

<b>POLICY/PROCEDURE NAME &amp; REVIEW PROCESS</b>	<b>DEALING with DIABETES POLICY</b> This policy and procedure has been created to provide all stakeholders with clear guidelines and transparency to our practices and procedures. We welcome feedback and input from all stakeholders at any time and this policy is subject to review based on feedback or due date of annual review.
<b>NATIONAL QUALITY STANDARD</b>	<b>QUALITY AREA 2- CHILDREN'S HEALTH AND SAFETY</b> 2.1 Health 2.1.2- Health practices and procedures <b>2.2 Safety</b> 2.2.2 – Incident and emergency management
<b>NATIONAL LAW AND REGULATIONS</b>	90-Medical Conditions policy 91-Medical conditions policy to be handed to parents 92- Medication 93- Administration of Medication 95- Procedure for Administration 136- First aid qualifications 170-Policies and procedures to be followed 171-Policies and procedures to be kept available 172- Notification of change to policies or procedures
<b>RELATED POLICIES and RECORDS</b>	<ul style="list-style-type: none"> <li>Change of details record</li> <li>Enrolment record</li> <li>Incident injury trauma and illness record</li> <li>Incident review and reflection record</li> <li>Medical administration record</li> <li>Medical risk minimisation and communication record</li> </ul>
<b>SCOPE OF POLICY</b>	This policy applies to all children, educators, staff, families, management, students, volunteers, and visitors at our service.
<b>AIM OF POLICY</b>	To ensure that our service has strong guidelines, procedures, and practices in place regarding the management of diabetes for all children who present at the service with diabetes. Our aim is to support and monitor the health and wellbeing of the child. Our aim is to provide a clear policy, implement the policy, support practices relating to the policy, train staff regarding the policy and maintain and update the compliance of the policy for all our stakeholders.
<b>SERVICE IMPLEMENTATION</b>	<b>Implementation</b> Diabetes is a chronic condition where the levels of glucose (sugar) in the blood are too high. Glucose levels are normally regulated by the hormone insulin. The most common form of diabetes in children is <b>Type 1</b> . The body's immune system attacks the insulin producing cells so insulin can no longer be made. People with Type 1 diabetes need to have insulin daily and test their blood glucose several times a day, follow a healthy eating plan and participate in regular physical activity. <b>Some symptoms of Type 1 Diabetes</b> <ul style="list-style-type: none"> <li>Being thirsty and drinking much more than usual.</li> <li>Going to the toilet (to pass urine) more often.</li> <li>Feeling tired and low on energy.</li> <li>Unexplained weight loss.</li> <li>Mood changes.</li> </ul> Type 1 diabetes is managed by replacing the insulin your body can no longer make. Insulin is given by injection or by using an insulin pump. As well as taking insulin, patients will need to check their blood glucose levels regularly, follow a healthy eating plan, and stay physically active. <b>Type 2 diabetes</b> occurs when the body resists the effects of insulin and cannot make enough insulin to maintain blood glucose levels within the target range. This leads to high blood glucose levels. <b>Some symptoms of Type 2 Diabetes.</b> <ul style="list-style-type: none"> <li>Being thirsty and drinking more than usual.</li> <li>Going to the toilet (to pass urine) more often.</li> <li>Feeling tired and low on energy.</li> </ul>

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- Sores or cuts that will not heal.
- Blurred vision.
- Itching and skin infections.
- Pain or tingling in the legs or feet.

Type 2 diabetes is managed with healthy eating and regular physical activity. Over time, you may also need glucose-lowering medications (tablets or injectable medications). As diabetes progresses, some people will need insulin injections to help keep their blood glucose levels in the target range.

