

To:

Chief Executive of Public Health Agency – **for distribution to:**

Director of Public Health – for cascade to:

Consultants in Public Health

Assistant Directors – for cascade to:

Nursing Teams

Allied Health Professional Teams

Chief Executives of HSC Trusts – **for distribution to:**

Medical Directors – for cascade to all relevant staff

Directors of Nursing – for cascade to all relevant staff

Heads of Pharmacy and Medicines Management –
for cascade to all relevant staff

Clinical and Social Care Governance Leads

Directors of Finance

Director of Integrated Care, HSC Board – **for distribution to:**

Assistant Directors – for cascade to:

Pharmacy and Medicines Management Team

Medical Advisers

General Medical Practices – for cascade to all
practice staff including GP locums

Community Pharmacists; and

Non-Medical Prescribers

For Information:

Chief Executive, Regulation & Quality Improvement Authority

Chief Executive, Patient and Client Council

Chair, RCGP

Pharmaceutical Contractors Committee

General Practitioners Committee

Regional Medicines Information Services

NIMDTA

NICPLDp

NIPEC

Permanent Secretary, DHSSPS

Chief Pharmaceutical Officer, DHSSPS

Chief Medical Officer, DHSSPS

25 August 2011

Dear Colleague

Re: Regional Prescribing Policy - Guidance on Self Monitoring of Blood Glucose in People with Type 2 Diabetes

The purpose of this letter is to draw your attention to the new regional guidance on the self monitoring of blood glucose (SMBG) for people with type 2 diabetes. The following guidance documents are enclosed:

- SMBG Summary
- SMBG Guideline

Background

In 2010/11 the Northern Ireland primary care expenditure on blood glucose test strips was in the order of £6.5million. This level of spend appears to be high when compared with other parts of the UK:

Aim

The aim of this guidance is to:

1. Update and harmonise previous guidelines, including those developed by legacy health and social care organisations.

2. Provide a framework from which the healthcare professional may work with the person with type 2 diabetes to agree individualised patient-centred support and education in the management of self monitoring of blood glucose.
3. Optimise diabetic care through supporting healthcare staff
 - a. to provide a consistent message to an individual with type 2 diabetes about self monitoring of blood glucose; and
 - b. to target resources appropriately.

Development of the guidance

This guidance has been developed by the Pharmacy and Medicines Management Team of the HSC Board in collaboration with specialists in diabetes care and endorsed for HSC by the Medicines Management Forum.

The guidance builds on NICE Clinical Guidance 87 and the report by NHS Diabetes Working Group “*Self monitoring of blood glucose in non-insulin-treated type 2 diabetes*” (2010).

Main Points of the Guidance

1. In people with type 2 diabetes, self monitoring of blood glucose (SMBG) with appropriate education should be available to those who use **insulin**. SMBG *may* also be appropriate in patients on drugs with the potential to cause hypoglycaemia (**sulphonylureas, meglitinides or incretin mimetics**) to assess glucose control and identify hypoglycaemic episodes.
2. In people with type 2 diabetes who are **not** treated with insulin, sulphonylureas, meglitinides or incretin mimetics, SMBG should only be used where there is an agreed purpose or goal to testing.
3. Where SMBG is deemed appropriate, targets, frequency, timing and duration of monitoring, should be agreed with the individual following discussion with a healthcare professional and documented.
4. A thorough assessment of SMBG should be conducted at least annually.

This advice does not override or replace the individual responsibility of health professionals to make appropriate decisions in the circumstances of their individual patients, in consultation with the patient and/or guardian or carer.

It is not appropriate to discontinue prescribing of blood glucose monitoring strips without review/discussion with the patient.

Action

HSC organisations and primary care practitioners should work collaboratively to implement this guidance. To this end, HSC Board Medicines Management Advisers will work proactively with GP practices to review the monitoring arrangements for patients with type 2 diabetes to ensure that prescribing of blood glucose test strips is in line with this guidance.

The guidance and support materials (review tool and patient information leaflet) are available on the HSC Board website at <http://www.hscboard.hscni.net/medicinesmanagement/index.html> and HSC Board primary care intranet site at http://primarycare.hscni.net/Medicines_Management.htm.

Yours sincerely



Mr John Compton
Chief Executive