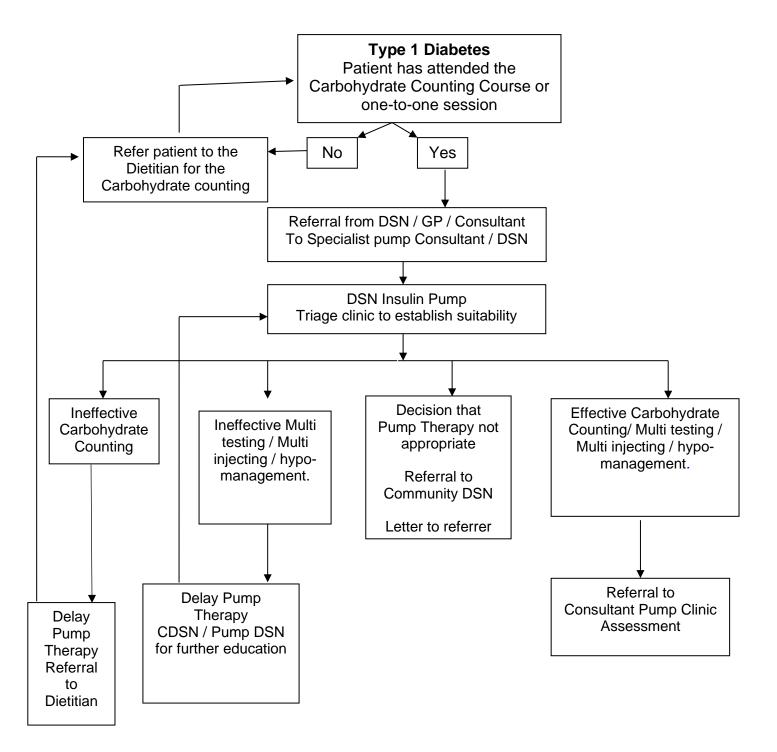


Adult Insulin Pump Service Pathway Continuous Subcutaneous Insulin Infusion (CSII) Clinical Guideline

V3.0

June 2022

Summary



1. Aim/Purpose of the guideline

- 1.1. This referral pathway provides the process for Adults with Type 1 Diabetes who require assessment for and management of insulin pump therapy.
- 1.2. The purpose of this pathway is to provide a planned consistent approach for Adults with Type 1 diabetes who require assessment for and management of insulin pump therapy. The pathway intends to ensure that relevant NICE criteria is followed and that the process is equitable countywide.
- 1.3. Continuous subcutaneous insulin infusion or 'insulin pump' therapy is recommended as a possible treatment for adults and children 12 years and over with Type 1 Diabetes mellitus if:
 - Attempts to reach target haemaglobin A1C (HbA1c) levels with multiple daily injections result in the person having disabling hypoglycaemia, or
 - HbA1c levels have remained high (8.5 % / 69 mmol/mol or above) with multiple daily injections (including, if appropriate, the use of long-acting insulin analogues) despite a high level of care.
 - Insulin pump therapy should only be initiated by a trained specialist team and should only be continued if there has been a sustained improvement in blood glucose control.
- 1.4. Insulin pump therapy is not recommended for Type 2 Diabetes.
- 1.5. This pathway has been benchmarked against NICE (2008) guidance and sets out the local processes for:
 - 1. Initial Assessment
 - 2. Pump Clinic Assessment
 - 3. Commencing Insulin Pump Therapy
 - 4. Ongoing Assessment and Review.
- 1.6. This version supersedes any previous versions of this document.

Data Protection Act 2018 (General Data Protection Regulation – GDPR) Legislation

The Trust has a duty under the Data Protection Act 2018 and General Data Protection Regulations 2016/679 to ensure that there is a valid legal basis to process personal and sensitive data. The legal basis for processing must be identified and documented before the processing begins. In many cases we may need consent; this must be explicit, informed, and documented. We cannot rely on opt out, it must be opt in.

