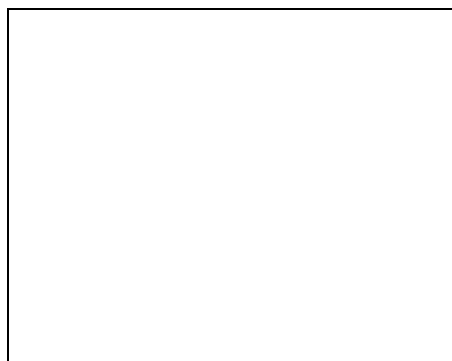


Name:
NHS No:
DoB:



Click below to upload CYP image



Click below to upload NHS Trust image

INDIVIDUAL HEALTH CARE PLAN FOR A CHILD OR YOUNG PERSON IN THE EDUCATION SETTING WHO HAS **TYPE 2** DIABETES



This is a revised care plan based on the National CYP Diabetes Network endorsed Individual Health Care Plan

Version 2.0

Review Date - 31st January 2026

Name:
NHS No:
DoB:



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DEFINITIONS

IHCP	Individual Health Care Plan
CYP	Child or Young Person
HYPO	Hypoglycaemia
BG	Blood Glucose
CGM	Continuous Glucose Monitoring

Name:
NHS No:
DoB:



This health care plan will capture the key information and actions that are required to support this child or young person (CYP) in an educational setting. The education setting should make reasonable adjustments to facilitate prescribed medical care to allow a CYP with diabetes to participate in education on the same basis as their peers. This individual health care plan (IHCP) should be reviewed at least annually.

1. CHILD/YOUNG PERSON'S INFORMATION

a. Child / Young Person Details

CYP Name:		School/College Address:	
NHS number:			
DoB:			
Child's Address:			
Town:			
County:		Year group:	
Postcode			
Type of Diabetes:	Type 2	Date of Diagnosis:	
Associated Conditions:			
Other medical conditions:			
Additional learning needs:	Yes	No	EHCP
Allergies:			
Date:	Document Review Date:		

b. Family Contact Information

Name			
Relationship			
Telephone Number	Home		
	Work		
	Mobile		
Email			
Name			
Relationship			
Telephone Number	Home		
	Work		
	Mobile		
Email			

This CYP has TYPE 2 DIABETES

CYP diagnosed with type 2 diabetes are at an increased risk of serious medical conditions therefore diet , activity and lifestyle changes are vital to ALL CYP with type 2 diabetes.

Type 2 diabetes is a serious medical condition whereby the body cannot use insulin effectively (insulin resistance), resulting in high glucose levels.

This can lead to symptoms of tiredness and poor concentration. Therefore, a family commitment to lifestyles changes and treatment is required to ensure glucose levels remain within the target range and minimise any long term health risk of complications.

Name:
NHS No:
DoB:



c. Professional Contact Information

Contacts			
	Name	Email	Contact Number
Diabetes Team Contacts			
Children's Diabetes Nurses:			
Dietitian:			
Consultant Paediatrician:			
Psychologist			
Link Person in Education:			
Class Teacher:			
SEN Co-ordinator:			
Other Relevant Teaching Staff:			
Head teacher:			
School Nurse:			
Other Relevant Professionals, e.g Social Worker:			
General Practitioner:			

d. Daily Treatment for this CYP

Does not take any diabetes medication :	
Oral medication(s):	
Other diabetes medication(s):	
Insulin	Please specify:
Other medication(s)	

2. ACTIVITY AND EXERCISE

Activity and exercise is an integral part of type 2 diabetes management.

Please encourage participation in extracurricular activities which promote movement and reduce sedentary time.

Physical activity may raise or lower glucose levels depending on treatment. A glucose check may be required pre and post exercise (e.g. P.E.), particularly for those CYP who are on regular insulin (See box below for individual activity advice) **If CYP complains of or appears unwell, check glucose. If glucose is 3.9mmol/L or lower, please refer to section 9**

CYP individual activity advice

Name:
NHS No:
DoB:



3. HEALTHY EATING AND CARBOHYDRATE COUNTING

Food is a very important part of the treatment of type 2 diabetes and all CYP need a varied, balanced diet for optimum health and development. The family will have received in-depth education from a dietitian to help support their CYP in achieving a healthy weight, through healthy eating and appropriate portion sizes. If the CYP is taking insulin, they will have also received education from their dietitian on carbohydrate counting (see section 6).

