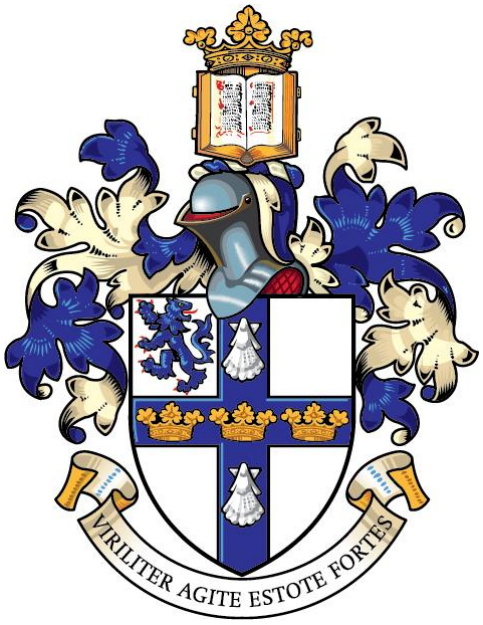


Culford School

The Management of Children with Diabetes

Reviewed June 2026 E. Fergus-Hillman
Next review: June 2027
V2.0

Contents

Spare Equipment to be kept at the School Health Centre 3
Blood glucose levels 3
    Hypoglycaemia 3
Hyperglycaemia 3
If the blood glucose is above 10mmols/L 3
Managing a child with hypoglycaemia (Low blood sugars) 4
    How to recognise a Hypo 4
    Treating a Hypo 4
    When conscious 4
        Fresh fruit juice 4
    When unconscious 4
References 5

Reviewed June 2026 E. Fergus-Hillman
Next review: June 2027
V2.0

Aim

Pupils with diabetes will be individually and appropriately supported to ensure they can safely access all areas of school life while managing their diabetes.

- The school nurse will liaise with the parents, pupil and supporting diabetic services to form the pupils individual school care plan. This is updated annually and more frequently when changes are made. The school care plan is stored on iSAMS/Pupil Manager. The medical red flag system ion iSAMS will identify the pupil as diabetic.

- All staff with pupil facing roles complete annual allergy and anaphylaxis training with additional Culford specific arrangements highlighting routine and emergency procedures

- Staff should be familiar with each pupil's individual health care plan (IHCP) as diabetes management is personal and specific. It may include Continuous Glucose monitoring and Insulin Pumps.

Spare Equipment to be kept at the School Health Centre

- Glucometer, instructions, test strips
- Ketone monitor and testing strips
- Dextrose tablets
- Glucogel
- Insulin
- If prescribed for that pupil; CGM, spare insulin pump, emergency glucagon injection

Blood glucose levels

Aim to keep blood glucose level close to the normal range (4 –10mmols/L)

Blood glucose levels are affected by

- Insulin
- Food intake
- Activity

Hypoglycaemia

If blood glucose below 4mmols, although treat symptomatically if child has any of the symptoms below.

Hyperglycaemia

If the blood glucose is above 10mmols/L - check ketones

- Ketones: below 0.6mmol/L - Normal
- Ketones: 0.6-1.5mmol/L- Slightly high, recheck glucose and ketones in 2 hours
- Ketones: 1.6 -2.9 mmol/L - Increased risk of Diabetic Ketoacidosis (DKA) Contact GP as soon as possible
- Ketones: 3.0mmol/L and above - Dangerously high, seek immediate emergency medical assistance

Reviewed June 2026 E. Fergus-Hillman
Next review: June 2027
V2.0

Managing a child with hypoglycaemia (Low blood sugars)

Hypoglycaemia (Hypo) is the most common short-term complication of the treatment in diabetes and occurs when blood glucose levels fall too low.

Hypos are especially likely to happen before meals. This can happen as a result of:

- Too much insulin
- Not enough food to fuel an activity
- Too little food at any stage of the day
- A missed meal or delayed meal or snack
- Cold weather
- Vomiting

How to recognise a Hypo

Hypos can happen quickly, but most children will have warning signs that will alert them, or people around them, to a hypo.

These warning signs can include hunger, sweating, drowsiness, glazed eyes, trembling/shaking, headache, lack of concentration, mood changes - angry/aggressive, fitting/seizures.

The symptoms can be different for each child and the child's parents/guardian should inform the school and a record made in their school nursing notes.

Treating a Hypo

NEVER LEAVE THE CHILD ALONE. It is important that the hypo is treated quickly.

When conscious

- If able to swallow Immediately give something sugary, eg:

Lucozade	Fresh fruit juice
Fizzy drink (non-diet)	Glucose tablets

Follow this with a longer acting carbohydrate to prevent the blood sugars from dropping again.

Two plain biscuits	Cereal bar
muffin	Portion of fruit e.g. Banana
One individual mini Pack of dried fruit	Scone
scone	Roll/sandwich

If the child still feels hypo after 15mins, something sugary should be given again. When the child has recovered, give them some starchy food as above and you may want to check their blood sugar levels.

- If unable to swallow, squeeze 1/3rd of a tube of Glucogel into the side of the mouth and rub the cheek
- Inform the Health Centre staff immediately

When unconscious

- NEVER LEAVE THE CHILD ALONE
- Place in recovery position
- Phone 999

Reviewed June 2026 E. Fergus-Hillman
Next review: June 2027
V2.0

- Inform parents

References

Supporting pupils at school with medical conditions. Statutory guidance for governing bodies of maintained schools and proprietors of academies in England. 2014 updated 2017 Dept of Education.

https://assets.publishing.service.gov.uk/media/5ce6a72e40f0b620a103bd53/supporting-pupils-at-school-with-medical-conditions.pdf

Equality Act 2010 https://www.legislation.gov.uk/ukpga/2010/15/contents

Children Act 1089 (section 3) https://www.legislation.gov.uk/ukpga/1989/41/contents

Children Act 2004 (section 10) https://www.legislation.gov.uk/ukpga/2004/31/contents

Reviewed June 2026 E. Fergus-Hillman
Next review: June 2027
V2.0