

Technology Support Document for Health Care Professionals looking after people with Type 2 Diabetes

In 2022 NICE Guidelines (NG28) were updated to include provision of diabetes technology for some people with Type 2 Diabetes. We have included a flowchart on the next page which explains the people NICE recommends should have access to diabetes technology.

The way in which you look after the people in your service with Type 2 Diabetes will differ from place to place and the pathway your patients will follow will be decided at local levels. Whatever pathway model you adopt, this guide aims to provide a support framework, providing the educational and implementation support your healthcare professionals (HCPs) may need around diabetes technology to be competent to look after people living with T2 diabetes.

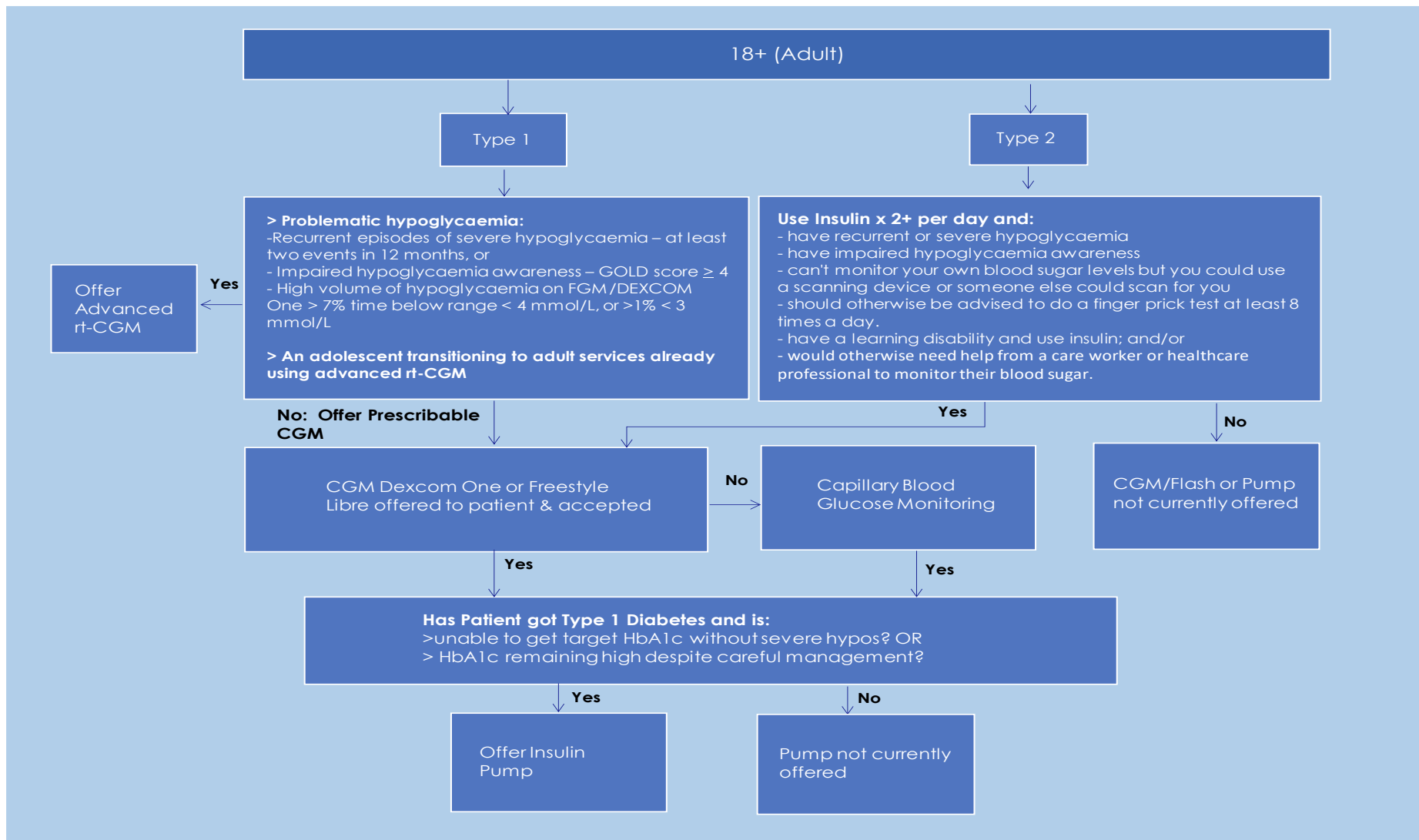
The first section of this document is a flowchart illustrating guidance on eligibility to diabetes technology (section 1). Although this flow chart discusses people with type 1 and type 2 Diabetes, in this context this guide is aimed to support you with people with type 2 diabetes.

