

Position Statement

MANAGEMENT OF TYPE 1 DIABETES IN THE NSW & ACT SCHOOL SYSTEM

Pre-school and school aged children living with type 1 diabetes need to monitor and manage their condition during the day whilst at school and attending school endorsed extracurricular activities. Younger children may need to be fully supported whilst older children may be working towards independence. Schools, pre-schools and organised child care facilities have an obligation to provide a safe environment for students with diabetes to monitor and manage their diabetes. This position statement aims to provide support and guidance to assist schools and pre-schools (including child care facilities) to meet the healthcare needs of students living with type 1 diabetes. Improving the understanding and awareness of diabetes management in schools and pre-schools will assist young people with their condition and enhance their overall educational experience.

Please note: for the purposes of this document, 'school' is taken to mean any childcare or educational institution for ages 0-18 years.

BACKGROUND

All people living with type 1 diabetes require administration of insulin to live. Type 1 diabetes is more commonly diagnosed in children, sometimes from birth. In NSW and ACT, there are 3,131 school aged individuals living with type 1 diabetes (Table 1, NSW National Diabetes Service Scheme Data as at December 2016).

Effective early management from the outset of diagnosis will minimise or prevent the risk of long term complications associated with diabetes. Accordingly, it is necessary that school staff and those caring for children understand the goals of diabetes management and the student's individual diabetes management plan to ensure continuity of care. The national evidence-based clinical care guidelines for type 1 diabetes in children, adolescents and adults (2011) states that adolescents with type 1 diabetes have poorer functional academic outcomes than the general population, suggesting cognitive abilities may be affected by type 1 diabetes. The impact of type 1 diabetes on psychosocial functioning whilst at school particularly among young people, is widely recognised (The National evidence-based clinical care guidelines for type 1 diabetes in children, adolescents and adults, 2011).

The management of type 1 diabetes is based on the regular monitoring of blood glucose levels (BGL's) and administration of insulin. Variable food intake, activity levels, unpredictable appetites, growth spurts and puberty all affect BGL's and disrupt optimal diabetes management.

TABLE 1 – BREAKDOWN OF SCHOOL AGED CHILDREN LIVING WITH TYPE 1 DIABETES

| School Band | Age (years) | Number of Children | |
|----------------------|-------------|--------------------|------------|
| | | NSW | ACT |
| Preschool & day care | 0-4 | 115 | 4 |
| K – 2 | 5-7 | 289 | 22 |
| 3-4 | 8-9 | 326 | 26 |
| 5-6 | 10-11 | 429 | 30 |
| High school 7-12 | 12-18 | 1783 | 107 |
| Total | | 2,942 | 189 |

DIABETES NSW & ACT INITIATIVES

The following initiatives are now being developed by Diabetes NSW & ACT to support schools to meet the healthcare needs of children living with type 1 diabetes:

- Diabetes Teacher Training Seminars
- Education Resources for Schools and Parents
- As 1 Diabetes Website (www.as1diabetes.com.au)
- As 1 Kids Magazine
- Advocacy: bringing together parents/guardians, hospitals, schools, child-care centres, teachers/carers and the government.

POSITION STATEMENT

This position statement has been created to provide school communities with advice and support regarding the care of children living with type 1 diabetes whilst they are at school and attending school endorsed extracurricular activities. The position statement is intended to assist schools create an environment where children feel empowered, engaged and supported in the monitoring and management of their condition.

There are a number of services and supports that will facilitate the student experience. The roles and responsibilities of key stakeholders will be described. In many cases, these are complimentary between the various stakeholder groups.

Roles and Responsibilities

Diabetes NSW & ACT

Diabetes NSW & ACT is Australia's largest member-based non-profit organisation dedicated to people living with or at risk of diabetes. Diabetes NSW & ACT works proactively to improve the day-to-day lives of people living with diabetes, help prevent diabetes-related complications and make things easier by educating carers, employers and the general public.