Carbohydrate foods, that are wholegrain and complex, are important to include in the diet as they provide the body with energy for growth, activity and concentration. Carbohydrate foods are also a good source of fibre, vitamins and minerals. Carbohydrates are also the food group most responsible for raising glucose levels. Therefore, every CYP with Type 2 Diabetes may have been advised by their hospital team to modify their diet in some way. This advice will be individualised but generally, will aim to reduce the number of calories they are consuming in order to promote weight loss and may also involve limiting processed, high calorie, sweeter foods to minimize the effect on their glucose levels.

All CYP with type 2 diabetes should have access to a front of queue priority lunch pass, to ensure access to healthier food options, as these may be in shorter supply. CYP may also require extra support from the catering team to identify these options.

CYP Dietary Advice (*This is in conjunction with increasing activity levels*):

4. EMOTIONAL WELLBEING

It is recognised that CYP diagnosed with type 2 diabetes may lack self confidence, be low in self esteem and have difficult feelings around food and weight. **Should staff recognise any of these signs please contact the CYP diabetes team to discuss.** Please be aware that there may be a stigma attached to any long term condition and presumptions are made about individuals diagnosed with Type 2 diabetes. This can lead to bullying and other behaviours that lead to a decline in a persons emotional health. Please think about the language that is used in conversations with the CYP and family and be observant for other peoples' behaviours that may cause distress.

5. MONITORING GLUCOSE LEVELS

CYP are advised to check their glucose to achieve levels within their target range mmol/L to mmol/L. The frequency they are advised to check their glucose varies between individuals, so this may not be required during the school day. However, CYP who are taking insulin before meals or snacks will need to check their glucose levels using a finger tip check or a glucose sensor.

This CYP will routinely monitor glucose in school (see 'Suggested Daily Routine' section 6)	
This CYP does not require any glucose checks in school	
This CYP needs BG checks to be carried out by a trained adult, using a Fastclix / Multiclix device	
This CYP requires supervision with glucose checks	<input type="checkbox"/>
This CYP is independent in glucose checks	<input type="checkbox"/>

BG checking should be carried out:

- In class or if preferred, in a clean private area with hand washing facilities - **Not in a toilet**
- Hands to be washed prior to the check
- Blood glucose testing lancets and blood glucose strips should be disposed of safely in a

This CYP is using the following device: if other please specify

If this patient is using CGM device, as above, they will need access to their mobile device at school.

Name:
NHS No:
DoB:



6. INSULIN ADMINISTRATION

Insulin therapy may be necessary to treat Type 2 diabetes in addition to oral medications and lifestyle changes.

If the CYP requires insulin staff must be aware of the increased risk of Hypoglycaemia see section 7.

Does this CYP require insulin in educational setting? No if no, go to section 7
Yes

(Tick which applies)

Insulin to be administered by a suitably trained adult using either a pen needle that complies with national and local sharps policy	<input type="checkbox"/>
Supervision is required during insulin administration as per daily routine	<input type="checkbox"/>
This CYP is independent, and can self-administer their own insulin	<input type="checkbox"/>

Does this CYP carbohydrate count as part of their daily routine Yes No

This CYP needs assistance with carbohydrate counting in school or educational setting	<input type="checkbox"/>
This CYP can manage carbohydrate counting independently	<input type="checkbox"/>

CYP with Type 2 diabetes taking fast acting insulin using insulin pen are likely to accurately count carbohydrates of all meals and snacks to calculate their insulin doses. Some CYP may not count carbohydrates but would require set doses of insulin given before food.

If you need support to count the carbohydrates content of the school menus please seek assistance from your catering company/diabetes team.

