

## Rural Support Service - Diabetes Service

### Regional LHN Paediatric Diabetes and DECD Pathway

#### Referral via the Country Referral Unit should include:

- > Discharge summary
- > Prescribed medications
- > Equipment provided (e.g. CGM, BGM and insulin injection device/s)
- > Diabetes action plan for early childhood or school setting
- > Medication authorisation form.

#### Step 1: Phone parents/carers

##### Discuss

- > Referral received and your local role (if new to your service)
- > Resources received
- > Any immediate clinical concerns and educational areas that require follow up
- > Child's capacity to participate and take responsibility for aspects of self-management
- > Follow up appointment based on clinical need
- > National Diabetes Services Scheme (NDSS) Diabetes in Schools program <https://www.diabetesinschools.com.au/training-and-support> and access by school staff to level 1 (Introductory) and level 2 (Intermediate) training online
- > NDSS Diabetes in Schools program level 3 training (individualised skills training) for designated school staff. Adaption of NDSS Diabetes in Schools program for early childhood staff
- > Parent/carer responsibility to contact the early childhood centre or school to arrange a meeting onsite or via videoconference to facilitate your delivery of the NDSS Diabetes in Schools program level 3 training (individualised skills training) for designated school staff or an adaption of the program for early childhood centre staff.

**Step 2: NDSS Diabetes in School program level 3 (individualised skills training)** with designated school staff, child and parents/carers or adaption of the program for early childhood centre staff, child and parents/carers (onsite or via videoconference).

##### Discuss

- > Child's diagnosis and treating medical team
- > Your local role and local services
- > NDSS Diabetes in Schools program <https://www.diabetesinschools.com.au/training-and-support> and access by school staff to level 1 (Introductory) and level 2 (Intermediate) training online
- > NDSS Diabetes in Schools program level 3 training (individualised skills training) for designated school staff or adaption of the program for early childhood centre staff including reference to:
  - > Diabetes action plan for early childhood or school setting
  - > Medication authority, and
  - > Equipment required
- > Staff responsibilities of the early childhood centre or schools
- > Parent/carer responsibilities (e.g. emergency contacts, any changes/updates to diabetes action plan, medication authority, equipment)
- > Child's capacity to participate and take responsibility for aspects of self-management
- > Location of equipment to be provided (e.g. blood glucose / ketone monitoring, continuous glucose monitoring / insulin administration devices, hypo kits)
- > Assistance / supervision required for blood glucose / ketone monitoring, continuous glucose monitoring / insulin administration and where this will take place
- > Assistance / supervision required for meals and snacks and assistance with insulin dose calculations
- > Assistance / supervision required for physical activity and additional planning for excursions/camps/ activities.

#### Step 3: Follow up and maintenance

- > Follow up (either phone or in person) with child, parent/carer and school in 2-4 weeks (or as negotiated) to identify any diabetes action plan implementation issues or general concerns
- > Communicate with referring team regarding outcomes of child, parent/carer and school visits
- > Annual review to provide local support and review / update diabetes action plan and medication authority as required.

## Guiding document and checklist

**The NDSS Diabetes in School program level 3 (individualised skills training) with designated school staff, child and parents or adaption of the program for early childhood centre staff, child and parents/carers, to include:**

### Explain

Children with both type 1 and type 2 diabetes need:

- > Emergency treatment, supervision and support in the event of a low blood glucose level
- > Unrestricted access to emergency treatment for low blood glucose
- > To eat meals (carbohydrate) and snacks on time
- > To eat carbohydrate snacks at additional times if involved in vigorous physical activity for more than 30minutes
- > Unrestricted toilet privileges and access to drinking water
- > Additional planning with parents/carers to accommodate changes in school routine (e.g. excursions, camps and other activities)
- > Extra supervision if blood glucose is higher than target
- > Support, encouragement and privacy (if requested) when blood glucose / ketone monitoring, continuous glucose monitoring and administering insulin (e.g. insulin syringe/insulin pen/insulin pump).

### Discuss:

- > DECD Diabetes Action Plan and Medication Authority
- > hypoglycaemia management +/- GlucaGen® Hypo Kit®
- > hyperglycaemia management, blood glucose / ketone / continuous glucose monitoring (e.g. assistance/supervision required and location of resources)
- > insulin storage / administration (e.g. assistance/supervision and location of resources)
- > meals and snacks (e.g. assistance/supervision with insulin dose calculations)
- > physical activity (e.g. specific instructions for additional carbohydrate / insulin alteration)
- > additional plans required (e.g. excursions / camps / swimming lessons/ other activities).

### Encourage

- > the designated early learning centre or school staff, child and parents to use a communication book or diary
- > access to further information and resources via the NDSS website at <https://www.diabetesinschools.com.au/resources-and-information/>