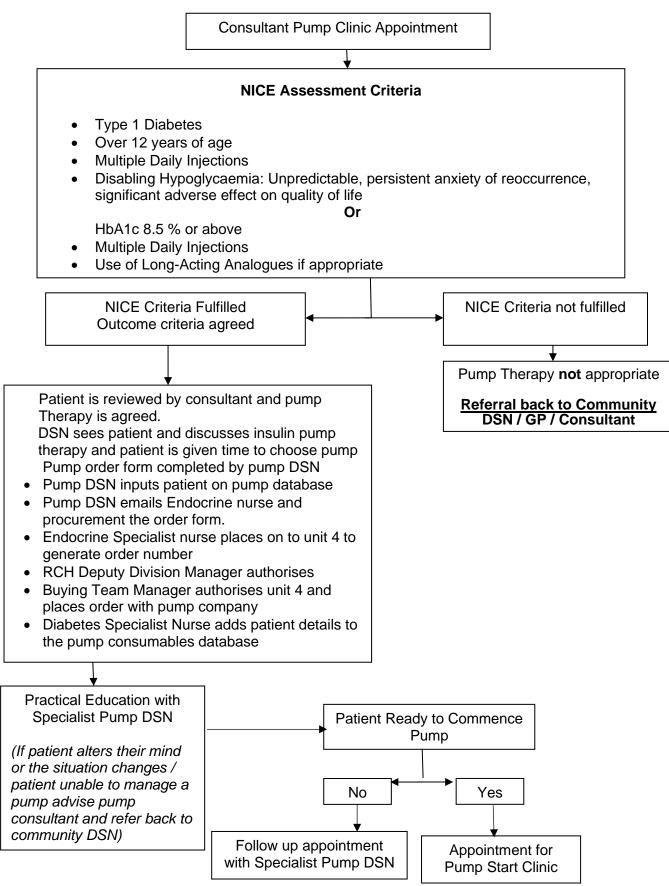
Data Protection Act 2018 and General Data Protection Regulations 2016/679 is applicable to all staff; this includes those working as contractors and providers of services.

For more information about your obligations under the Data Protection Act 2018 and General Data Protection Regulations 2016/679 please see the Information Use Framework Policy or contact the Information Governance Team

Royal Cornwall Hospital Trust rch-tr.infogov@nhs.net

2. The Guidance

2.1. Pump Clinic Assessment



Adult Insulin Pump Service Pathway Continuous Subcutaneous Insulin Infusion (CSII) Clinical Guideline V3.0

2.2. Commencing Insulin Pump Therapy/Pump Start Clinic

Patient Funding Commissioned, Agreed and in Place

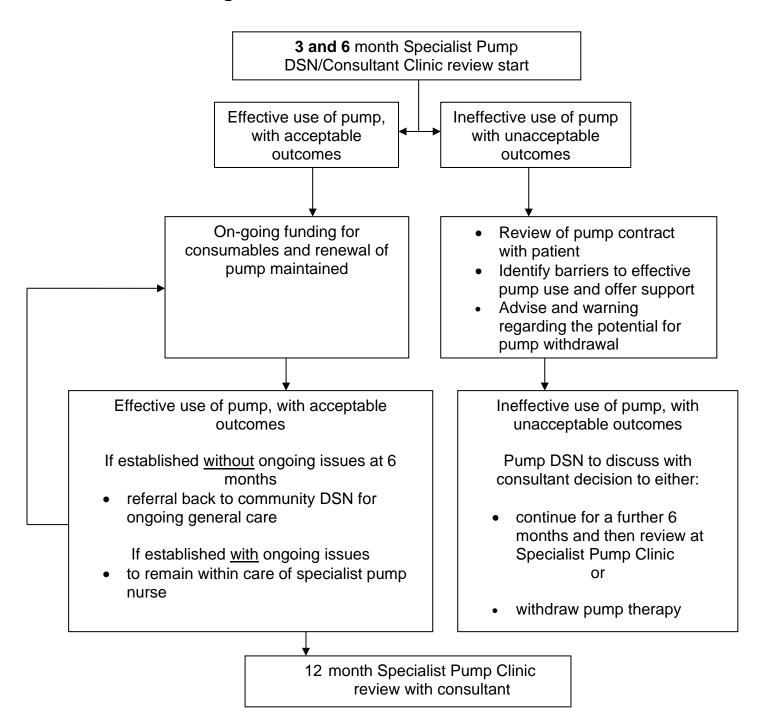
Specialist Pump DSN to

- Liaise with Insulin pump company for start date
- Book clinic date with patient and pump company
- Ensure above process for obtaining order number for pump/ consumables / replacement stock pump has been followed
- Liaise with GP surgery for Insulin prescription

