## LIFE WITHOUT BARRIERS



- Only staff trained by a Health Professional, such as a Registered Nurse, Diabetic Nurse Educator or Pharmacist, can perform this procedure.
- This procedure is a guide only and may not be appropriate in all circumstances. Therefore, instructions from a Health Professional must always be obtained and followed.
- Staff must have access to and understand the Safe Operating Procedure for the specific glucometer.
- This procedure should be read with the <u>NDIS LWB 5600 High</u> <u>Intensity Daily Personal Activities - Procedure</u>, <u>NDIS LWB 5501</u> <u>Health and Wellbeing – Procedure</u>, <u>LWB National Medication</u> <u>Procedure</u> and in consultation with the person we support or their care plan.

The person's support requirements should be documented by an AQHP, such as a General Practitioner, Diabetes Specialist (Endocrinologist), or Diabetes Educator in a Diabetes Management Plan.

## **Testing with Glucometer Procedure**

# ✓ Check

- The Disability Support Leader<sup>1</sup> will ensure instructions for any specific glucometer are available to Disability Support Workers.
- Refer to and follow the person's Diabetes Management Plan.
- Confirm how the person would like to be actively involved in their support, as outlined in their plan, and to their chosen level.
- Explain the procedure to the person and seek their consent to proceed.
- Set up and check the equipment.
- Check the expiry date on the test strip packet.
- New glucometers should already be calibrated. However, if the glucometer is older, turn it on and ensure it is calibrated to the test strip batch by following the instruction manual.

<sup>&</sup>lt;sup>1</sup> All references to Disability Support Leader (DSL), includes all Frontline Leadership roles, such as House Supervisor.

## Support

#### Emergency Response

• Refer to the person's Diabetes Management Plan. If the results are outside the normal range and do not respond to the actions in the plan, contact a healthcare professional.

#### Signs and symptoms of Diabetic Ketoacidosis (DKA)

• If the person shows signs of (DKA), call emergency services on 000 immediately.

#### **Severe Signs**

- Confusion
- Extreme fatigue
- Flushed skin
- Nausea and vomiting
- Trouble breathing

#### Other Signs and Symptoms

- Feeling drowsy, confused or weak
- Having deep, rapid breathing or shortness of breath
- Having tummy pain
- Not keeping fluid down or having persistent vomiting or diarrhoea
- Showing signs or having symptoms of dehydration such as extreme thirst, dry mouth, weakness, confusion, and not urinating
- Having a 'fruity' smell to their breath
- The most accurate way to check for ketones is to use a blood glucose meter that checks for blood ketones.
- A person should be checked for ketones every 2–4 hours when they are unwell. In addition, the person should have a sick day action plan explaining what action to take for what blood or urine ketone level.
- There should be a sick day plan and response to DKA in the Diabetes Management Plan.

#### Errors can occur in blood glucose monitoring.

The most common sources of error include:

- Technique, e.g., not washing or drying the person's hands.
- Not enough blood was applied to the test strip to read the BGL.
- Incorrect storage or handling of the test strips.
- Equipment problems, e.g., the machine is not calibrated to the test strip batch for older types of glucometers.

#### For Continuous and flash glucose monitoring

- The device may fall off or not be effective if the person spends much time in the water or perspires a lot. A device that has fallen off can not be reattached, and a new one must be used.
- If the Sensor is not sticking to the person's skin, this may mean the site is not free of dirt, oil, hair or sweat.
- Skin irritation may occur at the Sensor application site. If the irritation is where the adhesive touches the skin, contact a healthcare professional to identify the best solution.
- Gather the necessary equipment:
  - Blood glucose measuring machine (glucometer)
  - Test strips
  - Lancet device with lancets
  - Cotton wool ball/tissue
  - Non-sterile gloves
  - Sharps container
  - Blood glucose monitoring chart
- Wash your hands and put on the appropriate PPE.
- Assist the person to wash their hands with warm water and soap, then dry them thoroughly. Any presence of water, sugar, lotions, and creams on fingers can alter the results.
- Warm water stimulates blood flow to the fingers. Therefore, placing fingers in warm water is extremely helpful during the colder weather.
- Assess the person's fingers to select a finger-prick site. Select the location on one side of the centre of a fingertip. Avoid the thumb and forefinger, if possible, and rotate the site.
- Massage the finger from palm to fingertip in a gentle 'milking' action to promote blood flow to the fingertip.
- Remove a test strip from the container, then firmly close the lid. Avoid touching the reactive part of the test strip or the glucometer sensor.
- Place the strip in the glucometer or on a clean, dry surface (paper towel) according to the manufacturer's instructions
- Follow the safe operating procedure for the glucometer, as each brand varies
- Prick the finger using the lancet device and apply gentle pressure to the finger.
- Place the test strip at the edge of the drop of blood. The strip will absorb the blood to measure the BGL.
- Place a cotton ball or tissue on the puncture site and ensure the person is comfortable.
- Dispose of the lancet and test strip in the appropriate sharps disposal container.

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- Check the reading on the glucometer and record it as necessary.
- Re-Check the person's Diabetes Management Plan to identify if the reading sits within the listed normal range.
- Clean the glucometer regularly according to the manufacturer's instructions (it is a good practice to clean the machine each time a new container of test strips is opened or following any blood spills).
- Store the glucometer and equipment in the case provided by the manufacturer in a dry place at room temperature, not in the kitchen or bathroom.

#### Measuring Ketones

People with type 1 diabetes can suffer from a severe condition called diabetic ketoacidosis (DKA). This is a result of high ketones making the blood too acidic.

If a person's health care provider recommends frequent testing to check for increasing ketone levels, at-home blood testing meters are available to check glucose and ketones.

Most cases of ketoacidosis occur in people with type 1 diabetes; it rarely occurs in people with type 2 diabetes.

DKA may happen when a person:

- is unwell
- has an infection
- has not taken their insulin
- has not taken enough insulin

# 題 Report

- Record the blood glucose level on the <u>NDIS LWB 5559 Blood Glucose Level</u> -<u>Recording Chart.</u>
- Record results and refer to Diabetes Management Plan. If results stay outside of the normal range, contact and report to a healthcare professional.
- Report any concerns or issues related to the person's BGL testing, BGL levels or diabetes support immediately to the DSL or On Call.

# **Further Advice**

For further advice, please contact the AQHP who developed the person's Diabetes Management Plan or the person's General Practitioner.