

**Name:**

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| **Educational Goal** | **FULLY ACHIEVED****(√ / NA)** | **PARTIALLY ACHIEVED****(√ / NA)** | **GOALS TO WORK TOWARDS** | **DATE & SIGNATURE** |
| **GOAL** | **REVIEW DATE** |
| **Diabetes Knowledge**Young people should: |       |       |       |
| * Have a good knowledge of how the body works in order to understand the range of issues that they may face in the future.
 |       |       |
| * Know about all major body organs such as the heart, kidneys, liver and pancreas.
 |       |       |
| * Be familiar with the circulatory system, the digestive system and the process through which nutrients are absorbed by the body.
 |       |       |
| * Understand the action of insulin.
 |       |       |
| **Food**Young people should: |       |       |       |
| * Gain a deeper understanding of nutrition and food in general, including energy producing foods, vitamins and minerals and suitable portion sizes.
 |       |       |
| * Feel competent at carbohydrate counting when away from home.
 |       |       |
| * Learn how to cook healthy meals at home.
 |       |       |
| * Apply the principles of good nutrition to daily situations such as playing sports, eating fast food and going to parties.
 |       |       |

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| **Food Continued…** |       |       |       |
| * Understand that excess amounts of fat or protein will have adverse effects on blood glucose levels.
 |       |       |
| * Be able to count the carbohydrate content of foods using suitable resources (including books, apps and websites if required).
 |       |       |
| **Exercise**Young people should: |       |       |       |
| * Know that blood glucose levels should be checked before exercise, which readings mean that they need to take a ketone test, and which readings mean that they need to eat more carbohydrate before exercising.
 |       |       |
| * Know that their target blood glucose before sport is       mmol/l, and that they should not exercise if ketones are above       mmol/l.
 |       |       |
| * Understand that daily activity, including exercise, is essential for a healthy heart, bone strength and weight management, even if they don’t like sports.
 |       |       |
| * Be able to apply all relevant exercise precautions to avoid low glucose levels, whether they compete in competitive sporting events or follow an exercise routine, such as jogging or taking long walks.
 |       |       |
| * Know that activity and exercise can have a positive impact on their emotional health.
 |       |       |
| * Know how to prevent problems that can happen with their blood glucose levels during exercise or sport.
 |       |       |
| * Be made aware of any special rules about the use of their medication in competitive sports at national or international level.
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| **Insulin**Young people should: |       |       |       |
| * Know the name(s) of the insulin(s) they use and how they work.
 |       |       |
| * Understand how the type of insulin they take affects when it must be injected with respect to mealtimes.
 |       |       |
| * Be almost fully independent in matching blood glucose readings, diet and exercise to appropriate doses of the different insulins they use.
 |       |       |
| * Have a greater understanding of the relationship between food, exercise and insulin.
 |       |       |
| * Be able to examine and care for their injection/infusion sites and have an understanding of the need for zonal site rotation.
 |       |       |
| * If using an insulin pump, they should be able to:
 |       |       |
| * Order supplies.
 |       |       |
| * Perform an infusion set change, programme the device and

 use advanced bolus features. |       |       |
| * Use a continuous glucose monitor (CGM).
 |       |       |
| * Calculate the dose and inject insulin in the event of a pump