Diabetes NSW & ACT strives to educate the community and implement positive, supportive and motivating programs for children living with type 1 diabetes.

Diabetes NSW & ACT is committed to:

- Providing access to timely educational resources to parents/guardians and all teaching staff in schools and child care-centres through the Teacher Training Seminars.
- Confirming the rights of a child to manage a chronic condition at school and the obligations of those within the education system.
- Outlining a process of advocacy for parents/guardians in the event of issues arising in the school environment.
- Actively supporting and encouraging parents/guardians with the transition of their child into the school system.
- Facilitating communication between parents/guardians and teaching staff to ensure the safety and wellbeing of children living with type 1 diabetes.

Parents/Guardians will:

- Inform the school of their child's condition upon enrolment. If the student is already enrolled, the school should be informed as soon as possible after diagnosis.
- Contribute to the development of the school-based diabetes management care plan and the emergency/risk management plan.
- Ensure the school has the current and appropriate diabetes management care plan for their child.
- Provide all the equipment the child needs to be safely supported at school which may include medication, blood glucose meter with test strips, insulin pump consumables and hypo treatment foods/drinks.
- Provide guidance and support to school staff when concerns or issues arrive with their child's management of diabetes.
- Provide consent to contact the appropriately qualified health professionals about their child's management.

Education Systems will:

- Support the treatment of a child with diabetes in the school or child-care settings to be equivalent to the obligations for those with other potentially life threatening conditions.
- Actively support the rights and responsibilities as outlined above for school principals and school staff.
- Ensure that policies and procedures related to the management of children with type 1 diabetes are:

- Evidence-based and reflect best practice
- Require school staff undertake training to provide the knowledge and skills necessary to provide a safe environment

School Principals will:

- Co-ordinate a safe and encouraging school environment that:
 - Recognises the student and family are covered under the Disability Discrimination Act and Disability Standard of Education.
 - Includes all children with health conditions in school activities.
 - Supports children capable of self-administering medication.
 - Ensures the child's diabetes management plan is adhered to in the school setting.
 - Ensures there is adequate staff training and support for the child.
- Ensure that all staff, including casual staff, are aware of children diagnosed with diabetes, symptoms of low BGL's and the location of medication including the hypo kit.
- Communicate with parents/guardians and health care teams in regards to the child's diabetes management plan in an agreed manner.

School Staff will:

- Have a comprehensive understanding of the requirements of the child living with type 1 diabetes in their classroom.
- Be informed and educated about type 1 diabetes.
- Understand the signs and symptoms of a hypoglycaemic (hypo) and hyperglycaemic (hyper) episode.
- Assist the child with diabetes if a hypo or hyper episode occurs and treatment is needed.
- Support the child living with type 1 diabetes in management of their condition where the child is unable to do so them self. This may include blood glucose testing and insulin injecting.

Diabetes Healthcare Team will:

(This team may include the hospital based diabetes healthcare team or other supporting personnel involved with the child's management)

- Assist schools in developing a child's individual diabetes management plan with parental consultation.
- Support and assist parents and school staff in training and education about type 1 diabetes.

REFERENCES

As 1 Diabetes – Diabetes NSW & ACT <http://as1diabetes.com.au/index.php/carer/teachers-and-schools/>

Guidelines for Queensland Schools – Diabetes basics, Diabetes Queensland

Mastering Diabetes in Schools and Early Childhood Settings, Diabetes Victoria

NSW National Diabetes Service Scheme (NDSS) Data - <http://www.diabetesmap.com.au/#/>

National evidence-based clinical care guidelines for type 1 diabetes in children, adolescents and adults, Australian Government Department of Health and Ageing, Canberra 2011. Craig ME, Twigg SM, Donaghue KC, Cheung NW, Cameron FJ, Conn J, Jenkins AJ, Silink M, for the Australian Type 1 Diabetes Guidelines Expert Advisory Group.

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