NHS
Staffordshire and Stoke-on-Trent
Integrated Care Board

Flash Glucose Monitoring and Dexcom One Commissioning Policy

Policy Number	Commissioning
Version:	3
Ratified by:	Staffordshire and Stoke-on-Trent ICB Quality and Safety Committee
Date ratified:	11th August 2023
Name of originator/author:	Sharon Cooper - Portfolio Transformation Lead ELF Amanda Lovatt - Head of Medicines Optimisation
Name of responsible committee/individual:	Staffordshire and Stoke-on-Trent Quality and Safety Committee
Date issued:	11th August 2023
Review date:	Three years from issue date unless significant changes are required
Date of first issue	25th April 2019. Updated May 2023
Target audience:	Organisation wide

CONSULTATION SCHEDULE

Name and Title of Individual	Groups consulted	Date Consulted
	South Staffordshire Area prescribing Group v1	22nd March 2019
	North Staffordshire Area Prescribing Committee v1	27th March 2019
	Stafford and Surround Cannock Chase Seisdon Peninsula Tamworth, Lichfield and Burntwood - Membership Boards East Staffs Steering Group North Divisional Committee V1	March/April 2019
	North Staffordshire Area Prescribing Committee v2	25th November 2020
	<u>Version 2</u> Rapid Decision Making process EMT Stafford and Surround Cannock Chase Membership Boards	 December 2020 December 2020 December 2020 February 2021
	Integrated Medicines Optimisation Group (IMOG) v3	2nd August 2023
	Staffordshire and Stoke-on-Trent Health and Care Senate.v3	3rd August 2023
Samantha Bostock RSM UK Risk Assurance Services LLP v3		Confirmed no issues 8th August 2023

RATIFICATION SCHEDULE

Name of Committee approving Policy	Date
Staffordshire CCGs Governing Board Meeting in Common v1	25th April 2019
Staffordshire CCGs Governing Board Meeting in Common v2	25th February 2021
Staffordshire and Stoke-on-Trent ICB Quality and Safety Committee v3	11th August 2023

VERSION CONTROL

Version	Version/Description of amendments	Date	Author/amended by
1	Policy written for the use of flash glucose monitoring	25th April 2019	Sarah Evans Kathryn Whitfield Amanda Lovatt
2	Addition of people with a learning disability who have diabetes and are treated with insulin as a new eligibility criterion.	25th February 2021	Sarah Evans Amanda Lovatt
3	Transferred from CCG to ICB format. Addition of Dexcom One to policy and guidance on how to choose device. Eligibility criteria remain the same. Removal of BlueTeq requirement.	May 2023	Sharon Cooper Amanda Lovatt

IMPACT ASSESSMENTS – available upon request

	Stage	Complete	Comments
Equality Impact Assessment	Stage 1	8th August 2023	Not completed for policy version 1 and 2- see original policy V3
Quality Impact Assessment	Stage 1	9th August 2023	Completed 2019 not re-assessed for v2. V3
Privacy Impact Assessment			Not applicable

Contents

This policy applies to the Staffordshire & Stoke-on-Trent Integrated Care Board.

1.0 Introduction

1.1 The NHS Long Term Plan announced that 'the NHS will ensure that, in line with clinical guidelines, patients with Type 1 diabetes benefit from life changing Flash Glucose monitors, ending the variation some patients are facing'[1].

1.2 Flash glucose monitoring systems measure the interstitial fluid glucose levels from a wearable sensor applied to the skin, this is designed to stay in place for 14 days and is an alternative to routine finger-prick blood glucose testing. This produces a near-continuous record of measurements which are relayed to a smart phone or e-reader, allowing patients with Type 1 diabetes to better manage their condition. Devices can also indicate glucose level trends over time. This is now referred to as intermittent scanned continuous glucose monitoring (isCGM)[2].

