-date photograph of the child
- Develop an individual Medical Conditions Risk Minimisation Plan in conjunction with the Director and educators.
- A copy of the child's Diabetes Management Plan and an Emergency Management /Medication Plan developed and signed by a Registered Medical Practitioner for implementation within the Centre.
- The appropriate monitoring equipment needed according to the Diabetes Management Plan.
- An adequate supply of emergency medication for the child at all times according to the Emergency Management Plan.
- Information and answering any questions regarding their child's medical condition.
- Any changes to their child's medical condition and provide a new Diabetes Management Plan in accordance with these changes.
- All relevant information and concerns to educators, for example, any matter relating to the health of the child.

Diabetic Emergency

A diabetic emergency may result from too much or too little insulin in the blood. There are two types of diabetic emergency.

- a) Very low blood sugar (hypoglycaemia, usually due to excessive insulin);
- b) Very high blood sugar (hyperglycaemia, due to insufficient insulin).

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The more common emergency is hypoglycaemia. This can result from too much insulin or other medication, not having eaten enough of the correct food, unaccustomed exercise or a missed meal.

In a medical emergency involving a child with diabetes, staff should immediately dial 000 for an ambulance and notify the family in accordance with the Regulation and guidelines on emergency procedures and administer first aid or emergency medical aid according to the child's Diabetes Management or Emergency Plan.

In the event that a child suffers from a diabetic emergency, leadership and educators will:

- Follow the child's Diabetic Emergency Plan.
- If the child does not respond to steps within the Diabetic Emergency Plan call an ambulance immediately by dialling 000.
- Continue first aid measures.
- Contact the parent/guardian when practicable.
- Phone the emergency contact if the parents or guardian can't be contacted when practicable.
- Notify the regulatory authority within 24 hours.

Signs and Symptoms

HYPOGLYCAEMIA

Is caused by low blood sugar. The person may:

- Feel dizzy, weak, tremble and hungry
- Look pale and have a rapid pulse
- Sweating profusely
- Numb around lips and fingers
- Appear confused or aggressive
- Unconsciousness

HYPERGLYCEMIA

Is caused by high blood sugar. The person may:

- Feel excessively thirsty
- Have a frequent need to urinate
- Have hot dry skin, a rapid pulse, drowsiness
- Have the smell of acetone (like nail polish remover) on the breath

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- Unconsciousness

Source

Australian Children's Education & Care Quality Authority (2014).
 Guide to the Education and Care Services National Law and the Education and Care Services National Regulations
 ECA Code of Ethics
 Staying Healthy in Child Care. 5th Edition
 Brompton Children's Centre
 Juvenile Diabetes Research Foundation
www.jdrf.org.au
 Diabetes Kids and Teens
www.diabeteskidsandteens.com.au
 Care of Young Children With Diabetes in the Child Care Setting: A Position Statement of the American Diabetes Association
<http://main.diabetes.org/dorg/PDFs/Advocacy/Discrimination/ps-care-of-young-children-with-diabetes-in-child-care-setting.pdf>
 As 1 Diabetes - <http://as1diabetes.com.au/>
 Revised National Quality Standards
 NDSS- Diabetes in schools training
<https://www.diabetesinschools.com.au/training-and-support/>

Record of Policy Adoption and Amendment:

Version	Date	Details	Author	Next Review Date
1.0	13/5/2020	Policy developed	Trish Cook	May 2022
1.1	24/7/23	Acknowledgment on top and regulations, added link to diabetes in schools training	Michelle and Pamela	24/7/24
1.2	Sept 2024	No changes	Lori Hay	Sept 2025

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