Insulin administration should be carried out before meals or snacks ideally after a glucose check to ensure CYP is not hypo before (if so treat and ensure capillary blood glucose greater than before insulin given):

- Provision of a clean private area with hand washing facilities is ideal, but not in a toilet
- The CYP should always use their own equipment - blood glucose equipment should not be shared
- All used needles should be disposed of in a sharps bin accordance with the school's local sharps policy

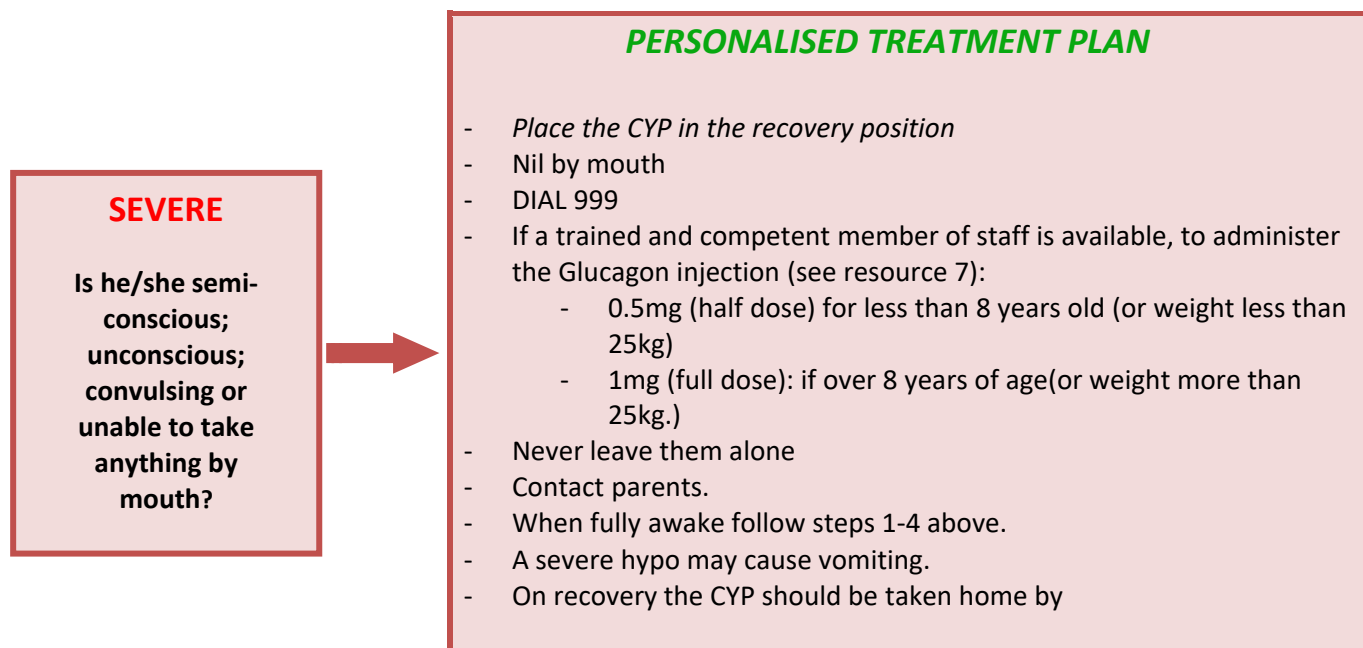
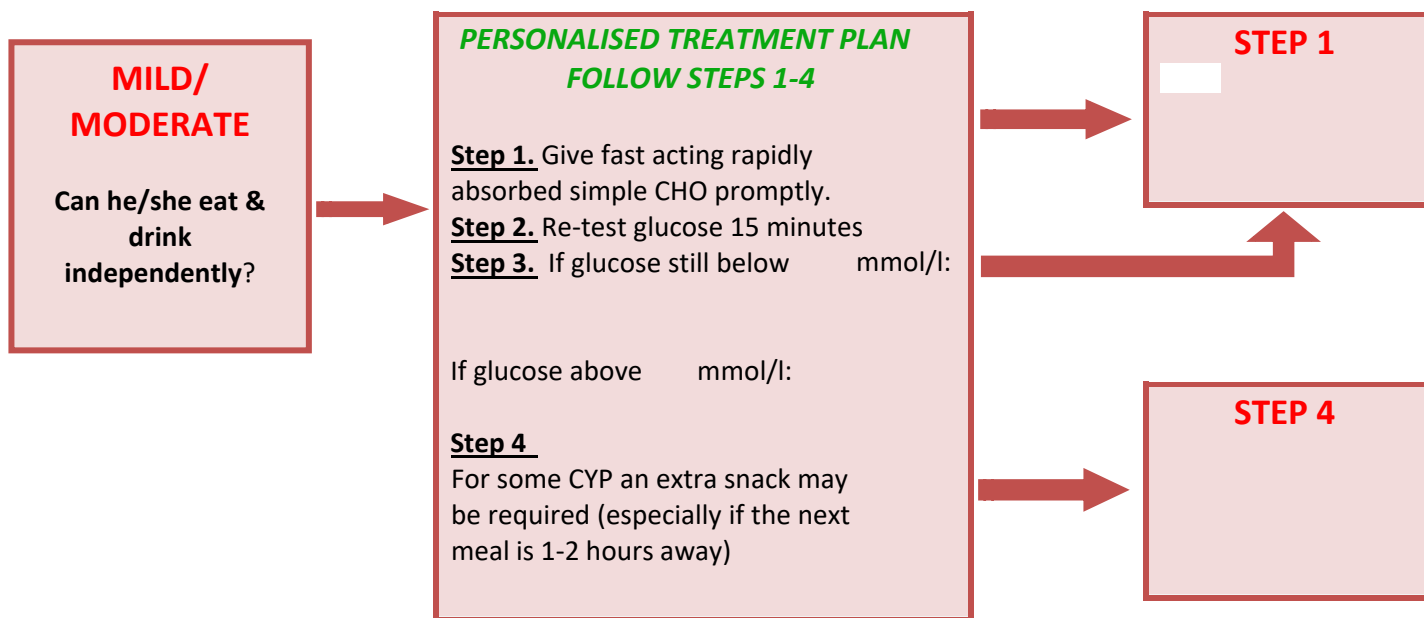
Insulin Name	Time of day to be given	Insulin dose in units