Specialist Pump DSN Clinic

- Commences insulin pump therapy
- Provides ongoing support and liaison via telephone /virtual review via virtual web-based platform /face to face as appropriate
- Patient orders consumables directly from the pump company
- Pump company invoice RCH
- Endocrine Specialist Nurse cross references with consumable database

2.3. On-Going Assessment and Review



Patient New to County already established on a pump

- Patients' previous CCG should provide six months consumables.
- Patient previous Diabetes Team should directly refer to pump consultant for clinic review and contract agreement. If not referred by own area / GP then pump DSN to refer to consultant pump clinic

Patient moves out of the county

Specialist pump DSN;

- Informs RCH Buying Team Manager
- Ensures the patient has ordered 6 months of consumables

3. Monitoring compliance and effectiveness

Information Category	Detail of process and methodology for monitoring compliance
Element to be monitored	Compliance with the relevant process for patients seen at a Diabetes Team Review.
Lead	Specialist Adult Diabetes Team
Tool	Patient Documentation
Frequency	Adult with diabetes who are assessed / use Insulin Pump Therapy and who are reviewed by the specialist diabetes team
Reporting arrangements	Non-compliance will be reported to the responsible consultant, DSN and Endocrine performance operation manager
	Non-compliance resulting in an adverse patient event will be reported via Datix
Acting on recommendations	The consultant Endocrinologist, Lead DSN and Specialist Pump DSN will undertake subsequent recommendations and action planning for any or all deficiencies and recommendations within reasonable time frames.
and Lead(s)	The Specialist Adult Diabetes Team will undertake any trust wide recommendations and action planning for any or all deficiencies and recommendations within reasonable time frames.
Change in practice and lessons to be shared	Lesson learned or changes to practice will be shared with all the relevant stakeholders via Diabetes Team meeting.

4. Equality and Diversity

- 4.1. This document complies with the Royal Cornwall Hospitals NHS Trust service Equality and Diversity statement which can be found in the <u>'Equality, Inclusion & Human Rights Policy'</u> or the <u>Equality and Diversity website</u>.
- 4.2. Equality Impact Assessment

The Initial Equality Impact Assessment Screening Form is at Appendix 2.

Appendix 1. Governance Information

Information Category	Detailed Information	
Document Title:	Adult Insulin Pump Service Pathway Continuous Subcutaneous Insulin Infusion (CSII) Clinical Guideline V3.0	
This document replaces (exact title of previous version):	Adult Insulin Pump Service Pathway Continuous Subcutaneous Insulin Infusion (CSII) Clinical Guideline V2.1	
Date Issued/Approved:	4 March 2022	
Date Valid From:	June 2022	
Date Valid To:	June 2025	
Directorate / Department	Amanda Veall, DSN	
responsible (author/owner):	Claire Holme, Specialist Pump DSN	
Contact details:	01827 253104 Mobile: 07920295624	
Brief summary of contents:	The pathway sets out the local process for: 1. Initial Assessment 2. Pump Clinic Assessment 3. Commencing Insulin Pump Therapy 4. Ongoing Assessment and Review	
Suggested Keywords:	Diabetes Insulin Pump	
Target Audience:	RCHT: Yes CFT: No KCCG: No	
Executive Director responsible for Policy:	Medical Director	
Approval route for consultation and ratification:	Endocrine Governance Meeting	
General Manager confirming approval processes:	Rachel Pearce	
Name of Governance Lead confirming approval by specialty and care group management meetings:	Siobhan Hunter	
Links to key external standards:	DoH:NSF Diabetes 2001 standards 3 and 4	

Information Category	Detailed Information
Related Documents:	NICE (2008) technology appraisal guidance 151: Continuous subcutaneous insulin infusion for the treatment of diabetes mellitus
Training Need Identified?	No
Publication Location (refer to Policy on Policies – Approvals and Ratification):	Internet & Intranet
Document Library Folder/Sub Folder:	Clinical/ Endocrine and Diabetes

Version Control Table

Date	Version Number	Summary of Changes	Changes Made by
24 April 14	V1.0	Initial Issue	Amanda Veall
03 April 17	V2.0	Review date. Change of pathway from PCH funding to RCH funding Updated to reflect current template and current processes	Amanda Veall Lead DSN
10 May 18	V2.1	Updated as ordering process has changed since 2017	Amanda Veall Lead DSN
30 March 22	V3.0	Updated ordering process has changed since 2018	Claire Holme Pump Therapy Nurse

All or part of this document can be released under the Freedom of Information Act 2000

This document is to be retained for 10 years from the date of expiry. This document is only valid on the day of printing

Controlled Document

This document has been created following the Royal Cornwall Hospitals NHS Trust Policy for the Development and Management of Knowledge, Procedural and Web Documents (The Policy on Policies). It should not be altered in any way without the express permission of the author or their Line Manager.

