

## Checklist: School Personnel Training by Parent

*This document is a checklist to assist parents to work together with school staff to execute the prescribed diabetes management of their child at school. After completion, a copy of the document should become part of the student's health record. Student*

*name..... Date...../...../20.....*

<i>Name of school personnel</i>	<i>Role</i>

### 1. Prescribed Medical Orders

The student's Diabetes Management Plan and Concise Diabetes Action Plan(s) have been completed and submitted.

### 2. Pre-meeting learning

The T1D e-learning modules have been completed by the appropriate school personnel.

### 3. Meeting

- Acknowledgment of school willingness to provide optimal support for the student.
- Discuss any previous experiences and perceptions of diabetes with school staff.
- Explain WHY it is important for blood glucose levels to be in normal range during school hours – learning, mood, long term health.
- Discuss individual medical requirements – ISPAD best practice management, required responses and outcomes.
- Acknowledgement of impact of T1D on the family.
- Acknowledgment of student's individual strengths and challenges.
- Dispel myths of "learning responsibility" of self-management, importance of supervision regardless of ability.

### 4. Individual issues re reasonable adjustments

- Identify and answer any questions re T1D e-learning modules and/or T1D Parent Guide.
- Definition of roles - who is/are the parent agent(s) managing insulin administration and undertaking complex medical care
- Hypoglycaemia - dispel concerns re severe lows and loss of consciousness, avoidance of overtreatment.
- Continuous Glucose Monitoring – lag time, predictive arrows, followers, need for BGL check (as per DMP).
- Looping, predictive alerts
- Day to day routine - i.e. appropriate times to test BGL or check CGM, timing of insulin dose in relation to meals and breaks, location of insulin administration and supervision process, privacy, normalisation.
- Sport or exercise management (individualised for child and according to DMP).
- Recording – insulin dose and data (glucose level, carbs).
- Communication – parent as first contact, escalation points, consent, contact details.
- Documentation
- Privacy and Consent- no information or personal data to be shared without informed consent.
- Important role of schools and Duty of Care – keep free from foreseeable harm, BG check during hypo.
- School camps and excursions – forward planning.
- Acknowledgement of the only parties responsible to the student - parent, school and treating medical team.

### 5. Confidentiality

The school will not disclose the health information collected through this consultation process to an external entity unless the parent has provided written consent or when required by, or permitted under, law.

Signed

Parent.....School rep.....Date.....