1.3 The intended place in therapy is as an alternative to routine blood glucose monitoring in people with type 1 diabetes aged 4 years and over who use insulin injections; this will reduce the usage of test strips. The system does not completely eliminate the need for finger-prick blood glucose measurements as these on occasions will still be required (e.g. during periods of illness, if this shows hyperglycemia or impending hyperglycemia, when symptoms do not match readings).

1.4 Since the policy was updated in 2021 there have been two major changes to the current provision of continuous glucose monitors.

1.4.1 The current flash glucose monitor used within the ICB is FreeStyle Libre 2 and until July 2023 was available to provide isCGM only. However, for patients who use the FreeStyle Libre 2 app on their smart phone the updated app available from July 2023 can provide real time continuous glucose monitoring (rtCGM). This does not apply to patients who continue to use the e-reader who will still be using the device as isCGM[3,4].

1.4.2 Dexcom One is now available for use. The use of Dexcom One will be the same as for flash glucose monitors except that Dexcom One can be used in children aged 2 years and above.

1.5 The Dexcom One monitoring system measures the interstitial fluid glucose levels from a wearable sensor applied to the skin. This is designed to stay in place for 10 days and is an alternative to routine finger prick-blood glucose testing. A transmitter is applied to the sensor and glucose readings are sent every 5 minutes to a compatible smartphone or a receiver. The transmitter lasts 90 days and can be used across multiple sensors. The device provides high and low alerts. This is rtCGM[2].

2.0 Aim and objective

2.1 The aim of this policy is set out the principles and implementation of Flash Glucose Monitors and Dexcom One across the Staffordshire and Stoke-on-Trent Health economy.

3.0 Scope

3.1 The scope of this policy is to outline eligibility criteria for flash glucose monitoring and Dexcom One for patients diagnosed with type 1 diabetes mellitus.

3.2 Type 1 diabetes or insulin treated type 2 diabetes who are living with a learning disability are also within the scope of this Commissioning Policy[5].

4.0 Roles and responsibilities

4.1 *Provider clinicians*

4.1.1 Flash glucose monitors or Dexcom One should be provided by a centre with expertise in its use, as part of strategies to optimise a person's HbA1c levels. Alongside the eligibility criteria the patient must meet other requirements:

(NOTE –Healthcare professionals will need to make appropriate reasonable adjustments for people with a learning disability who are being prescribed either flash glucose monitors or Dexcom One.)

- Education on flash glucose monitoring or Dexcom One has been undertaken (online or in person)
- For flash glucose monitors only agree to scan glucose levels no less than 8 times per day and use the sensor >70% of the time
- Agree to regular reviews with the clinical team
- Previous attendance, or due consideration given to future attendance, at a Type 1 diabetes structured education programme.
- Providers of are required to confirm a patient eligibility for the device.

4.2 *Primary Care Clinicians*

4.2.1 Primary care clinicians will prescribe either FreeStyle Libre 2 or Dexcom One following initiation by a provider.

4.2.2 Primary care clinicians will continue to prescribe FreeStyle Libre 2 or Dexcom One beyond 6 months following the providers 6-month review.

5.0 Eligibility Criteria for Flash Glucose Monitors or Dexcom One

5.1 People with Type 1 diabetes (who are clinically indicated as requiring intensive monitoring >8 times per day as demonstrated on a meter download/review over the last 3mths)

OR

Any form of diabetes on haemodialysis AND on insulin (who are clinically indicated as requiring intensive monitoring >8 times per day as demonstrated on a meter download/review over the last 3mths)

5.2 Diabetes associated with cystic fibrosis on insulin treatment

5.3 Pregnant women with type 1 diabetes (see Pregnancy section below)

5.4 People with Type 1 diabetes unable to routinely self-monitor blood glucose levels due to disability that requires carers to support glucose monitoring and insulin management.

5.5 People with Type 1 diabetes for whom the specialist MDT team determines has occupational (e.g. working in insufficiently hygienic conditions to safely facilitate finger-prick testing) or psychosocial circumstances that warrant a 6 month trial with adjunct support.