#### On enrolment

The nominated supervisor will discuss with families if there are any existing diagnosed illness with the child/ren enrolling. Several issues must be considered when a child with a diagnosed health care need, allergy or relevant medical condition is enrolled at the service. Key requirements must be in place before the child commences attending the service:

- Children presenting with diabetes cannot be enrolled at the service unless a **medical management plan** has been implemented and signed by a medical practitioner.
- A **medical risk minimisation and communication record** and a **medical administration record** is completed in conjunction with families and has been communicated to all educators in the service.
- Families will be presented with **dealing with diabetes policy** on enrolment.
- Child must not attend if medication is not accompanied with child on days of attendance.
- The same process will apply to **educators** who present with diabetes. They will fill in medical management plan signed by a medical practitioner, a **medical risk minimisation and communication record** and a **medical administration record** must be completed, and staff must always have medication with them whilst working.
- While developing the **medical risk minimisation and communication record** the service will implement procedures where possible to ensure children with diabetes do not suffer any adverse effects from their condition while at the service:

We will ensure the following:

- Must not let the child with diabetes miss a meal or partake of a meal a meal with too little carbohydrate.
- Ensure they do not partake in extra strenuous or unplanned physical activity.
- Not have too much insulin or medication for diabetes.
- Be aware of vomiting.
- Children with Type 1 diabetes may also need to limit their intake of sweet foods.
- The service will ensure information about the child's diet including the types and amounts of appropriate foods forms a part of the **medical risk minimisation and communication record** and will ensure that the service cook has a copy of this record.
- Only suitably trained staff will administer insulin and perform finger prick monitoring.

#### INSULIN

##### Storage

- Store unopened insulin on its side in the fridge.
- Do not allow the insulin to freeze.
- Once opened, insulin may be kept at room temperature (less than 30 degrees) for up to 28 days.
- The stability of insulin can be impaired by extreme temperature. Avoid leaving insulin in temperatures over 30 degrees such as in direct sunlight.

##### Do not administer insulin if:

- Clear insulin has turned cloudy.
- The insulin has reached its used by date.
- The insulin has been frozen or exposed to high temperatures.
- Lumps or flakes are seen in the insulin.
- The insulin has been open for longer than 28 days.

##### Sharps disposal

Used syringes, pens and lancets must be disposed of in an approved sharps container that is puncture proof and has a secure lid.

In the event of major concerns regarding insulin levels of a child or educator that cannot be controlled or if a child or educator is displaying symptoms of a Hypo an ambulance will be called immediately.

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- We will follow the procedure as per child or educators' **medical risk minimisation and communication record**.
- Ensure that a qualified first aid trained educator provides immediate first aid which will be outlined in the child's **medical risk minimisation and communication record**.
- Call an ambulance by dialling 000 if the child or educator does not respond to the first aid and CPR if the child or educator stops breathing.
- Alert approved provider/ nominated supervisor as soon as is practical after child has been attended to.
- Contact the parent/guardian of the child or parent/partner of educator as soon as child or educator is attended to by ambulance or have another educator call parent/guardian or parent/partner or the emergency contact in absence or inability to contact parent/guardian.
- Approved provider will inform regulatory authority on the NQAITS portal within 24 hours after the event.

#### **Medical Management Plan:**

A document that has been prepared and signed by a doctor that describes symptoms, causes, clear instructions on action and treatment for the child's specific medical condition and includes the child's name and a photograph of the child.

The Medical Management Plan must include the following:

- Child's name.
- Date of birth.
- Recent photograph.
- Information on the child's medical condition.
- Symptoms and consequences of the condition.
- Indicators of the need for medical intervention or treatment.
- Emergency contact people and phone numbers (including parents/guardians and child's medical practitioner).
- Clear instructions to cover all foreseeable circumstances including management in the service (indoors and outdoors) and on excursion.
- Emergency procedures.
- Specific information about medication including administration, storage, timing, dosage, and side effects.
- Relevant forms and written advice from medical practitioners and parents/guardians regarding the medical treatment of the child.
- Any specific instructions on meal management.
- The people responsible for actions.
- Consideration of issues of privacy and confidentiality.

#### **Medical risk minimisation and communication record.**

Will be developed by the nominated supervisor in consultation with the child's parents/guardians based on the information supplied by the medical practitioner.

