



# Managing your diabetes needs while in hospital

WA Health is working to support you to manage your diabetes needs while in hospital. People with diabetes look after their condition every day: working out insulin doses, recording blood glucose levels, and making food and activity choices. We recognise that you are the expert in the daily care of your diabetes. If you want to manage your diabetes while in hospital, you might be able to do so in some WA public hospitals.

This guide will give you the information you need to understand:

- What is expected from you when managing your diabetes, specifically insulin
- What is expected from your treating team (the nurses and doctors looking after you)
- The agreement you and your treating team will make to keep everyone safety while you are in hospital

If you are going to hospital as a planned admission talk to your treating team during your first outpatient appointment. You can find information on WA public hospitals here: <a href="https://ww2.health.wa.gov.au/About-us/Hospital-Information">https://ww2.health.wa.gov.au/About-us/Hospital-Information</a>

#### Our self-management agreement

If you wish to manage your own insulin, please tell your treating team when you come into hospital. They will work with you to assess your needs and where agreed, will support you to manage while in hospital. Both you and your treating team will need to have

an agreement with each other – you can see more about this agreement on the next page. This agreement is necessary to ensure your safety and the safety of others.

Your treating team will also discuss a plan to support you if you become unable to manage your insulin during your stay, or if your blood glucose levels do not meet the agreement we have made. The plan and agreement will be stored in your medical record.

If you don't want to manage your insulin and would prefer that your treating team help you, that's okay too – it's all about working together to find the right balance for you to support your health, safety, and wellbeing while in hospital.

## For further information on the development of this guide

This Information Guide was developed by the Diabetes Health Network in partnership with the Diabetes Lived Experience Working Group.

Health Network Unit <a href="mailto:healthpolicy@health.wa.gov.au">healthpolicy@health.wa.gov.au</a> (08) 9222 0200

Dedicated to Nancy McKenna and her lifelong advocacy for people's right to safely manage their own diabetes in hospital.

#### Your responsibilities

## ☑ Demonstrate you can look after your own insulin needs

It's important that you can show your treating team that you're able to manage your diabetes. Discuss your recent history of glucose management with your treating team, show them you can test your blood glucose levels, that you understand your insulin dosing, that you can give yourself insulin, and can manage your hypoglycaemia treatment. This helps everyone feel confident that managing your own insulin is the most appropriate option for you.

## ☑ Communicate with us when you check and dose

Your treating team is here to help you, and to do that well they need to know what's going on. It's important that you let a nurse know when you need to have a dose of insulin, so they can record your dose and the time you took it on your medical chart. You'll also need to commit to testing your blood glucose regularly and sharing the levels with the treating team, so they can fully support you.

#### ☑ Store your insulin safely

When you agree to manage your own diabetes, you also agree to look after your insulin and keeping others on the ward safe. This means your insulin must be stored securely out of sight, for example in a locked bedside drawer or locker. Hospital policy may require that your insulin is stored elsewhere, but even if it is, we commit to ensuring that it is readily available to you when you need it. Talk to the nurse who is supporting you when you are admitted to find out what is required are at your hospital.

#### Our commitment to you

#### ✓ Keeping you safe

Sometimes it won't be possible for you to safely manage your diabetes if your ability is reduced (for example, after general anaesthesia or during sedation; if you are experiencing a severe infection or vomiting; or if your vision, hands, or arms have been impaired). If this happens your diabetes management will transfer to your treating team. The team will manage your diabetes with guidance and input from the hospital's diabetes inpatient team and where possible, from you too.

#### **☑** Menu choices

We acknowledge that having appropriate menu choices is important to your health. We are committed to making sure that you have a variety of nutritious choices available and that, where possible, meal timing supports your management. If you need access to a dietitian, please let your treating team know.

#### **☑** Hypo treatment

We understand that many people prefer to use their own hypoglycaemia treatment, but your treating team will also make sure that you have access to both quick-acting and follow-up carbohydrate should you require it to treat hypoglycaemia during your stay. It is important to let the nurse looking after you know if you are having a hypoglycaemic event, so they can document this in your medical record and help you if you need it.

## This document can be made available in alternative formats on request for a person with disability.

#### © Department of Health 2021

Copyright to this material is vested in the State of Western Australia unless otherwise indicated. Apart from any fair dealing for the purposes of private study, research, criticism or review, as permitted under the provisions of the *Copyright Act 1968*, no part may be reproduced or re-used for any purposes whatsoever without written permission of the State of Western Australia.