Flash glucose monitoring – Briefing for diabetes specialist services in North West London

The procedures outlined in this document are applicable to all patients registered with a General Practice in one of the 8 North West London Collaboration of CCGs (Central London, West London, Hammersmith & Fulham, Hounslow, Ealing, Brent, Harrow, Hillingdon).

FreeStyle Libre® is currently (in May 2019) the only flash glucose monitoring device listed in the NHS Drug Tariff. This guidance, however, will be applicable to any flash glucose monitoring devices which may be added to the Drug Tariff.

What is Flash Glucose Monitoring?

Flash glucose monitoring system is a device for the self-monitoring of glucose levels for people with diabetes aged 4 years and over. Unlike traditional finger-prick devices (that measure the glucose level in the blood), flash glucose monitoring measures the glucose level in the interstitial fluid, via a sensor that sits just under the skin. It can provide a near-continuous record, which is produced by the patient scanning the sensor with their reader-device, as and when required.

Is this a replacement for finger-prick blood glucose testing?

It is not a complete substitute for blood glucose testing. Blood glucose measurements are required in certain circumstances, including:

- during times of rapidly changing glucose levels when interstitial fluid glucose levels may not accurately reflect blood glucose levels
- to meet Driving and Vehicle Licensing Authority requirements for “Group 2” drivers (e.g. drivers of lorries or buses)
- when scanned glucose results do not correspond with the user’s symptoms
- to use the bolus calculator function
- where the reader indicates a low glucose reading

Are there any training resources for flash glucose monitoring?

NHS London Clinical Networks/NHS London Procurement Partnership have produced “FreeStyle Libre® Implementation Strategy – Training”.

Can the diabetes specialist service initiate flash glucose monitoring prescribing?

Yes. The North West London Collaboration of CCGs have agreed to adopt the "Guidance for the implementation of flash glucose monitoring prescribing across the NHS in London" produced by the NHS London Clinical Networks and NHS London Procurement Partnership.

Initiation of patients on flash glucose monitoring will be done by local diabetes specialist teams.
Flash glucose monitoring is only available on the NHS for people with diabetes on insulin treatment, **aged four years or over, who meet one or more of the indications detailed below**:

Indication 1
People with type 1 diabetes on multiple daily injections or insulin pump therapy who test frequently (>8 times per day).

Indication 2
People with type 1 diabetes unable to routinely self-monitor blood glucose due to disability who require carers to support glucose monitoring and insulin management.

Indication 3
People with type 1 diabetes for whom the specialist diabetes MDT determines have occupational (e.g. working in insufficiently hygienic conditions to safely facilitate finger-prick testing) or psychosocial circumstances that warrant a 6 month trial of flash glucose monitoring with appropriate adjunct support.

Indication 4
People with any form of diabetes on haemodialysis and on insulin treatment and are clinically indicated as requiring intensive monitoring >8 times daily

Indication 5
People with diabetes associated with cystic fibrosis on insulin treatment.

Indication 6
Pregnant women with type 1 diabetes (eligible for 12 months' supply of flash glucose monitoring inclusive of post-delivery period).

Indication 7
People with type 1 diabetes and recurrent severe hypoglycaemia or impaired awareness of hypoglycaemia, NICE suggests that Continuous Glucose Monitoring with an alarm is the standard. Other evidence-based alternatives with NICE guidance or NICE TA support are pump therapy, psychological support, structured education, islet transplantation and whole pancreas transplantation. However, if the person with diabetes and their clinician consider that a flash glucose monitoring system would be more appropriate for the individual's specific situation, then this can be considered.

The "Patient –Prescriber" agreement form provided to diabetes services can be completed on initiation and a copy given to the patient. There is no need to send this form to the patient's GP.

Diabetes services are not expected to offer additional appointments to review patients for flash glucose monitoring. Discussions and review for suitability for NHS prescribing of flash glucose monitoring should take place at routine, follow-up appointments.

Please note that the referral forms and patient-prescriber agreement forms produced with the London guidance have been adapted for use in NW London. Only those forms referred to in this document should be used in North West London for NHS prescribing.

How will CCGs be assured that diabetes specialist services are initiating patients in line with the London guidance?

Diabetes specialist services across North West London are required to submit an electronic Blueteq form to the CCG for

- all patients initiated on flash glucose monitoring
- patients currently self-funding who meet the criteria for NHS prescribing

The data submitted through Blueteq will allow the CCGs to monitor the uptake of flash glucose monitoring.

Following submission of the Blueteq form, you do not need to wait for approval from the CCGs before initiating flash glucose monitoring. The Blueteq form is solely for monitoring uptake of flash glucose monitoring across North West London.

A Blueteq user guide has been produced for diabetes specialist services. A user guide (including training manuals and videos) is also accessible from the *Help* menu when logged into Blueteq. If you still require support on using Blueteq then, in the first instance, contact your organisations's pharmacy team who are likely to be familiar with Blueteq system. If they are not familiar with Blueteq then contact the NWL CCG pharmacy team at NWLCSU.NWLmedmgt@nhs.net

Is the diabetes specialist service required to supply/prescribe flash glucose monitoring reader device and sensors?