The record will include the following:

- Child's name details date of birth.
- Date of plan and review date.
- Triggers for the medical condition.
- A service specific plan that details each child's medical condition and identifies the risks of the medical condition and practical strategies to minimise those risks should they occur.
- Who is responsible for implementing the strategies.
- All elimination and control measures.
- Once completed the **medical risk minimisation and communication record** will be communicated with all educators in the service in conjunction with medical management plan.
- It must be signed by parent/ guardian and nominated supervisor.
- It must be signed by staff to acknowledge that they have read and understood the **medical risk minimisation and communication record**.
- Ensure that through proper practices and procedures, that all staff members and volunteers can identify the child, the child's medical management plan and the location of the child's medication.
- Ensure that there is signage to indicate where medication is stored.

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- Ensure that staff are aware of and know what signs the child will display if experiencing an episode relating to diabetes.
- Be confident to implement the medical management plan in the event of a medical emergency.
- Be aware of who is to administer medication to the child.
- Be aware of any extra measures required to support the child to control condition.
- Inform staff of any changes to the status of the child's medical condition.
- Ensure that at least one educator or one nominated supervisor has been trained by a medical practitioner or qualified nurse and are named in the plan as the designated medication administrators and attend the service at all times.
- Ensure that the **medical risk minimisation and communication record** is updated and revised every 6 months to capture new information or changes to medical condition relating to child enrolled at the service.

#### **Medication administration record**

As per National Quality Standards the approved provider will ensure that the **medication administration record** meets requirements by having the following criteria:

We expect that all educators check and fill in these records and follow medication administration procedure with care and diligence to ensure the safety of all children.

#### **Medication Administration Record**

- The name of the child.
- Authorisation to administer medication signed by a parent or person named in child's enrolment record as an authorised contact that can consent to administration of medication.
- The name of the medication to be administered.
- The time and date the medication was last administered.
- The dosage of the medication to be administered.
- The way the medication is to be administered- orally, syringe etc.
- Only qualified educators who hold a first aid certificate and who also received suitable practitioner/nurse training in diabetes can administer medication with an equally qualified witness.

Once medication has been administered, staff will ensure that the **medication administration record** states the following:

- The dosage that was administered.
- The way that the dosage was administered- orally, syringe etc.
- The time and date the medication was administered.
- The name and signature of the person who administered the medication.
- The name and signature of the witness who administered the medication.

Each member of the team plays an important role in the implementation of each policies guidelines, and they are outlined as below but not limited to the following:

#### **The Approved Provider**

- Will ensure all new staff employed have current accredited first aid and approved CPR, asthma, and anaphylaxis training.
- Will ensure the policy and procedures are met and the nominated supervisor has ensured that medical management plans and risk assessments are completed.
- Will ensure families of children that have a specific medical condition have been given a copy of this policy and any relevant medical policies.
- Will ensure that families will be supported to develop risk minimisation plans for children with medical conditions or specific health care needs.
- Will ensure that the **medical risk minimisation and communication record** is in place before a child commences at the service, or as soon as possible after diagnosis for children already attending.
- Will ensure that obligations under the Education and Care Services National Law and National Regulations are met.
- Will ensure they take reasonable steps to ensure that the nominated supervisor, educators, staff, and volunteers follow the policy and procedures.
- Will ensure they provide the nominated supervisor, educators, staff and volunteers the documentation to perform their role, follow policy, procedure, and document according to regulatory and service requirements.

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- Will ensure that adequate induction process is provided to all staff to ensure they have time to read and understand policies and procedures and seek further information if unsure.
- Will ensure that the nominated supervisor and staff are equipped with ongoing professional development and training they require to comply with this policy.
- Will encourage feedback from stakeholders regarding the policy's effectiveness, particularly in relation to identifying and responding to child safety concerns.
- Will ensure the policy is kept up to date with current legislation, research, and best practice.