7. HYPOGLYCAEMIA - Glucose is less than 3.9mmol/L

If CYP is using insulin, they are at risk of Hypoglycaemia

If CYP is not on insulin and is on any other oral medication or diet only, a glucose levels below 3.9 is not a hypo

Glucose BELOW MMOL/L



Additional information regarding hypoglycaemia for this CYP:

FOLLOWING RECOVERY CONSIDER WHAT HAS CAUSED THE HYPO

8. HYPERGLYCAEMIA (High glucose)



Children and young people who have Type 2 diabetes may experience high glucose (hyperglycaemia) when the glucose levels are above **mmol/L**.

Common symptoms of high glucose levels are:

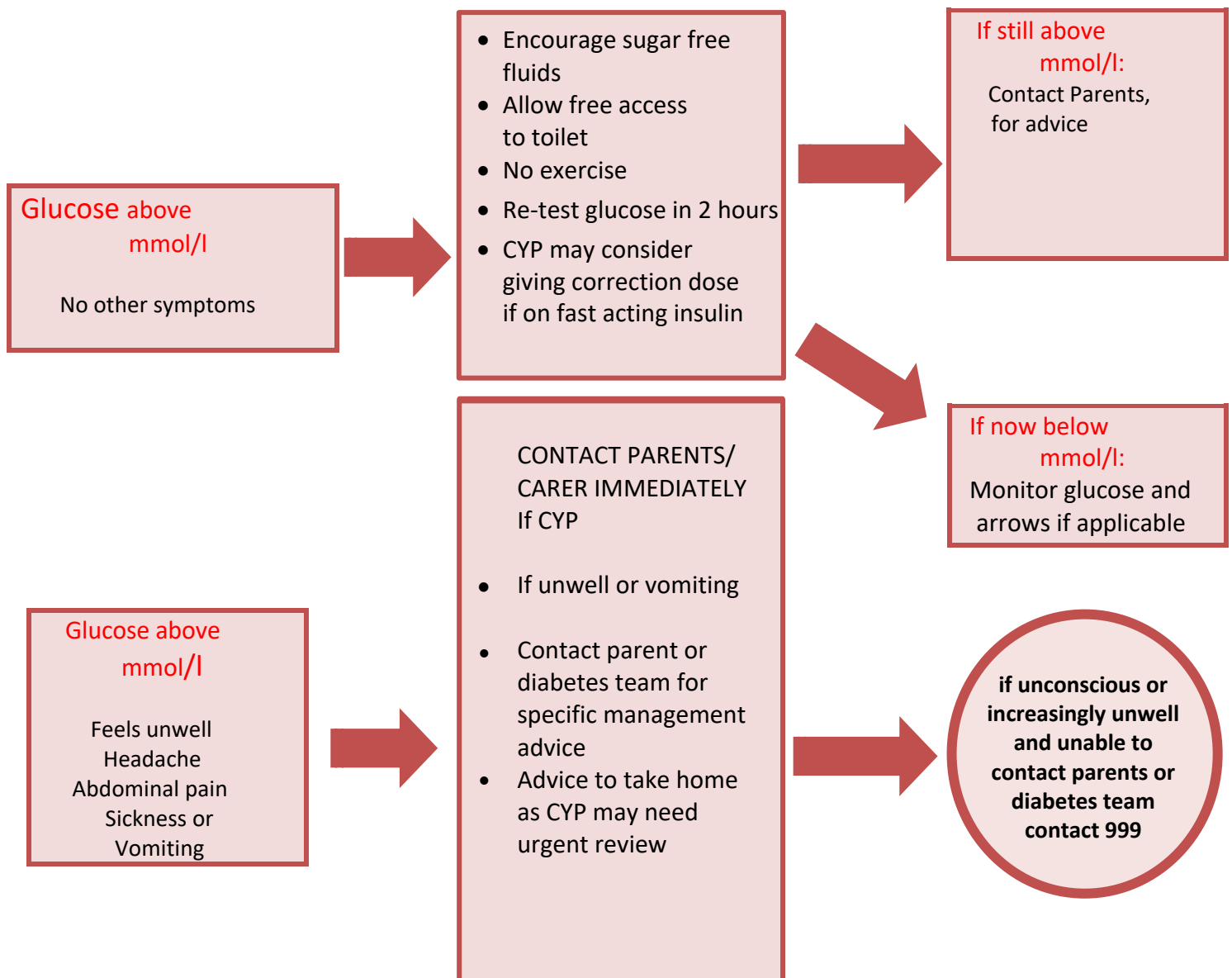
- Excessive thirst
- Tiredness
- Going to the toilet more often
- Poor concentration
- Mood changes

Possible reasons for high glucose levels are:

- Missed diabetes medication
- Stress/Hormones
- Sedentary lifestyle
- Illness e.g cough/cold
- High CHO intake

If the child/young person is well and NOT on insulin there is no need for them to be sent home. Glucose check two hours after the episode is advisable and parent/ guardian should be informed at the end of the school day. **If the CYP is nwell and takes insulin OR Metformin, vomiting may lead to more acute diabetes emergencies. Please ring for advice.**

a. Treatment of Hyperglycaemia For A Child/Young Person On Insulin



Name:
NHS No:
DoB:



9. DAY TRIPS/RESIDENTIAL VISITS

Governing bodies should ensure that risk assessments, planning and arrangements are clear to ensure this CYP has the opportunity to participate in all off site activities. School should ensure reasonable adjustments as required.

10. ADDITIONAL INFORMATION

- School/college to be kept informed of any changes in this child or young person's IHCP, by parents, as they arise.
- Exams or other assessments may affect glucose levels and therefore may affect academic performance
- CYP with diabetes may be encouraged to wear identification stating they have diabetes. These are in the form of a bracelet, necklace, watch or medical alert card.
- There is no specific age at which a CYP with diabetes should be expected to take full responsibility for their diabetes in school or educational setting.
- Specific extra support may be required for the CYP regarding educational, social and emotional needs- for example: during period instability : during exams: catching up with lessons after periods of absence: and counseling sessions.
- Storage of medication and supplies in school/college should be kept in line with local policies. All staff have to be aware that the CYP with diabetes should have access to their devices and medication whenever needed.