Appendix 2. Equality Impact Assessment

Section 1: Equality Impact Assessment (EIA) Form

The EIA process allows the Trust to identify where a policy or service may have a negative impact on an individual or particular group of people.

For guidance please refer to the Equality Impact Assessment Policy (available from the document library) or contact the Equality, Diversity & Inclusion Team rcht.inclusion@nhs.net

Information Category	Detailed Information	
Name of the strategy / policy / proposal / service function to be assessed:	Adult Insulin Pump Service Pathway Continuous Subcutaneous Insulin Infusion (CSII) Clinical Guideline V3.0	
Directorate and service area:	Specialist Medicine, Endocrine	
Is this a new or existing Policy?	Existing	
Name of individual completing EIA (Should be completed by an individual with a good understanding of the Service/Policy):	Amanda Veall, Lead DSN	
Contact details:	01872 253104	

Information Category	Detailed Information	
Policy Aim - Who is the Policy aimed at?	To provide detailed guidance for all staff involved with the Adult Insulin Pump Service Pathway	
(The Policy is the Strategy, Policy, Proposal or Service Change to be assessed)		
2. Policy Objectives	To provide a consistent approach to the management of the Adult Insulin Pump Service	
3. Policy Intended Outcomes	A consistent approach to the assessment and management of Adults with Type 1 Diabetes using Insulin Pumps	
4. How will you measure each outcome?	Audit DATIX reporting Review of Medical / Nursing documentation as required	
5. Who is intended to benefit from the policy?	All adults with Type 1 Diabetes referred for Insulin Pump Therapy	

Information Category	Detailed Information		
6a. Who did you consult with? (Please select Yes or No for each category)	 Workforce: Patients/ visitors: Local groups/ system partners: External organisations: Other: 	Yes No No No No	
6b. Please list the individuals/groups who have been consulted about this policy.	Please record specific names of individuals/ groups: Consultant Endocrinologists, Diabetes Specialist Nurses, Consultant Biochemist Endocrine Governance Meeting		
6c. What was the outcome of the consultation?	Approved		
6d. Have you used any of the following to assist your assessment?	National or local statistics, audits, activity reports, process maps, complaints, staff or patient surveys: N/A as this is local service delivery and no patient complaints		

7. The Impact

Following consultation with key groups, has a negative impact been identified for any protected characteristic? Please note that a rationale is required for each one.

Where a negative impact is identified without rationale, the key groups will need to be consulted again.

Protected Characteristic	(Yes or No)	Rationale	
Age	No		
Sex (male or female)	No		
Gender reassignment (Transgender, non-binary, gender fluid etc.)	No		
Race	No		
Disability (e.g. physical or cognitive impairment, mental health, long term conditions etc.)	Yes	Adults with learning disability / sensory impairment could be offered this therapy but they would need to have a carer who is able to support use of the pumps, as adequate numeracy / literacy skills and sight / manual dexterity is required in order to have the ability to be able to carbohydrate count and to use the insulin pump correctly and safely.	

Protected Characteristic	(Yes or No)	Rationale
Religion or belief	No	
Marriage and civil partnership	No	
Pregnancy and maternity	No	
Sexual orientation (e.g. gay, straight, bisexual, lesbian etc.)	No	

A robust rationale must be in place for all protected characteristics. If a negative impact has been identified, please complete section 2. If no negative impact has been identified and if this is not a major service change, you can end the assessment here.

I am confident that section 2 of this EIA does not need completing as there are no highlighted risks of negative impact occurring because of this policy.

Name of person confirming result of initial impact assessment: Amanda Veall, Lead DSN

If a negative impact has been identified above OR this is a major service change, you will need to complete section 2 of the EIA form available here: Section 2. Full Equality Analysis