#### The Nominated Supervisor

- Will ensure prior to enrolment ~~the nominated supervisor will need to~~ they establish if there is a pre-existing diagnosed illness with the child/ren enrolling, this will be established through conversation and completion of the **enrolment record**.
- Will ensure any child that presents with diabetes will need to have an existing medical management plan in place from a medical practitioner.
- Will ensure prior to enrolment the nominated supervisor will organise with the families a **medical risk minimisation and communication record** to support the child's medical condition and medical plan.
- Will advise parents/guardians that a child enrolled at the service with a medical condition that requires medical support – e.g., Insulin. Will only be able to attend service with prescribed medication.
- Will advise that children who present with diabetes will be supported by educators and staff who will be trained in the use of relevant devices e.g., insulin injection device (syringes, pens, pumps) used by children.
- Will ensure if a child presents with a medical condition that doesn't fall under staff first aid qualifications the family will need to organise training for staff in child's room to ensure they can fully support the child.
- Will monitor **medical risk minimisation and communication records** by sending out regular **change of details record** to families and through conversations and reminders via email or online platform.
- Will complete a new **medical risk minimisation and communication record** in the event that circumstances have changed for a child and ensure that this information is communicated immediately to staff in room and all staff in service as soon as possible.
- Will discuss with staff, children with medical conditions at staff meetings or immediately if there are any changes that must be implemented.
- When organising excursions for children ensure that any child with a medical condition has a medical management plan and supporting medication and documents taken on the excursion and there is a suitable first aid qualified educator rostered on to be in attendance on excursion.
- Will ensure after any incident involving a child with a medical condition or any serious incident in the service nominated supervisor in conjunction with staff, if appropriate, will complete an **incident review and reflection record**, this will allow the team to reflect on practices, processes, policy and or to discuss the medical management plan.
- Will adhere to and implement the obligations under the Education and Care Services National Law and National Regulations.
- Will ensure they take reasonable steps to ensure that the educators, staff, and volunteers follow the policy and procedures.
- Will ensure they provide the educators, staff and volunteers the documentation to perform their role, follow policy and procedure and ensure they are checking the documentation according to regulatory and service requirements.
- Will ensure that a rigorous recruitment process is completed, and a thorough induction process is provided to all staff to ensure they have time to read and understand policies and procedures and seek further information if unsure.
- Will ensure that the staff are supported with ongoing professional development and training they require to comply with this policy.
- Will encourage feedback from stakeholders and staff regarding the policy's effectiveness, particularly in relation to identifying and responding to child safety concerns.
- Will ensure the policy is kept up to date with current legislation, research, and best practice.