Please use the box below for any additional information for this CYP, and document what is specifically important for them:

This IHCP has been initiated and updated in consultation with the CYP, family; diabetes specialist nurse and a member of staff from the educational setting.

	Name	Signatures	Date
Young person			
Parents/Guardian			
Parents agreement to administration of medicine as documented in section 8			
Diabetes Nurse Specialist:			
School Representative:			

Name:
NHS No:
DoB:



11. CHECKLIST

First aid hypoglycaemia management pack	<input type="checkbox"/>	Insulin pen and appropriate pen needles	<input type="checkbox"/>
Glucose Gel (e.g. GlucoGel®/DextroGel®)	<input type="checkbox"/>	Spare battery	<input type="checkbox"/>
Finger prick device, BG monitor and strips	<input type="checkbox"/>	Up to date care plan	<input type="checkbox"/>
Sharps bin	<input type="checkbox"/>		
Spare CGM kit			

12. TRAINING LOG

Schools are responsible for ensuring their staff are adequately trained in diabetes management and access regular training updates provided by their local diabetes team .

Staff Name	Training Delivered	Trainer	Date

13. ADDITIONAL NOTES

14. TYPE 2 DIABETES ROLES AND RESPONSIBILITIES

CYP with Diabetes will have to attend clinic appointments to review their condition. Appointments are typically every 3 months, but may be more frequent and the CYP may also require authorised medical absences for diabetes education sessions. These appointments may require a full day's absence. Education authority staff should be released to attend the necessary diabetes training sessions, in accordance with national guidance.

Item	Parent/Carer Responsibility	Educational Setting Responsibilities	Child/Young Person's Responsibility	CYP Diabetes Nurse Specialist
Care Plan	To complete/update care plan as needed	Staff to be aware and follow plans and expectations	To complete and update as needed	To support parent/Carer with completing
Education Updates	If agreed by PDSN	To attend training with local diabetes team	N/A	To provide training upon request to support staff and parents
Emergency Supply Box	To provide box and refill contents in a timely way	To inform parent/carers when supplies low. Supplies to be available for CYP/Staff	To inform parent/carers when supplies are used or are low	To provide training for staff on the correct use of items
Insulin Injection	To provide school with all supplies needed	To provide a clean, hygienic environment and fridge space for spare supplies of insulin	To inform parent/carers when supplies are running low	To guide and support parent/carers with topping up supplies
Blood Glucose Checking Supplies	To provide correct supplies and top up stock as necessary	Request supplies when low. To provide safe, clean storage place. Request training when required	To inform parent/carers when supplies low	To provide training to carry out the skills necessary
Quality Control of Blood Glucose Meter	To carry out in accordance with guidelines	N/A	N/A	To provide training to carry out as per guidelines
Sharps Disposal	To provide sharps bin and remove when full	To inform parent/carers when 2/3 full and needs replacing	To inform parent/carers when sharps bin 2/3 full	To provide parent/carers with information about local policies
Risk Assessment	To provide information to facilitate risk assessment	To draw up risk assessment and acknowledge individual needs	To participate in risk assessment where needed	To provide support to schools/college in drawing up any risk assessments
Off-site Activities and Residential Trips	To inform diabetes team of any trips to allow time to plan ahead	To inform parents of trips/residential and activities that may be held to support putting in a plan of care. To ensure trained staff available on trip	To update parents of any trips/activities	To provide advice, advice and education to school/college/parent/carers and facilitate inclusion and participation in off site and one off activities