 failure. |       |       |
| * Know how to obtain a replacement pump and how to

 programme it. |       |       |

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| **Blood Glucose Testing**The young person must measure and interpret their blood glucose levels.They should be able to explain: |       |       |       |
| * The causes of high and low blood glucose levels.
 |       |       |
| * The symptoms of high and low blood glucose levels.
 |       |       |
| * How to prevent and treat either condition.
 |       |       |
| * The long-term implications of blood glucose levels outside the normal range.
 |       |       |
| They should: |       |       |       |
| * Be able to interpret downloads of blood glucose readings, continuous glucose monitor (CGM) readings and pump settings.
 |       |       |
| * Understand that it is important to keep records of blood glucose levels and insulin doses. This information will help them assess their diabetes control and to adjust insulin doses. This may be in a diary, via data downloads or using a smartphone app.
 |       |       |
| * Understand that blood glucose levels are a tool to help them to manage their diabetes, and are not just for the clinic staff.
 |       |       |
| **Hypoglycaemia or HYPO (blood glucose less than** **mmol/l)**Young people should: |       |       |       |
| * Understand the importance of teaching their friends and schoolmates about diabetes precautions, especially the symptoms and treatment of hypoglycaemia.
 |       |       |
| * Know when and how to treat hypoglycaemia so that they can instruct potential helpers.
 |       |       |
| * Know the importance of checking their blood glucose levels after treatment to ensure that a normal blood glucose level is restored.
 |       |       |
| * Understand that treatments for hypoglycaemia should be a part of the emergency kit, and that they should be able to instruct others in their use.
 |       |       |
| Young people should know that they will have the opportunity to revise how to use glucagon annually, and must check its expiration date regularly |       |       |
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| **Hyperglycaemia or HYPER (blood glucose more than       mmol/l)**Young people should: |       |       |       |
| * Know the causes and symptoms of high blood glucose levels and precautions to avoid them.
 |       |       |
| * Know the importance of checking for blood ketones in case of hyperglycaemia.
 |       |       |
| * Understand the results of the ketone test and know the appropriate action to take.
 |       |       |
| * Be able to treat high blood glucose levels successfully by themselves.
 |       |       |
| * Keep records of their blood glucose levels and insulin doses to monitor their diabetes and to adjust the insulin dose as required.
 |       |       |
| Young people should know that they will have the opportunity to revise how to use glucagon annually, and must check its expiration date regularly |       |       |
| **Illness** |       |       |       |
| * The young person must be able to take appropriate precautions when they are ill, including more frequent testing of blood glucose and testing for blood ketones, even if blood glucose levels are not out of range.
 |       |       |
| * They should know how to adjust insulin to accommodate a fever and how to handle episodes of nausea and vomiting.
 |       |       |
| * They must realise that it may be necessary to get help from the diabetes care team and have their contact numbers available.
 |       |       |
| * They should be aware of preventative medicine such as vaccines.
 |       |       |
| **Long-term Complications** |       |       |       |
| * The young person should know about the different follow-up examinations that are necessary, including:
 |       |       |
| * Their individualised HbA1c target and what it means
 |       |       |
| * Blood pressure monitoring
 |       |       |

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| **Long-term Complications continued…**  |       |       |       |
| * Blood investigations.
 |       |       |
| * Urine testing for microalbuminuria.
 |       |       |
| * Checking sensation in the feet.
 |       |       |
| * Eye examinations.
 |       |       |
| * They should know why and how these tests are performed, how the results are evaluated and what treatments are possible if any tests show signs of long-term complications.
 |       |       |
| * They also should know how to arrange their own retinopathy screening and any local arrangements for accessing their annual reviews.
 |       |       |
| **Alcohol**Young people should receive advice regarding alcoholic drink. They need to know that: |       |       |       |
| * They should eat when they are drinking.
 |       |       |
| * Different alcoholic drinks have different effects on blood glucose.
 |       |       |
| * They must eat foods containing long-acting carbohydrates and test their blood glucose level before going to sleep.
 |       |       |
| * They run significant risks if they drink too much.
 |       |       |
| * They may overlook the symptoms of hypoglycaemia and mistake them for the effects of alcohol.
 |       |       |
| * There is an increased risk of hypoglycaemia after alcohol consumption, including while sleeping and, particularly, after exercise.
 |       |       |
| * The liver will not release its glucose stores in the event of a severe hypo (hypoglycaemic episode).
 |       |       |
| Because of these risks, they must know to: |       |       |       |
| * Eat extra food when drinking and take less insulin if necessary.
 |       |       |
| * Have a reliable plan for waking up the morning after drinking.
 |       |       |

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| **Alcohol continued…** |       |       |       |
| * Inform their friends about the relationship between drinking alcohol and blood glucose levels, so that if they develop hypoglycaemia it is not mistaken for inebriation.
 |       |       |
| **Smoking** |       |       |       |
| * The young person should understand the effects that smoking could have on their diabetes and long-term health.
 |       |       |
| * If they have started smoking, they should be made aware of how to get help to stop smoking.
 |       |       |
| **Substance Misuse** |       |       |       |
| * The young person should be told of the effects that recreational drugs and substance misuse could have on their blood glucose control, and where advice and support to help to stop can be accessed locally.
 |       |       |
| **Sex and Pregnancy**Young people should: |       |       |       |
| * Know the importance of practicing safe sex and how to access contraception, including emergency contraception.
 |       |       |
| * Understand that barrier contraception should be used to protect against sexually transmitted infections.
 |       |       |
| * Be made aware that they can talk to any team member if they have any concerns about sexual dysfunction
 |       |       |
| * Understand that having diabetes does not prevent them from becoming pregnant, but that it does pose certain risks during pregnancy and that they must inform their diabetes care team immediately if they suspect they could be pregnant.
 |       |       |