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	<ul style="list-style-type: none"> <li>Will conduct regular staff meetings to address policy compliance with legislation, policy implementation, changes to policy and or collect feedback for annual review of policy.</li> </ul> <p><b>Educators</b></p> <ul style="list-style-type: none"> <li>Will ensure that they are fully aware and understand the procedures and requirements of all children's medical management plans.</li> <li>Will ensure all educators and staff at the service must 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.</li> <li>Will ensure that they promptly communicate to parents any concerns or events in regard to the child's health.</li> <li>Will adhere to and implement the obligations under the Education and Care Services National Law and National Regulations.</li> <li>Will ensure they take reasonable steps to follow the service policy and procedures and seek advice or further support if unsure.</li> <li>Will ensure they complete and document any related records regarding the implementation of this policy and practice requirements of the service.</li> <li>Will attend any ongoing professional development, staff meetings and training they require to comply with this policy and practice requirements of the service.</li> <li>Will provide feedback to the nominated supervisor or approved provider regarding the policy's effectiveness, particularly in relation to identifying and responding to child safety concerns.</li> <li>Will provide feedback regarding policy review when required.</li> </ul> <p><b>Families</b></p> <ul style="list-style-type: none"> <li>Will ensure that they inform management of any medical condition in the <b>enrolment record</b> so the nominated supervisor can support child/ren adequately and ensure the service is equipped to support the child.</li> <li>Will work with nominated supervisor to complete a <b>medical risk minimisation and communication record</b>.</li> <li>Will provide any changes to the child's pre-existing medical condition immediately OR advise nominated supervisor of a new medical condition immediately.</li> <li>Will liaise with staff regarding any changes or incidents that occurred at home when arriving at the service for the day e.g., child had a diabetic attack during the night.</li> </ul>
<b>REGULATION IMPLEMENTATION</b>	The following procedures outline and support all stakeholders to understand and implement the regulatory guidelines of this policy.
<b>In regard to regulation 90 -medical conditions policy and 91- Medical conditions policy to be provided to parents</b>	<p><b>Approved Provider will</b></p> <ul style="list-style-type: none"> <li>Ensure that there is a policy to support and guide all staff on the management of medical conditions. The policy will have clear guidelines as to the following:</li> <li>Ensure children presenting with a specific health need such as Anaphylaxis/ Asthma /Diabetes cannot be enrolled at the service unless a <b>medical management plan</b> has been implemented and signed by a medical practitioner.</li> <li>Ensure once the child presents with plan from medical practitioner then the nominated supervisor and parent will complete a <b>medical risk minimisation and communication record</b> and then the child can attend the service.</li> </ul> <p><b>Nominated Supervisor will.</b></p> <ul style="list-style-type: none"> <li>Ensure a plan will be developed in conjunction with the parent/guardians and nominated supervisor.</li> <li>The plan will include a communication record for all staff and parents.</li> <li>Will ensure that all staff are made aware of the plan for the child and that there is notification in the child's room and staff room if applicable.</li> <li>Ensure permission to display is sought from the parent / guardian on the <b>medical risk minimisation and communication record</b>.</li> <li>Ensure when parent and child present with specific medical condition the nominated supervisor will provide parent with a copy of all policies relating to medical conditions to ensure that parents are well informed.</li> <li>Display a notice in the service stating that there is a child at risk of Anaphylaxis if the medical condition presents as Anaphylaxis. The notice must include the food that may cause Anaphylaxis and inform the staff and the chef if food is supplied prior to child's attendance.</li> </ul>

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	<ul style="list-style-type: none"> <li>Ensure that the process for determining how to deal with the medical condition is in place and is followed and overseen by the nominated supervisor, chef and staff in the child's room: for example – separate meal for the child on allergy designed plate/ chart attached to trolley designating who has an allergy/ name placed on meals to avoid confusion/ allergy tables if more than one child presents with anaphylaxis.</li> <li>Will ensure room meeting will be conducted on a regular basis and information regarding medical conditions will be discussed and documented to advise if there are changes or updates or to gain feedback or information regarding child/rens health.</li> <li>Will ensure any new staff will be advised of medical conditions within their induction.</li> <li>Will in conjunction with lead educator review the <b>medical risk minimisation and communication record</b> on a regular basis.</li> <li>Will send out <b>change of details record</b> to all families to ensure that opportunities to capture change to medical conditions are captured.</li> <li>Will ensure staff Meetings will include updates and issues with medical conditions for all children in the service.</li> </ul>
<b>In regard to regulation 92 -medication record and 93- Administration of Medication</b>	<p><b>Approved Provider will</b></p> <ul style="list-style-type: none"> <li>Ensure parent/ guardians have completed <b>medical administration record long term or short term</b> prior to administering any medication to children and that any medication is in its original container and has a chemist label attached with information pertaining to the correct child and is current and has not expired.</li> <li>Ensure nominated supervisor will complete in conjunction with parent/guardian prior to enrolment a <b>medical risk minimisation and communication record</b> if an ongoing medical condition exists.</li> <li>Ensure that educators only administer medication if they are first aid qualified and have a witness present, confirm the details of the medication, check for expiry date, check child's name, and complete the <b>medical administration record long term or short term</b> once administered.</li> <li>Ensure they seek verbal permission by a parent/guardian or emergency contact to administer or self-administer medication. In the event they are unable to contact parent/guardian or emergency contact seek permission from a registered medical practitioner or emergency service.</li> <li>Ensure parent /guardians have completed the permission section of the <b>enrolment record</b> to request an ambulance in the event of an emergency.</li> <li>In the event of an emergency administration of medication -call an ambulance if required.</li> <li>Call Parents immediately after child has been attended to.</li> <li>Complete an <b>Incident, injury, trauma, and illness record</b>.</li> <li>Notify regulatory authority on the NQAITS portal within 24 hours.</li> </ul> <p><b>Medical administration record</b> must include the following and No medication will be administered unless the record is complete and meets all policy outlines.</p> <ul style="list-style-type: none"> <li>The name of the child.</li> <li>Ensure that the medication has been administered by a medical Practitioner and is in its original container, with its original label / is prescribed for that particular child/ has not expired and must be administered with any instructions attached to the medication or provided by a registered medical practitioner.</li> <li>Authorisation to administer medication (if applicable, self-administration), signed by a parent or person named in the child's enrolment record as authorised to consent to administration of medication.</li> </ul> <p>If the medication is administered to the child:</p> <ul style="list-style-type: none"> <li>The dosage that was administered.</li> <li>The manner in which the medication was administered.</li> <li>The time and date the medication was administered.</li> <li>The name and signature of the person who administered the medication.</li> <li>The name and signature of the person who checked the dosage and administration.</li> </ul> <p><b>Nominated Supervisor will</b></p> <ul style="list-style-type: none"> <li>Ensure that all staff are made aware of the policy and process and will monitor and check records and medication regularly.</li> </ul>

