

Going home - important things you need to know about

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1. Parent/carer support



Parents/carers will need time off work to support their children after being diagnosed with diabetes. It can be a stressful time for all the family.

We would expect that one parent would need to be at home to support their child for the first week after diagnosis, and longer if they are very young.

We would hope that employers would be supportive of this. If you need a letter of support, please speak to the diabetes team.

2. Recording of blood glucose results and carbohydrate intake



Before you leave the children's ward, you will be given a blood glucose (BG) diary. You will be shown how to record all readings in the diary.

It is very important that you record the BG readings as this is extremely helpful if any changes need to be made.

Please try to check your child's blood glucose at least 4 times per day.

It is important to bring the diary to any appointments you have with the diabetes team. This is so that the team can advise about any insulin dose changes.

The target for the BG readings during the day is between 4 and 7mmol/L and before bed is also 4 to 7mmol/L.

The blood glucose readings are likely to be above target to begin with. This should improve as you get back to a normal daily routine of regular meals, exercise, activities and school.

3. Insulin doses and the honeymoon phase



Before you leave the ward, one of the members of the team will make sure you know your child's basal (background) and bolus (mealtime) insulin doses.

However, these doses **will** change. The diabetes team will help you and your child to make any changes to the insulin doses so that your blood glucose readings are in target and stay in target.

During the first two or three weeks after diagnosis, the pancreas may begin to show signs of producing small amounts of insulin. This is quite common, and is known as the honeymoon period.

The blood glucose readings may fall and your child's appetite may return to normal at this stage. Your child's insulin dose will need to be adjusted when this happens.

The honeymoon phase may last from a few weeks up to two years. The insulin produced by the pancreas then gradually declines, and the blood glucose levels start to rise.

Unfortunately, there is no treatment to prevent the pancreas completely stopping insulin production. As the natural insulin production dwindles, your child will need more insulin by injection.

4. Concerns about blood glucose levels – Too High or too Low



The diabetes team will keep in regular contact with you following diagnosis. They will help you with any changes that are needed.

If you need to speak to any of the team about highs and lows, In the **initial** few weeks after diagnosis, please call the paediatric diabetes nurses on **01324 567177**.

The dietitian will also help you with both the amounts of carbohydrate eaten and the insulin doses needed for food, and can also advise about insulin dose adjustments.

The Dietitians' phone number is: **01324 566596**

If you have any queries about school, the prescriptions, or any other diabetes-related concerns:

Call the paediatric diabetes nurses on **01324 567177**

5. Future follow-up

One of the diabetes nurses will come and visit you at home within one week of discharge.

They will give you more information about attending the diabetes clinics.

6. Nursery and school support



The diabetes nurse specialist will contact the school or nursery shortly after discharge.

The school will be given information about diabetes in schools (called “Making connections”).

They will plan the following:

Nursery

- A meeting will be arranged with the nursery staff. As many staff as possible are invited to attend. We encourage parents to be present at the meeting if possible.
- Guidelines will be given to the nursery staff and discussed with them.
- Parents are expected to provide ongoing support to staff with blood glucose monitoring and insulin injections until staff are confident to help with this.

Primary school

- A meeting will be arranged with the class teacher, head teacher, support staff, and any other staff involved.
- Parents are encouraged to be present if possible.
- Guidelines will be given to the staff and discussed with them.
- Parents are expected to provide ongoing support to staff with blood glucose monitoring and insulin injections until staff are confident to help the child with this.

Secondary school

- We encourage children in secondary school to manage their own diabetes as much as possible, with the help of teachers where necessary.
- The guidance teacher will be informed of the diagnosis.

- Staff may wish to meet with the diabetes nurse specialist for more information about diabetes.
- If necessary guidelines will be given to staff and discussed with them.
- Many secondary schools will already have pupils in school who have diabetes and so will be familiar with children with diabetes.
- Parents are expected to provide ongoing support to staff when needed.

Additional school issues

Exams

Exams can be a stressful time for children and blood glucose readings can be affected. It is important to notify staff of your child's diabetes, and to have blood glucose monitoring equipment and hypo treatment available in the examination room. A letter is available to give to school staff.

Please remember to let teachers know that if a child has a hypo during the exams, it can take 45 minutes to fully recover once a hypo has been treated (and the blood glucose is above 4mmol/L).

Residential school trips

Parents should provide the necessary information about their child's diabetes care for schools going on residential trips.

School staff can contact the paediatric diabetes nurses for further advice about school trips if necessary, using the nurses contact number.

If necessary, a visit from paediatric diabetes nursing staff and parents can be arranged.

It may be helpful for parents to contact the paediatric diabetes nurses the week before a school trip to discuss any adjustments needed to insulin doses.

It is important that the teachers responsible for the school trip have the contact number of the child's parent or carer. The carer should be available at all times in case the school staff have any concerns.