

**Diabetes Risk Plan**

**Participant’s Name:**

**Date plan begins:**

**Date Plan expires:**

**Dates of Revisions:**

**Written by:**

**Risk:**       is at risk of experiencing hypoglycemia or hyperglycemia.

**Desired Outcome:**       will eat a healthy diet, exercise regularly, and take medications as prescribed**.**  Staff will respond as trained if symptoms of diabetes are exhibited.

**Why at risk/History:**

[**Type 1 diabetes**](https://www.medicinenet.com/type_2_diabetes/quiz.htm), once known as juvenile diabetes or insulin-dependent diabetes, is a chronic condition in which the pancreas produces little or no insulin. Insulin is a hormone needed to allow sugar (glucose) to enter cells to produce energy. Insulin works like a key to let glucose (blood sugar) move out of the blood and into the cells where it is used as fuel for energy. When the pancreas doesn’t produce insulin, the body cannot move sugar into the cells and too much sugar stays in the blood. Insulin can't be taken orally to lower blood sugar because stomach enzymes will break down the insulin, preventing its action, and needs to be administered either through injections or an insulin pump.

**Hypoglycemia** is a condition caused by a very low level of blood sugar (glucose), your body's main energy source.

**Hyperglycemia** occurs when the level of glucose in the blood is higher than it should be. If it is left untreated, it can lead to many serious and life-threatening complications that include damage to the eye, kidneys, nerves, heart, and the peripheral vascular system.

**Supports and interventions:**

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* Staff will encourage       to regularly exercise and eat a healthy diet.
* **High sugar foods to avoid:**
	+ White bread
	+ Pasta, unless whole grain
	+ White rice
	+ White flour, and products made with it such as cake, cookies, crackers, pretzels, doughnuts, bagels, and muffins
	+ Potatoes and potato chips
	+ Sugar and products with added sugar, like canned fruits in syrup
	+ Jams and jellies containing added sugars
	+ Raisins
	+ Pineapple
	+ Honey
	+ Syrups
	+ Salad dressings and sauces with added sugar, such as Teriyaki sauce
	+ Fruit drinks containing added sugar
	+ Sugar-cured meats
	+ Regular soda
	+ Candy

**Monitor:**

* **Symptoms of hyperglycemia (high blood sugar):**
	+ Extreme thirst
	+ Frequent urination
	+ Dry or itching skin
	+ Hunger
	+ Blurred vision
	+ Drowsiness
	+ Nausea
	+ Slow-healing wounds, cuts, or sores,
	+ Increased susceptibility to infections
* **Symptoms of skin breakdown and foot injury:**

**If walk, gait, or pace are unusual or complaint of foot pain:**

* + Check the tops and bottoms of feet
	+ Check for dry cracked skin
	+ Look for blisters cuts, scratches, or other sores
	+ Check for redness, increased warmth, or tenderness
	+ Check for ingrown toenails, corns, and calluses
* **Symptoms of hypoglycemia (low blood sugar):**
	+ Glucose reading below 70
	+ Shaking
	+ Fast heartbeat
	+ Sweating
	+ Anxiety
	+ Dizziness
	+ Hunger
	+ Impaired vision
	+ Weakness/ fatigue
	+ Headache
	+ Irritability

**Notify:**

* **CALL 911 if there is weakness or numbness of body, sudden confusion, difficulty talking, dizziness, loss of balance or difficulty walking, blood sugar is above** **, emergency intervention was necessary, such as, back blows, abdominal thrusts, CPR, etc., exhibiting multiple or severe symptoms, if more than first aid is needed for injuries, if they hit their head, any type of reaction that interferes with the ability to breathe or swallow, rapidly worsening symptoms, or loss of consciousness.**
* Notify Program Manager and Health and Safety Tech and/or Nurse of any symptoms of hyperglycemia or hypoglycemia, change of condition, or concerns.
	+ Health and Safety Tech and/or Nurse will check sugar.
	+ If sugar level is       (low), give a 4-6 oz. of regular soda or orange juice to drink. After 15 minutes, give a few crackers. Recheck sugar. If sugar level is still       (low), repeat step.
	+ If sugar level is       (above normal range), give water to drink check sugar after 15 minutes. **If sugar level is still** **(high) or above, CALL 911.**
* Program Manager will notify family, guardian, other Program Managers, and/or Providers of any symptoms of hyperglycemia or hypoglycemia, change of condition, or concerns.
* Staff will document on incident report by end of shift.

**If 911 is called:**

* Remain with       until EMTs arrive. If emergency intervention was necessary, continue as trained until relieved by EMTs.
* Ensure that emergency personnel are aware of all medical conditions, allergies, and medications.
* Follow       to the hospital and remain with participant until relieved by staff or family.
* Complete an incident report by end of shift and BDDS report within 24 hours.

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| **Provider** |  | **Risk Plan** |  |  | **Date Effective** |
| **Paladin** | **Diabetes** |  |
| **Print Name** | **Signature** | **Company/Title** | **Date** |
|  |  | **Paladin/Program Manager** |  |
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