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	<ul style="list-style-type: none"> <li>In the event of a medical emergency will seek verbal authorisation to administer medication to a child.</li> </ul>
<b>In regard to regulation 95 – Procedure for administration of medication.</b>	<p><b>Approved Provider will</b></p> <ul style="list-style-type: none"> <li>Ensure there are appropriate procedures and guidelines regarding medication that are clear and adhered to at all times.</li> <li>A procedure outlining these requirements is available to all staff and educators.</li> </ul> <p><b>Nominated Supervisor will</b></p> <ul style="list-style-type: none"> <li>Ensure that educators adhere to the <b><i>Dealing with Medical Conditions Policy</i></b> and the practices regarding administering medication.</li> <li>Ensure only a fully qualified first aid educator in the presence of a witness will administer medication.</li> <li>Ensure medication will be checked to ensure that it is for the correct child/ that it is in date, not expired/ that the medication administration record has been completed by the parent prior to administering medication.</li> <li>Ensure if any of the above criteria is not met that educators will inform nominated supervisor who will inform parent.</li> <li>Ensure medication will be recorded on the <b><i>medication administration record</i></b> once it has been administered.</li> </ul>
<b>In regard to regulation 136- First aid qualifications.</b>	<p><b>Approved Provider will</b></p> <ul style="list-style-type: none"> <li>Ensure at least one educator or staff member holds current approved first aid qualifications and attends at all times that children are being educated and cared for by the service, including on excursions and during periods of transportation.</li> </ul> <p><b>Nominated Supervisor will</b></p> <ul style="list-style-type: none"> <li>Maintain a staff schedule record to track expiration of qualifications and roster qualified first aid staff to ensure compliance at all times.</li> <li>Check that all first aid qualifications meet regulatory requirements according to the national authority website.</li> </ul>
<b>In regard to regulation 170- Policies and procedures to be followed.</b>	<p><b>Approved Provider will</b></p> <ul style="list-style-type: none"> <li>Ensure that all staff and volunteers are made aware of Regulatory policies and procedures by ensuring that this forms a part of the induction process.</li> <li>Ensure probationary reviews will be conducted once new staff are appointed at the 3- month and 6-month mark to ensure that they are following policy and procedure and to review and revise regulatory policies.</li> <li>Ensure staff meetings will be conducted on a regular basis to allow for review of policy and procedure and further training and revision of procedural practices in relation to policy and procedure.</li> <li>Ensure annual review and revision of policies and procedures will be conducted, and all educators will be given the opportunity for input.</li> </ul>
<b>In regard to Regulation 171- Policies and procedures to be kept available.</b>	<p><b>Approved Provider will</b></p> <ul style="list-style-type: none"> <li>Ensure that policies and procedures are available to all staff and the location and availability will form a part of the induction process.</li> <li>Ensure policies will be available on request for all staff members to have access when required.</li> <li>Ensure policies will be available when required for staff members to download copies and/or print out if required in order to complete assignments or to form part of their research and/ or update their knowledge.</li> <li>Ensure policies will be available for all stakeholders when requested and when updating.</li> </ul>
<b>In regard to Regulation 172- Notification of change to policies or procedures</b>	<p><b>Approved Provider will</b></p> <ul style="list-style-type: none"> <li>Ensure staff meetings will be conducted on a regular basis to allow for review of policy and procedure, provide further training and allow for input if required in relation to policy and procedure.</li> <li>Ensure stakeholders will be invited to provide feedback for policies and procedures at any time, not just on annual review but will also be invited to add feedback at review time or after an event that may require change to policy or procedure.</li> <li>Ensure policies and procedures will be emailed or put on display in the foyer for stakeholders to have the ability to provide feedback.</li> </ul>

