Diabetes						
Task / Activity	Self- Assessment / Date	Competency Assessed Y / N	Competency Achieved	Signed off by Clinical Assessor / Date		
Tier 1	<u> </u>	<u> </u>	<u> </u>	<u> </u>		
Knowledge and Education						
 Demonstrate an understanding of the holistic approach to the care of a patient with 						
Diabetes						
 Demonstrate understanding of basic pancreatic anatomy and physiology 						
 Demonstrate understanding of metabolic physiology – How glucose and insulin are used by the body 						
 Demonstrate an understanding of the p-athophysiology of diabetes 						
 Demonstrate an understanding of the management and prevention for those at risk of diabetes.²⁸⁹ 						
• Demonstrate an understanding of the difference between type 1 and type 2 diabetes						
Demonstrate understanding of diabetes diagnostic criteria ²⁹⁰						
• Demonstrates Knowledge of the local and national guidance for management of Diabetes ²⁹¹						
 Demonstrate an understanding of how to facilitate the screening of the following micro and 						
macro vascular complications of diabetes :						
 Diabetic Nephropathy 						
 Diabetic Retinopathy 						

²⁸⁹ <u>https://www.nice.org.uk/guidance/ph38</u>

²⁹¹ https://www.nice.org.uk/guidance/ng28

²⁹⁰ https://cks.nice.org.uk/topics/diabetes-type-2/diagnosis/diagnosis-in-adults/

	 Diabetic Neuropathy²⁹² Cardiovascular Disease 	
	• Erectile Dysfunction	
	 Diabetic Leg and foot ulcers²⁹³ Gastroparesis 	
	 Periodontitis nonstrate understanding of biometrics needed for annual review in accordance with 	
	onal and local policy ²⁹⁴	
Dem use.	nonstrate understanding of what HbA1C is, how it is calculated and limitations for its	
	nonstrate and understanding of anti-hypertensive and statin medications, their actions side effects ²⁹⁶ .	
	nonstrate an understanding of the signs, symptoms and management of Diabetic ergencies ^{297 298}	
	nonstrate an understanding of frailty/frailty syndromes and how they may impact on a ent's diabetes and its management ^{299 300}	

²⁹² <u>https://www.nice.org.uk/guidance/cg173</u>

- ²⁹³ <u>https://www.nice.org.uk/guidance/ng19</u>
- ²⁹⁴ <u>https://www.nice.org.uk/guidance/qs209/chapter/Quality-statement-6-9-key-care-processes</u>
- ²⁹⁵ https://cks.nice.org.uk/topics/diabetes-type-2/diagnosis/diagnosis-in-adults/
- ²⁹⁶ <u>https://bnf.nice.org.uk/treatment-summaries/dyslipidaemias/</u>
- ²⁹⁷²⁹⁷ Diabetic hyperglycaemic emergencies | Treatment summaries | BNF | NICE
- ²⁹⁸ Hypoglycaemia | Treatment summaries | BNF | NICE
- ²⁹⁹ <u>https://www.nice.org.uk/sharedlearning/tackling-the-overtreatment-of-type-2-diabetes-in-frail-older-people-through-individualising-care-in-east-sussex-a-pharmacist-led-project</u>
- ³⁰⁰ <u>https://www.england.nhs.uk/ourwork/clinical-policy/older-people/frailty/frailty-resources/</u>

Patient Mai	anagement		
 At Diag 	gnosis:		
0	Be able to make onward referral to specialist services for patients diagnosed with Type 1 diabetes in line with local and national guidance. ³⁰¹		
0	Be able to elicit patients understanding of diabetes and where needed provide information and support to ensure the patient has a full grasp of what diabetes is and how it is managed		
0	Be able to explain to the patient that they will require an annual review, what this entails and the rationale ³⁰²		
0	Know how to refer the patients to diabetes education programme in line with local and National guidance		
0	Provide the patient with health promotion advice around diet and lifestyle ³⁰³ and make onward referrals as appropriate/available:		
	Weight ManagementHealth wellbeing coach		
	 Diabetes psychology Physical Activity on Prescription 		
0	 Diabetes dietitian Know how to refer patients to retinal screening in line with local and National guidance 		
0	Inform the patient of their right to exemption from prescription charge. ³⁰⁴		
0	Complete baseline set of care processes as set out in annual review.		
• At Revi	view:		

³⁰¹ https://www.nice.org.uk/guidance/ng17/chapter/Recommendations#diagnosis-and-early-care-plan

³⁰² <u>https://www.nice.org.uk/guidance/qs209/chapter/Quality-statement-6-9-key-care-processes</u>

³⁰³ <u>https://www.nice.org.uk/guidance/ng28/chapter/recommendations#dietary-advice-and-bariatric-surgery</u>

³⁰⁴ <u>https://www.nhsbsa.nhs.uk/check-if-you-have-nhs-exemption/medical-exemption-certificates</u>

• Be able to assess for Cardiovascular risk and provide appropriate advice and onward
referral for prevention interventions. ³⁰⁵
• Be able to perform annual review checks including ³⁰⁶ :
 Obtaining blood samples for:
• Hba1C
• eGFR
Serum Creatinine
Serum Cholesterol
 Be able to take a sample of urine to send for Albumin/Creatinine Ratio
(Urine ACR)
 Be able to perform blood pressure measurement
 Take measurements to enable calculation of BMI
 Smoking status
 Be able to perform a full foot risk assessment including:³⁰⁷ making onward
referrals as appropriate.
Be able to provide advice and information on appropriate foot care.
 Be able to provide smoking cessation advice where needed and signpost on to local stop smoking service
• Be able to provide health promotion advice around diet and lifestyle that is tailored to the
individual, taking account their ethnicity and their social, economic, cultural and family
needs. ³⁰⁸ Refer on as necessary.
• Be able to perform Capillary Blood Glucose (CBG) Monitoring when appropriate and be able to interpret results in line with local and national guidance. ³⁰⁹

³⁰⁵ https://bnf.nice.org.uk/treatment-summaries/cardiovascular-disease-risk-assessment-and-prevention/

³⁰⁶ https://www.nice.org.uk/guidance/qs209/chapter/quality-statement-6-9-key-care-processes#quality-statement-6-9-key-care-processes

³⁰⁷ <u>https://www.nice.org.uk/guidance/ng19/chapter/recommendations#managing-the-risk-of-developing-a-diabetic-foot-problem</u>

³⁰⁸ <u>https://www.nice.org.uk/guidance/ng28/chapter/recommendations#dietary-advice-and-bariatric-surgery</u>

³⁰⁹ <u>https://www.nice.org.uk/guidance/ng28/chapter/Recommendations#blood-glucose-management</u>

 Demonstrate an understanding of the need for ongoing CBG monitoring, taking safety, the impact on the patient and their lifestyle into account. Recognise the progressive nature of Type 2 diabetes and ensure follow up with appropriate clinician to discuss pharmacological management of diabetes, where needed³¹⁰. 		

³¹⁰ https://www.nice.org.uk/guidance/ng28/resources/visual-summary-full-version-choosing-medicines-for-firstline-and-further-treatment-pdf-10956472093