

# TYPE 2 DIABETES ACTION PLAN: 2026

## (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 GL 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 GL in 10-15 mins** If  
GL <3.9 mmol/L

#### Repeat Step 1

If GL 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 GL in 2 hours

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

In 2 hours, if GL 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:

### MEDICATION

Insulin required (dose and frequency)

Person responsible for giving insulin:

Other medication required (dose and frequency)

Person responsible for giving medication:

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

#### GL 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 GL < 6.0 mmol/L
- Playtime does not usually require additional carb