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| **Sex and Pregnancy continued…** |       |       |       |
| * Know how to ensure the safest possible pregnancy by:
 |       |       |
| * Achieving excellent blood glucose control before attempting

 to get pregnant. |       |       |
| * Reviewing medications and adding folic acid supplements.
 |       |       |
| * Achieving excellent blood glucose control throughout

 pregnancy. |       |       |
| * Making frequent visits to the diabetes clinic.
 |       |       |
| * Taking frequent blood glucose tests.
 |       |       |
| **Travel**Young people should: |       |       |       |
| * Be able to travel independently not only locally but also abroad.
 |       |       |
| * Be secure in their knowledge of the extra precautions necessary to maintain good blood glucose control while travelling.
 |       |       |
| * Be aware of the importance of good blood glucose control before beginning a trip.
 |       |       |
| * Be well informed about special diabetes concerns, such as how to carry and store insulin.
 |       |       |
| * Know that it is advisable to carry some form of identification stating that they have been diagnosed with diabetes and require insulin.
 |       |       |
| * Know the importance of taking out travel insurance and the amount of cover they require.
 |       |       |

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| **Driving**Young people should: |       |       |       |
| * Refer to the most up-to-date guidelines issued by the Driver and Vehicle Licensing Agency (DVLA), which covers insurance, hypoglycaemia management and carrying identification.
 |       |       |
| * Be advised about the process for applying for a licence including the declarations that will be required.
 |       |       |
| **Transition**Young people should: |       |       |       |
| * Be able to describe the transfer of their care and work with the diabetes team in setting their own goals.
 |       |       |
| * Start seeing members of the team on their own and feel confident in managing the consultation.
 |       |       |
| * Be able to discuss any issues around consent and patient confidentiality with their team.
 |       |       |
| * Start to meet members of their young adult diabetes team.
 |       |       |
| * Inform their friends about the relationship between drinking alcohol and blood glucose levels, so that if they develop hypoglycaemia it is not mistaken for inebriation.
 |       |       |
| **Social Factors**Young people should: |       |       |       |
| * Know how to access their general practitioner (GP) and be informed about prescription rules with respect to diabetes care services, insulin, insulin pens, blood glucose meters, test strips, pump supplies etc.
 |       |       |
| * Start to order and collect their prescription themselves.
 |       |       |
| * Be aware that from the age of 18 years they will require a prescription exemption certificate from their GP.
 |       |       |
| * Be able to discuss strategies for the management of their diabetes during exams.
 |       |       |
| * Know that there are very few jobs that they can’t do because of their diabetes, but that there are some jobs for which people with type 1 diabetes may not apply.
 |       |       |
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| **Social Factors continued…** |       |       |       |
| * Know that it may be harder for a person with diabetes to get certain types of insurance.
 |       |       |
| * Be made aware of precautions relating to body piercing and tattooing.
 |       |       |
| * Have an understanding of patient confidentiality and the opportunity to contact their team members directly if they wish.
 |       |       |
| **Emotional Wellbeing**Young people should understand that: |       |       |       |
| * They should have regular opportunities to discuss their thoughts and feelings, including any worries about their diabetes, experiences of bullying or concerns about matters such as body image.
 |       |       |
| * At least once a year they will be asked questions about their emotional wellbeing to check whether they need and extra support.
 |       |       |
| * If they need emotional support or help with managing the impact of diabetes on their life, they will be offered the chance to talk to the clinical psychologist attached to the team (if available).
 |       |       |
| * They should ask for support from their diabetes team if any aspects of their diabetes care are causing major conflict at home or with friends.
 |       |       |
| * They should ask for help from their parents/carers or their diabetes team if they feel that any aspect of their care is becoming overwhelming.
 |       |       |

**Record any other education provided or notes here:**

**Authorisation date:** **Date of next revision:**