

Diabetes UK position statement on caring for children with type 1 diabetes in nurseries



Libby Dowling
Senior Clinical Advisor,
Diabetes UK

Diabetes UK launched its first position statement on caring for children with type 1 diabetes in nurseries in April 2016. It is of great importance to the parents of the approximately 1800 children under the age of 5 years who are living with type 1 diabetes in Scotland, Wales and England – a figure which is set to rise. The statement sets out the Diabetes UK position on what parents of children with type 1 diabetes should expect from nurseries, as well as outlining the role of parents.

Our basic position is that all children with type 1 diabetes should be able to attend a nursery of their parents' choice and that nurseries should make all reasonable arrangements to help their staff to care for the child.

Although this has been happening successfully in many cases, we had been made aware that some nurseries needed to improve their practice, as a number of parents were having difficulty accessing nursery places for their children or were concerned about the quality of care once their child was there. Some parents, for example, felt that staff were frightened of their child's condition or were reluctant to be retrained to be able to assist children with the condition.

There are already many pieces of legislation which require the nursery to look after children with type 1 diabetes. The *Equality Act 2010* in Scotland, England and Wales and the *Disability Discrimination Act 1995* in Northern Ireland both state that nurseries have a duty to make reasonable adjustments for children with type 1 diabetes (as disabled persons). The *Early Years Foundation Stage Statutory Framework* states that nurseries must meet certain requirements in relation to health and medicines, and the *Special Educational Needs and Disability Code of Practice: 0 to 25 Years* provides a statutory framework for organisations that work with and support children and young people who have special educational needs or disabilities.

If parents feel that the care their child's nursery provides is failing to meet such legal duties, they should raise this view with the nursery staff and discuss opportunities for improving the care in order to meet these duties. If nursery staff refuse to engage in such discussions, parents could then consider a legal solution as a last resort.

The role of the nursery and nursery staff

The position statement contains five key recommendations, as summarised below:

1. Medical conditions policies

The nursery should have a medical conditions policy, which recognises that every child with a medical condition is different and must be treated as an individual.

This policy must acknowledge that medical conditions can be life-threatening and it must clearly identify the roles and responsibilities of those involved in supporting the child whilst at nursery.

2. Individual healthcare plans

The nursery should have in place an individual healthcare plan for every child with type 1 diabetes.

The nursery needs to coordinate a meeting between the child's parents and the paediatric diabetes specialist nurse (PDSN) to discuss the child's needs and to draw up an individual healthcare plan together, to determine how the child's care needs will be met.

3. Emergency situations

The nursery should ensure that all staff are aware of a child's type 1 diabetes and that all staff know what to do in an emergency.

4. Nursery staff training

The nursery should ensure that sufficient staff

receive adequate training from a PDSN to enable them to look after children with type 1 diabetes.

Such staff should have the right skills and knowledge to provide an adequate level of care for all children with type 1 diabetes. The number of staff required will vary between nurseries, but there should be at least two staff members at each nursery who are trained to administer insulin and to check blood glucose levels.

5. Nursery staff availability

The nursery should ensure that sufficient staff are available at all times to care for the child with type 1 diabetes.

There should be one-to-one support, in the sense that there should always be a trained member of staff available to support the child, but the nature of that support may vary depending on the child's needs. The support required should be agreed between the parents, the PDSN and the nursery.

The role of the parents

The position statement also clarifies the role of parents of children with type 1 diabetes. Parents should not be required to go into nursery to meet their child's medical needs, such as regularly administering insulin, but it is reasonable for nurseries to expect parents to provide them with their contact details

in case of emergency, in addition to any other information necessary for staff to provide them with adequate care.

EHC plans

Finally, the statement has a section on Education, Health and Care (EHC) plans, which parents can apply for if they feel that arrangements made by the nursery are insufficient. Parents can ask for an EHC needs assessment only if their child has special educational needs, not just health or care needs, regardless of how severe those needs are. However, if the child's type 1 diabetes is difficult to manage to the extent that it impacts their ability to learn, this could be defined as having special educational needs. The application for a needs assessment is made to the Local Authority where the nursery is based, and the Local Authority then decides whether to issue an EHC plan for the child.

Further information

The position statement can be found on the Diabetes UK website: www.diabetes.org.uk/Documents/Position%20statements/caring-children-type-1-diabetes-nursery-0316.pdf

or at: <http://bit.ly/2eaT6Zm>

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POSITION STATEMENT

CARING FOR CHILDREN WITH TYPE 1 DIABETES IN NURSERIES

Last reviewed April 2016

KEY POINTS:

- All nurseries should look after and support children with Type 1 diabetes so they remain safe, healthy and able to participate in all nursery activities.
- Children with Type 1 diabetes should have access to a nursery place of their parent's choice and be looked after by suitably trained staff to make sure they can participate in all nursery activities.
- All nursery staff caring for children with Type 1 diabetes should receive specialist training, be signed off as competent and receive additional training as appropriate to meet a child's changing needs.
- No parent should be required to go into nursery to meet their child's needs which relate to their Type 1 diabetes, or be made to feel obliged to support their child during their time at nursery.
- Each child needs 1:1 support, but how this manifests itself will vary from child to child.

Introduction

There are approximately 1700 children under the age of 16 living with Type 1 diabetes in England and Wales, and 110 in Scotland. Indeed, the deepest rise in diagnosis of Type 1 diabetes in this age group, and the number of children with diabetes in nurseries is likely to increase.

Prior to starting full time education, children may attend a nursery for part or all of the day. In England, parents are currently entitled to 15 hours of free childcare per week when their child is 3 to 4 years of age.

In addition to this, parents of children who have a recent diagnosis of special educational needs (SEN), or an education, health and care (EHC) plan, or are in receipt of benefits including both an Disability Living Allowance, are entitled to 15 hours of free childcare per week when their child reaches their second birthday.

Parents can ask for an EHC needs assessment only if their child has special educational needs, not just health or care needs, regardless of how severe those needs are. However, if the child's type 1 diabetes is difficult to manage to the extent that it impacts their ability to learn, this could be defined as having special educational needs. The application for a needs assessment is made to the Local Authority where the nursery is based, and the Local Authority then decides whether to issue an EHC plan for the child.

Diabetes UK makes recommendations in the following areas:

- Medical emergency policies
- Individual healthcare plans
- Emergency procedures
- Nursery staff training
- Nursery staff availability

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