Section 2 is a standardised letter template as an example that can be issued to a person with Type 2 Diabetes inviting them to try intermittently scanned continuous glucose monitoring (isCGM) or real time continuous glucose monitoring (rtCGM). Once you have completed a search to find the eligible people in your care with Type 2 Diabetes (as detailed in the flowchart provided in section 1 of this document), this letter can then be issued to all identified people.

Section 3 provides an example Healthcare Professional Competency Framework for isCGM/rtCGM.

Section 4 provides suggested educational resources that healthcare professionals can utilise in order to achieve competence. It also details suggested technology educational resources that can be provided to people with Type 2 Diabetes to provide additional information and education.

Section 1:



Section 2: Example isCGM/rtCGM Monitoring Invitation for a Person with Type 2 Diabetes

Dear [insert name of person living with type 2 diabetes]

You have been identified to be eligible for an intermittently scanned continuous glucose monitor or a real time continuous glucose monitor. These devices are designed to support your self-management of diabetes.

The devices involve wearing a sensor which remains in situ on your skin for 10-14 days depending on the device. In most cases a reduction in ‘finger prick’, capillary blood glucose monitoring can be made. The sensor in some cases needs to be scanned with either a phone or a reader, this is intermittently scanned continuous glucose monitoring. Some devices you don’t need to scan the device, this is real-time continuous glucose monitoring. The sensors that do need to be scanned work through clothing and are water resistant. They can be worn whilst in the shower, bath, when swimming and while exercising.

When using a smart phone with your sensor, you will need the appropriate application (App) and most of the devices have an alternative reader which can be used if you don’t have a smart phone or access to a smart phone.

We would recommend that you watch the following videos to help you understand the devices that would be on offer to you. With Freestyle Libre 2 you can access a 14 day free trial of the device.

<p>Website link to Dexcom One: https://www.dexcom.com/en-GB/learn-dexcom-one</p> 	<p>Website link to Libre: Home FreeStyle Libre Abbott</p>  <p>Get Your free trial: https://sample.freestyle.abbott/gb-en/freestylelibre/sign-up.html</p>
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If you want to pursue access to this technology longer term, then please make an appointment with your provider of diabetes care.

This letter has been sent to you as you have been identified as eligible for this diabetes technology. To avoid disappointment, please do not share this letter with others as not everyone is currently eligible for this technology.

Section 3: Healthcare Professional Competency Framework for isCGM and rt-CGM (adapted from the TREND nursing competencies)

Skills and experience with isCGM/rtCGM currently sit with specialist teams. Education and training needs for primary care healthcare teams needs to be addressed. Having a wider range of practitioners in primary care familiar with this technology will aid increasing capacity to support the expansion of the criteria and new people living with diabetes who become eligible.

Healthcare professionals should work where possible to a competency framework. An example can be seen in table below.