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	<ul style="list-style-type: none"> <li>▪ Ensure feedback will be considered from stakeholders and educators and may result in a change in policy.</li> <li>▪ Ensure policy and procedure may be changed at any time if there has been an incident in the service that has required a change to be implemented for the safety and health of children and or educators.</li> <li>▪ Ensure in the event of a change to a policy after feedback or a situation that occurs, we will provide 14 days' notice to all stakeholders before the change takes effect.</li> </ul>
<b>CONTINUOUS IMPROVEMENT</b>	<p>We are dedicated to the ongoing improvement of our practices and procedures through the following actions:</p> <ul style="list-style-type: none"> <li>▪ Conducting regular reviews and updates of this policy with all stakeholders.</li> <li>▪ Actively seeking feedback from children, families, and staff members.</li> <li>▪ Providing targeted skill development and training for staff when areas for improvement are identified or when gaps in policy and procedure implementation are observed.</li> </ul>
<b>KEY TERMS</b>	<ul style="list-style-type: none"> <li>▪ <b>Hypo-</b> Hypoglycaemia (hypo) occurs when your blood glucose levels drop (usually below 4.0mmol/L), Hypos can be caused by missing a meal, not eating enough carbohydrates for a given dose of insulin, unplanned physical activity, strenuous exercise and some symptoms may be the following- Weakness, trembling or shaking, sweating, light headedness/headache, lack of concentration, behaviour change, dizziness and or hunger.</li> <li>▪ <b>Stakeholder</b> - a person or group of people who have an interest in a business, a person such as an employee or customer. They have a sense of responsibility toward it and an interest in its success.</li> </ul>
<b>WE GRATEFULLY ACKNOWLEDGE THE FOLLOWING SOURCES</b>	<ul style="list-style-type: none"> <li>▪ Australian Children's Education &amp; Care Quality Authority. ACECQA</li> <li>▪ Australasian Society of Clinical Immunology and Allergy <a href="http://www.allergy.org.au">www.allergy.org.au</a> Australian Diabetes Council</li> <li>▪ Code of Ethics</li> <li>▪ Diabetes Australia <a href="https://www.diabetesaustralia.com.au/">https://www.diabetesaustralia.com.au/</a></li> <li>▪ Diabetes Queensland <a href="http://www.diabetes.qld.org.au">www.diabetes.qld.org.au</a></li> <li>▪ Education and Care Services National Regulations.</li> <li>▪ Education and Care Services National Law Act 2010.</li> <li>▪ Guide to the Education and Care Services National Law and the Education and Care Services National Regulations.</li> <li>▪ Guide to the National Quality Framework.</li> <li>▪ National Quality Standard.</li> <li>▪ United Convention on the Rights of the Child</li> </ul>

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<b>Service Support Within Reach</b>	Warning -uncontrolled when printed. This document is current at the time of printing and may be subject to change without notice				