

# Chapter E

**Preparing for Home** 





# **E:** Preparing for Home

# **E1: Ongoing Support**

#### Contact

You will be offered a home visit shortly after discharge from hospital. The nurse may be able to make a visit to home within the first few weeks.

How often you meet with your nurse will be a joint decision between you.

#### School visits



If you/your child attends school or nursery, a nurse will go into school soon after discharge to discuss with staff how to manage diabetes in school. It is helpful for parents and children to attend this first meeting so that a care plan can be discussed and agreed. Parents may need to go into school initially until the designated staff feel confident to manage all aspects of caring for diabetes within the school environment. Training will need to be updated annually.

#### Structured Education

You will be invited to attend structured education group sessions. They are sessions for newly diagnosed children and their families as well as days for children and young people at specific times like moving to high school or leaving home/going to University.

There are regular pump showcase events for those thinking about insulin pump therapy or those changing pump after a 4 year contract.

#### **Psychology**

A diagnosis of diabetes is a big event and it is normal to experience a number of feelings such as sadness, being shocked, angry and upset. As part of our team a psychologist may be available during your clinic appointments. If these feelings continue or you are worried, our psychologists in the team can try and help. Your diabetes nurse can talk to you about this.







#### **Dental Health**

Caring for teeth is also an important part of good diabetes care. Hypo treatments are sugary and can damage teeth without good tooth care. It is important to rinse your mouth with water after treatment.

Brushing twice a day with a small headed toothbrush and a small amount of toothpaste will help to remove all the debris from food that causes plaque, a sticky film of bacteria that causes gum disease.

Visiting the dentist regularly for check ups, preventative advice and treatments will help to keep a healthy smile. Remember to tell the dentist that you have diabetes.

If a general anaesthetic is required for treatment then you would be referred to a specialist dentist.

#### Foot care

Good foot care for children with diabetes is important

- Wear slippers or shoes at all times
- · As children's feet grow quickly, check that shoes and socks are well fitting
- · Check for blisters and cuts and see a doctor if they are not healing
- · Seek advice for infections such as athletes foot, verrucae or ingrowing toe nails

The blood vessels supply oxygen and nutrients to the muscles and nerves. The blood vessels in the feet can be damaged by persistently high glucose levels. This means that they cannot supply enough oxygen and the nerves can be damaged. This causes reduced sensation in the feet, so that small injuries that are usually noticed are not felt.

Because of this, you can be referred to a community podiatrist if there are problems with feet.





#### **Disability Living Allowance**

All children with diabetes under 16 years old are eligible to apply for Disability Living Allowance (DLA). Everyone can apply but it does not mean that your child will be registered as disabled. The payment is to help with the extra cost and attention that children with diabetes require (attending appointments) It is not usually paid to children over the age of 16.

You may obtain forms from the benefits agency on **0800 121 4600**. Alternatively, you can complete the forms online. Your nurse will be able to help you.

https://www.gov.uk/disability-living-allowance-children/how-to-claim

# **E2: Support groups for Parents and Children**

DigiBete



DigiBete is a video platform and App created in partnership with the Diabetes Team at Leeds Children's Hospital for use by families nationally. The videos are designed to help people and families self-manage their Type 1 Diabetes. The App is now available to every family in England and Wales, your clinic will give you a code. The DigiBete App also complements the information in this workbook.



#### **JDRF**

The Juvenile Diabetes Research Foundation is a charitable organisation that funds research into diabetes. They are committed to fundraising and increasing the awareness about the condition.



dedicated to finding a cure





#### **Diabetes UK**

This is a charity helping people living with diabetes. They provide support and information for people with diabetes and their families. They organise weekends for children and families and provide holidays for children of different ages. They have a care line and online information on their website <a href="https://www.diabetes.org.uk">www.diabetes.org.uk</a>



#### E3: Immunisations

It is important that all children and young people with diabetes receive their routine immunisations. It is recommended that all children and young people on treatment for diabetes have an additional immunisation against pneumococcal infection after the age of 2 years and annual influenza immunisation after the age of 6 months.

#### **E4**: Transition

As you become older, we will start to prepare you for becoming more independent and eventually transferring your care to the Young Adult Team. We will make sure that you know how to manage your diabetes, as your parents may have done all this for you if you were very young when you were diagnosed with diabetes.

Transition starts around 12-13 years of age; we have separate clinics for those aged 13-16y and 16+years. You will see your consultant, young people's diabetes nurse, dietitian and sometimes a psychologist. You will usually see the team on your own first, before your parents are invited into the room. This is to encourage independence and to allow privacy. You will also have the opportunity to see the nurse or dietitian to discuss any issues in private. Your information is confidential and will not be given to anybody else without your permission, unless you are at risk of harm.

You will be offered an appointment at least every 3 months, but may be asked to come more often. Adolescence is a difficult time and the effects of hormones mean that it is difficult to achieve an HbA1c close to target of 48mmol/mol. You will need to increase your insulin doses quite often whilst you are growing rapidly, and may need to decrease them when you stop growing.

#### **Young Adults**

When you are about 19 years old, you will be transferred to the care of the Young Adult Team. You will attend the Young Adult Clinic and will usually see the Consultant on your own; however, you can bring a friend, relative or partner to clinic with you if you feel more comfortable.

When you reach the age of 25, or sooner if you feel ready, you will be transferred to the general Adult Clinic. This could also mean a change of Consultant, Nurse or clinic day.

For young women who wish to become pregnant there is a special preconception clinic. Women who become pregnant will be referred to diabetes ante natal clinic, irrespective of age.





#### Diabetes, drugs and alcohol.

Drinking excessive alcohol or taking drugs can be dangerous for anyone, and there can be added risks for young people with diabetes. It is important that you feel comfortable talking to the team about drugs and alcohol and that you ensure you get the appropriate advice if this is something you are involved in. The nursing and dietetic team can advise you on managing your diabetes around alcohol. We can also talk to you about drugs and help you find support if you feel like it has become a problem in your life. You will not be judged for any of the things you are doing, and we may be able to help you maintain your personal safety if you speak with a member of the team.

Information and conversations shared with the team is confidential, unless it is felt that the individual is putting themselves or someone else at serious risk.

It is very important not to start smoking, as the combination of diabetes and smoking leads to an increased risk of heart disease. People with diabetes who smoke can be referred to a Smoking Cessation service. We will discuss driving regulations and can advise on careers, leaving home etc.

#### E5: When to contact the team

# Guide for when to contact the diabetes team so that changes can be made before the next clinic appointment.

The diabetes team is there to help. Please email or contact your nurse if you are not sure what to do next. There is never a daft question! Always ring the office or emergency numbers (if urgent out of hours).

Some ideas about when to contact the team are listed:

#### Hypoglycaemia

- Following a severe hypo.
- If there are more hypos than usual or they occur regularly with exercise.
- · If there is impaired hypo awareness or night time hypos.
- Always contact your team if you have any worries or questions.

### High Blood glucose levels

- · If there is a trend over a few days with your blood glucose levels rising into double figures.
- If weekly average blood glucose level (see meter) is rising above 9.0mmol/l.

#### Variable swinging blood glucose

If glucose levels are swinging and you are uncertain what to do.