15. USEFUL RESOURCES

- 1) **Managing Type 2 Diabetes in Children and Young People e-learning Programme** - <https://www.e-lfh.org.uk/programmes/managing-type-2-diabetes-in-children-and-young-people/>
- 2) **DigiBete Type 2** - <https://www.youngtype2.org/>
- 3) **Carbs and Cals** App and book, by Chris Cheyette and Yello Balolia (Chello Publishing Ltd, ISBN no: 978-0-9564430-0-7): <https://www.carbsandcals.com/app/app>, <https://www.carbsandcals.com/>
- 4) **Nutracheck**, Calorie & Nutrient tracking made easy:
<https://www.nutracheck.co.uk/Home>
- 5) **Department of Education**
Supporting Pupils at School with Medical Conditions:
<https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3>
- 6) **Diabetes UK**
Diabetes in Schools Resources:
<https://www.diabetes.org.uk/Guide-to-diabetes/Schools/Diabetes-in-schoolsresources/>
Residential and Exams Packs:
<https://www.diabetes.org.uk/...to-diabetes/...diabetes/.../school-trip-and-exam-resource>
- 7) **Health and Safety (Sharp Instruments in Healthcare) Regulations 2013** The relevant guidance can be accessed via the following link:
www.HSE.gov.uk/healthservices/index.htm
- 8) **National Children and Young People's Diabetes Network E-learning module - Basic and Advanced Level** <https://jdrf.org.uk/for-professionals/school-pack/schools-e-learning-module/>
It is recommended that all staff complete the Basic Level. Staff who are carrying out blood glucose tests and giving insulin (either injections or via a pump) should also complete the Advanced Level.
- 9) **How to Give an Injection of Glucagon (Glucogen) Video**
The video is specific to type 1. Resource can be used for practical aspect of delivering but doses personal to CYP can be found in IHCP
<https://www.digibete.org/video/give-injection-glucagon/>
- 10) **Childhood obesity: a plan for action, Chapter 2 - NHS England**
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/718903/childhood-obesity-a-plan-for-action-chapter-2.pdf
- 11) **Change for Life - Healthy Eating** <https://www.nhs.uk/change4life>
- 11) **ACDC Guidelines** - <https://www.a-c-d-c.org/wp-content/uploads/2012/08/Type-2-guideline-ACDC-format-publish-2.pdf> - <https://www.a-c-d-c.org/wp-content/uploads/2012/08/Executive-summary-Management-of-Type-2-diabetes-in-CYP-1.pdf>

16. REFERENCES:

Diabetes Guidelines for Schools, Colleges and Early Years Settings - East of England CYP Diabetes Network (versions 2013,2014,2018)

ISPAD Clinical Practice Consensus Guidelines 2018: <https://www.ispad.org/page/ISPADGuidelines2018>

Chapter 3: Type 2 Diabetes mellitus in youth. Phil Zeitler, Silva Arslanian, Junfen Fu, Orit Pinhas-Hamiel, Thomas Reinehr, Nikhil Tandon, Tatsuhiko Urakami, Jencia Wong and David M Maahs

Making every young person with diabetes matter. Department of Health, 2007

Managing Medicines in school and early Years Setting. Department of Health, 2005

Meeting Health Needs in Education and other Community Settings. RCN. January 2018

NICE clinical guideline NG18: Diabetes (type 1 and type 2) in children and young people, diagnosis and management, November 2016

Statutory Framework for Early Years Foundation Stage. Setting the standards for learning, development and care of children from birth to five.. Dept of Education, March 2017

Supporting pupils at school with medical conditions. Department of Education. September 2014
<https://www.gov.uk/government/publications/supporting-pupils-at-school-withmedical-conditions--3>

Physical activity guidelines for children and young people
<https://www.nhs.uk/live-well/exercise/physical-activity-guidelines-children-and-young-people/>

THIS TYPE 2 INDIVIDUAL HEALTH CARE PLAN (IHCP) HAS BEEN REVISED BY A SUBGROUP OF THE NATIONAL CHILDREN AND YOUNG PEOPLE'S TYPE 2 DIABETES WORKING GROUP LED BY:

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THIS INDIVIDUAL HEALTH CARE PLAN HAS BEEN BASED ON THE NATIONAL TYPE 1 INDIVIDUAL HEALTH CARE PLAN (IHCP) AND THE ABOVE SUBGROUP WOULD LIKE TO THANK:

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- THE SUBGROUP OF THE NATIONAL TYPE 1 INDIVIDUAL HEALTH CARE PLAN
- JONATHAN MAIDEN, NETWORK MANAGER, CHILDREN & YOUNG PEOPLE'S NORTH WEST DIABETES NETWORK FOR HIS IT SUPPORT
- LIBBY DOWLING, SENIOR CLINICAL ADVISOR, DIABETES UK.

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