

RISK ASSESSMENT: Managing a Child with Diabetes

Service Name: St Dunstan's Kindergarten

Date Completed: January 2026

Assessment Review Date: January 2029

Completed by: Nikki Samuel – Nominated Supervisor

Hazard

Medical condition – Diabetes (Type 1 most common in young children)

Who May Be Harmed

- Child/children with diabetes
- Staff responsible for care
- Other children (indirectly)

Risks

- Hypoglycaemia (low blood sugar)
- Hyperglycaemia (high blood sugar)
- Delayed treatment leading to medical emergency
- Incorrect insulin administration
- Poor food management
- Emotional distress to child

Control Measures

1. Individual Healthcare Plan (IHP)

- An Individual Healthcare Plan is in place for each child with diabetes.
- Plan developed in partnership with:
 - Parents/carers
 - Healthcare professionals (e.g. diabetes nurse)
- Plan includes:
 - Signs of hypo/hyperglycaemia
 - Blood glucose monitoring routines
 - Insulin requirements (if applicable)
 - Dietary needs
 - Emergency procedures

- Plan reviewed regularly and updated as needed.
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2. Staff Training

- All relevant staff receive diabetes awareness training, including:
 - Recognising symptoms of low and high blood sugar
 - Responding to emergencies
 - Designated staff receive specific training in:
 - Blood glucose monitoring
 - Administering insulin (if required)
 - Use of emergency medication
 - Training refreshed regularly.
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3. Blood Sugar Monitoring

- Blood glucose levels checked according to the child's healthcare plan.
 - Monitoring carried out by trained staff.
 - Results recorded and shared with parents/carers as agreed.
 - Equipment stored safely and hygienically.
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4. Medication and Insulin Management

- Insulin stored securely but easily accessible to trained staff.
 - Correct dosage confirmed before administration.
 - Sharps disposed of safely in approved containers.
 - Two trained staff members involved where possible to reduce errors.
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5. Hypoglycaemia (Low Blood Sugar) Management

- Fast-acting glucose available at all times (e.g. glucose tablets, juice).
 - Staff recognise early signs such as:
 - Pale appearance
 - Irritability or unusual behaviour
 - Drowsiness
 - Immediate action taken according to the IHP.
 - Parents/carers informed following any incident.
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6. Hyperglycaemia (High Blood Sugar) Management

- Staff aware of symptoms such as:
 - Increased thirst
 - Frequent urination
 - Tiredness
 - Blood glucose levels monitored as required.
 - Medical advice sought if levels remain high.
 - Emergency services contacted if advised in the healthcare plan.
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7. Food and Drink Management

- Meal and snack times supervised.
 - Child encouraged to eat according to their care plan.
 - Staff ensure correct carbohydrate intake.
 - Special dietary requirements clearly communicated to all staff.
 - Water freely available at all times.
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8. Physical Activity

- Child encouraged to participate fully in activities.
 - Staff aware that exercise may affect blood sugar levels.
 - Blood glucose checked before/after activity if required.
 - Snacks provided as needed.
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9. Emergency Procedures

- Emergency contact details easily accessible.
 - Clear procedure for calling emergency services (000).
 - Staff aware when to administer emergency treatment.
 - Incident recorded and reviewed.
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10. Inclusion and Emotional Wellbeing

- Child treated inclusively and with dignity.
 - Procedures explained in an age-appropriate way.
 - Child reassured and supported emotionally.
 - Confidentiality maintained at all times.
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Risk Level

Low – when all control measures are in place and followed.

Review

- **Risk assessment reviewed:**
 - After any incident
 - When there are changes to the child's condition or care plan