

# TYPE 2 DIABETES ACTION PLAN: 2025

## (Insulin Injections)

### SCHOOL SETTING

Use in conjunction with Diabetes Management Plan.  
This plan should be reviewed every year.

As kaitiaki (carers/guardians) of diabetes related services, it is a collective responsibility to establish an environment that facilitates a pathway for people with diabetes to navigate te ao mate huka - the world of diabetes<sup>1</sup>.

### LOW Hypoglycaemia (Hypo)

Blood Glucose level (BGL) less than or equal to **<3.9 mmol/L** requires additional action

**SIGNS AND SYMPTOMS** Pale, headache, shaky, sweaty, dizzy, drowsy, changes in behaviour.

*Note: Check BGL if hypo suspected. Symptoms may not always be obvious*

### HIGH Hyperglycaemia (Hyper)

Blood Glucose level (BGL) greater than or equal to **>15.0 mmol/L** is well above average and requires additional action

**SIGNS AND SYMPTOMS** Increased thirst, extra toilet visits, poor concentration, irritability, tiredness

*Note: Symptoms may not always be obvious*

**DO NOT LEAVE STUDENT ALONE**  
**DO NOT DELAY TREATMENT**

#### MILD

**Student conscious**  
(Able to eat hypo food)

##### Step 1

Give fast acting Carbohydrate  
e.g. \_\_\_\_\_

##### Step 2

**Recheck BGL in 10-15 mins** if  
BGL <3.9 mmol/L

##### Repeat Step 1

If BGL greater than or equal to  
<4.0, go to **Step 3**

##### Step 3

Give 10g long acting  
carbohydrate, if next meal/  
snack is more than 20 mins  
away.

#### SEVERE

**Student drowsy / unconscious**  
(Risk of choking / unable to  
swallow)

- First Aid DRSABCD
- Stay with unconscious student
- Administer Glucagon if available

**CALL AN AMBULANCE**  
**DIAL 111**

Contact parent / carer when  
safe to do so.

#### STUDENT WELL

Recheck BGL in 2 hours

- Encourage 1-2 glasses water per hour
- Return to usual activity
- Extra toilet visits may be required
- Re-check BGL in 2 hours
- Do not restrict students access to food.

In 2 hours, if BGL still  
greater than equal to 15.0  
mmol/L

**CALL PARENT / CARER**  
**FOR ADVICE**

#### STUDENT UNWELL

e.g. Vomiting  
Contact parent/carers to collect  
student ASAP

Student's name:		Place photo of student here
Age:	DOB:	
Date:		
School name:		

Parent / Carer's name:	Contact phone:
Other contact name:	Contact phone:
Treating Medical team:	Contact phone:

**INSULIN** injections are needed (cross out if not applicable)  
At home and school pre-meals OR at home

Insulin required: <input type="checkbox"/> At morning tea Frequency:	Person responsible for giving insulin
<input type="checkbox"/> At lunch time Frequency:	Person responsible for calculating insulin dose

**Student is able to inject insulin** (cross out if not applicable) with  
assistance / with supervision / independently

#### BGL CHECKING TIMES

- Anytime and anywhere at school
- Before morning tea and before lunch
- Before activity and exercise
- Before exams and tests

#### PHYSICAL ACTIVITY

- Consider giving long-acting carbohydrate food before every 30 mins of planned activity if BGL < 6.0 mmol/L
- Playtime does not usually require additional carb



New Zealand Child & Youth  
Clinical Network

<sup>1</sup>Te Kaiwhakahaere Māori te Roopu mate huka Debbie Rawiri-Te Whatu Ora Waitaha Canterbury