Patients initiated on flash glucose monitoring will receive 2 months' supply of sensors from the diabetes specialist service.

Patients will receive an initial supply of the FreeStyle Libre® Starter Pack (containing a Reader device and one sensor) and an additional one sensor. Diabetes specialist services should liaise with their organisation's pharmacy team to agree supply mechanisms for the Starter Packs and sensors.

Patients initiated by the diabetes specialist service must be reviewed at week 4 post initiation. If patient is to continue on flash glucose monitoring then:

- a further 2 sensors are to be supplied by the diabetes specialist service
- Form FS1 must be completed and sent to the patient's GP within 2 weeks following the week 4 review. This is a request to the GP to issue acute prescriptions to the patient for up to a maximum of 4 months. **Ensure that the Blueteq Patient ID number is added to Form FS1. GPs have been advised to contact the diabetes specialist service where the Blueteq Patient ID number is missing**
- Inform the patient to contact their GP to obtain sufficient acute prescriptions from their GP to last until their next review appointment at the diabetes specialist service

Diabetes specialist services are not expected to supply sensors to patients who are currently self-funding. If, following review, these patients meet the criteria for NHS Prescribing, they are to be referred to their GP (using Form FS2) for repeat NHS prescriptions (see below).

The FreeStyle Libre® sensor can also be scanned using a smartphone following download of the free FreeStyle LibreLink App. Patients should use or be supplied with meters that use test strips that are in line with the NW London CCGs recommendations.

When should patients be referred to their GP for long term repeat NHS prescriptions?

Follow-up for patients initiated on flash glucose monitoring by the diabetes specialist service

The procedure up to the 3-6 month review after initiation is detailed above.
The diabetes specialist service should review all patients 3-6 months post initiation on flash glucose monitoring.

At the 3-6 months review the diabetes specialist service should confirm that the patient is scanning glucose levels no less than 8 times a day and has the sensor attached >70% of the time.

Patients should also be reviewed for the following outcomes of interest:

- Improvement in HbA1c
- Improved commitment to regular scans and their use in self-management
- Reduction in usage of blood glucose test strips
- Quality of Life improvement using validated rating scales
- Reductions in severe/non-severe hypoglycaemia
- Reduction in episodes of diabetic ketoacidosis
- Reduction in related admissions to hospital
- Reversal of impaired awareness of hypoglycaemia

If a patient is not regularly scanning at least 8 times a day or no improvement is

demonstrated in one or more of the outcomes of interest over a 3-6 month trial then the use of flash glucose monitoring should be discontinued and an alternative method of monitoring used.
In these cases the patient's GP must be informed of the recommendation to discontinue flash glucose monitoring and advised to stop further issues of acute prescriptions. The GP should also be informed as to the method of monitoring recommended and any requirements for prescriptions e.g. for blood glucose test strips, pen needles and lancets.

Following a satisfactory review at 3-6 months the patient should be referred to their GP to obtain repeat prescriptions for flash glucose monitoring sensors

Form FS2 must be completed and sent to the patient's GP within 2 weeks following the review. This is a request to the GP to issue repeat prescriptions to the patient. **Ensure that the Blueteq Patient ID number is added to Form FS2. GPs have been advised to contact the diabetes specialist service where the Blueteq Patient ID number is missing**

- Inform the patient to contact their GP to obtain future repeat prescriptions from their GP
- Inform the patient that their GP may undertake a review 1-2 months after first issuing a repeat prescription

<u>Patients currently self-funding who meet the criteria for NHS prescribing</u>

Patients currently self-funding should be reviewed to ensure they would have satisfied one or more of the criteria listed above prior to them commencing use of flash glucose monitoring had these criteria been in place prior to April 2019 **AND** that they have shown improvement in HbA1c since using flash glucose monitoring.

If, following review, these patients meet the criteria for NHS Prescribing, they are to be referred to their GP for repeat NHS prescriptions:

- Form FS2 must be completed and sent to the patient's GP within 2 weeks following the review. This is a request to the GP to issue repeat prescriptions to the patient. **Ensure that the Blueteq Patient ID number is added to Form FS2. GPs have been advised to contact the diabetes service where the Blueteq Patient ID number is missing.**
- Inform the patient to contact their GP to obtain future repeat prescriptions from their GP
- Inform the patient that their GP may undertake a review 1-2 months after first issuing a repeat prescription

What will be the role of GPs?

GPs, in agreement with the diabetes specialist service, will issue acute or repeat prescriptions for flash glucose monitoring sensors following receipt of Form FS1 or FS2.

GPs are requested to review the patient 1-2 months after patient has been set up to receive long term repeat prescriptions for flash glucose monitoring sensors.
This review should include a discussion with the patient about current frequency and appropriateness of testing with conventional blood glucose testing strips. Quantities of strips on repeat prescriptions should then be adjusted to meet current needs. GPs should also ensure that the blood glucose testing strips prescribed are in line with the CCG guidance.

Where a patient has issues with flash glucose monitoring GPs will refer the patient to the diabetes specialist service for review.