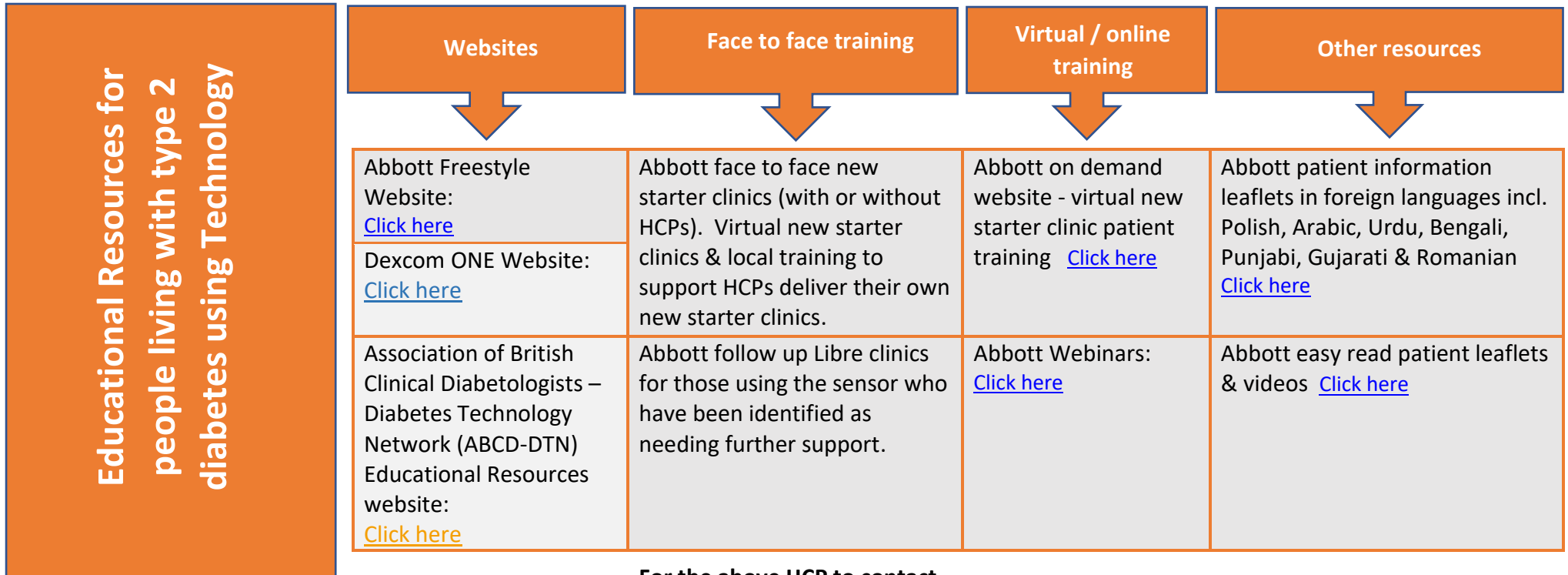
<p>1. Unregistered practitioners (e.g. nursing home staff, HCAs)</p>	<p>To be able to scan someone’s isCGM sensor using either the persons smart phone/reader or using their own device.</p> <p>To know what a normal range for a reading is.</p> <p>To know the roots to gaining support from a registered HCP if results are significantly out of range.</p> <p>Follow the policy for safe disposal of the sensors.</p> <p>Follow local quality assurance procedures.</p> <p>Recognise the signs and symptoms of hypoglycaemia and treat appropriately.</p> <p>Understand the alarms associated with the isCGM/rtCGM and respond appropriately.</p>
<p>2. Competent HCPs (e.g. practice nurse, GP, PCN pharmacist)</p>	<p>Teach a person how to apply and use isCGM/rtCGM.</p> <p>Identify and demonstrate an understanding on when the isCGM/rtCGM is not appropriate and further testing is needed e.g. for measuring ketones, if there is concern that the isCGM/rtCGM is not working, driving etc.</p> <p>Be able to advise on appropriate individualised targets for isCGM/rtCGM.</p> <p>To be able to advise on the frequency of scanning that would be recommended with isCGM.</p> <p>To be able to do basic interpretation of isCGM/rtCGM data and action a plan in response to readings that are outside of the individuals target ranges.</p>
<p>3. Experienced or proficient HCPs (e.g. members of PCN DiAST)</p>	<p>To be proficient at more complex interpretation of isCGM/rtCGM.</p> <p>To be proficient at teaching the person with diabetes and their carers how to interpret their own isCGM/rtCGM data and empower people to act in response to results when needed.</p> <p>Provide support and mentorship to more junior staff to improve competence and confidence.</p>



<p>4. Senior or expert HCP (e.g. diabetes specialist nurse, consultant medic, GPWSI consultant pharmacist)</p>	<p>Initiate rtCGM/isCGM considering the functionality of the devices and the needs of the individual.</p> <p>Help develop local guidance/strategy to enable more access to isCGM/rtCGM.</p>
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Section 4: Educational Resources

<p style="writing-mode: vertical-rl; transform: rotate(180deg);"> Educational Resources for Healthcare Professionals using Diabetes Technology </p>	Websites	Face to face training	Virtual / online training	Other resources
	Abbott Primary Care Website: Click here	Abbott HCP face to face training	Abbott Freestyle Training Academy: Click here	Abbott resources: Click here
	Dexcom Healthcare Professional website: Click here	Dexcom HCP face to face training	Abbott Webinars: Click here	
	Association of British Clinical Diabetologists – Diabetes Technology Network (ABCD-DTN) Education for Healthcare Professionals Website: Click here	Abbott face to face new starter clinics (with or without HCPs). Virtual new starter clinics & local training to support HCPs deliver their own new starter clinics.	Dexcom Modular learning: Click here	Eden Education Package: Click here
	Abbott follow up Libre clinics for those using the sensor who have been identified as needing further support.	For the above contact your Abbott or Dexcom Territory Manager to arrange.	Trend Diabetes training modules: Click here	Abbott Care Home & District Nurse training: Click here



**For the above HCP to contact
 Abbott Territory Manager to
 arrange.**