5.6 Previous self-funders of flash glucose monitors or Dexcom One with Type 1 diabetes where those with clinical responsibility for their care are satisfied that their clinical history suggests that they would have satisfied one or more of the criteria prior to them commencing use AND has shown improvement in HbA1c since self-funding.

5.7 For those with Type 1 diabetes and recurrent severe hypoglycaemia or impaired awareness of hypoglycaemia, NICE suggests that Continuous Glucose Monitoring (CGM) with an alarm is the standard. Please refer to the separate Commissioning Policy for CGM. However, if the person with diabetes and their clinician consider that a flash glucose monitor, or Dexcom One would be more appropriate for the individual's specific situation, then this can be considered.

5.8 People with Type 1 diabetes or insulin treated Type 2 diabetes who are living with a learning disability and recorded on their GP Learning Disability register.

6.0 Pregnancy

6.1 For Type 1 diabetic patients who are pregnant sensors will only be prescribed for a maximum period of 12 months (inclusive of the post-partum period). Should funding be required post the 12 months period then a review further review against the eligibility criteria will be required following the above procedure.

7.0 Factors to consider when choosing a continuous glucose monitoring device[2]

7.1 Accuracy of the device

7.2 Whether the device provides predictive alerts or alarms and if these need to be shared with anyone else (for example, a carer)

7.3 Whether using the device requires access to particular technologies (such as a smartphone and up-to-date phone software)

7.4 How easy the device is to use and take readings from, including for people with limited dexterity

7.5 Fear, frequency, awareness, and severity of hypoglycaemia

7.6 Psychosocial factors

7.7 The person's insulin regimen or type of insulin pump, if relevant (taking into account whether a particular device integrates with their pump as part of a hybrid closed loop or insulin suspend function)

7.8 Whether, how often, and how the device needs to be calibrated, and how easy it is for the person to do this themselves

7.9 How data can be collected, compatibility of the device with other technology, and whether data can be shared with the person's healthcare provider to help inform treatment

7.10 Whether the device will affect the person's ability to do their job

7.11 How unpredictable the person's activity and blood glucose levels are and whether erratic blood glucose is affecting their quality of life

7.12 Whether the person has situations when symptoms of hypoglycaemia cannot be communicated or can be confused (for example, during exercise)

7.13 Clinical factors that may make devices easier or harder to use

7.14 Frequency of sensor replacement

7.15 Sensitivities to the device, for example local skin reactions

7.16 Body image concerns

8.0 Implementation

8.1 Providers will inform primary care which device the patient has been initiated on see Appendix 2.

8.2 Providers are required to review patients at 6 months following initiation of the device. Continuing prescription for long term use of flash glucose monitors or Dexcom One post initial 6 months is contingent upon demonstration of an improvement in an individual's self-management (e.g. improvement in HbA1c or time in range, improvements in symptoms such as DKA or hypoglycaemia).

9.0 Commissioning Position

9.1 For information a copy of the patient pathway is attached as Appendix 1

10.0 Equality Impact Assessment

10.1 This policy has been assessed in relation to having due regard to (1) the public sector equality duty (PSED) three aims, dropping down from the Equality Act 2010 to: eliminate discrimination, harassment victimisation; advance equality of opportunity; and foster good relations", (2) The Health & Social Care Act 2012 re evidencing showing due regard to reducing health inequalities between the people of England.

10.2 Staffordshire and Stoke-on-Trent (SSOT) ICB has completed an internal Equality Impact Assessment when developing this policy

10.3 This Commissioning Policy relates to the Commissioning of a device to aid the management of patients with Diabetes, it is an alternative to routine blood glucose monitoring in people with type 1 diabetes who use insulin injections who would usually undertake a finger prick test.

11.0 Monitor and evaluation

11.1 The Staffordshire and Stoke-on-Trent (SSOT) ICB Medicine Optimisation Team will conduct clinical audits and data analysis to support the implementation of the policy and monitor ongoing compliance with the policy.

11.2 Evaluation of these results will be reviewed and shared with the relevant healthcare professional as shared learning and case study examples.

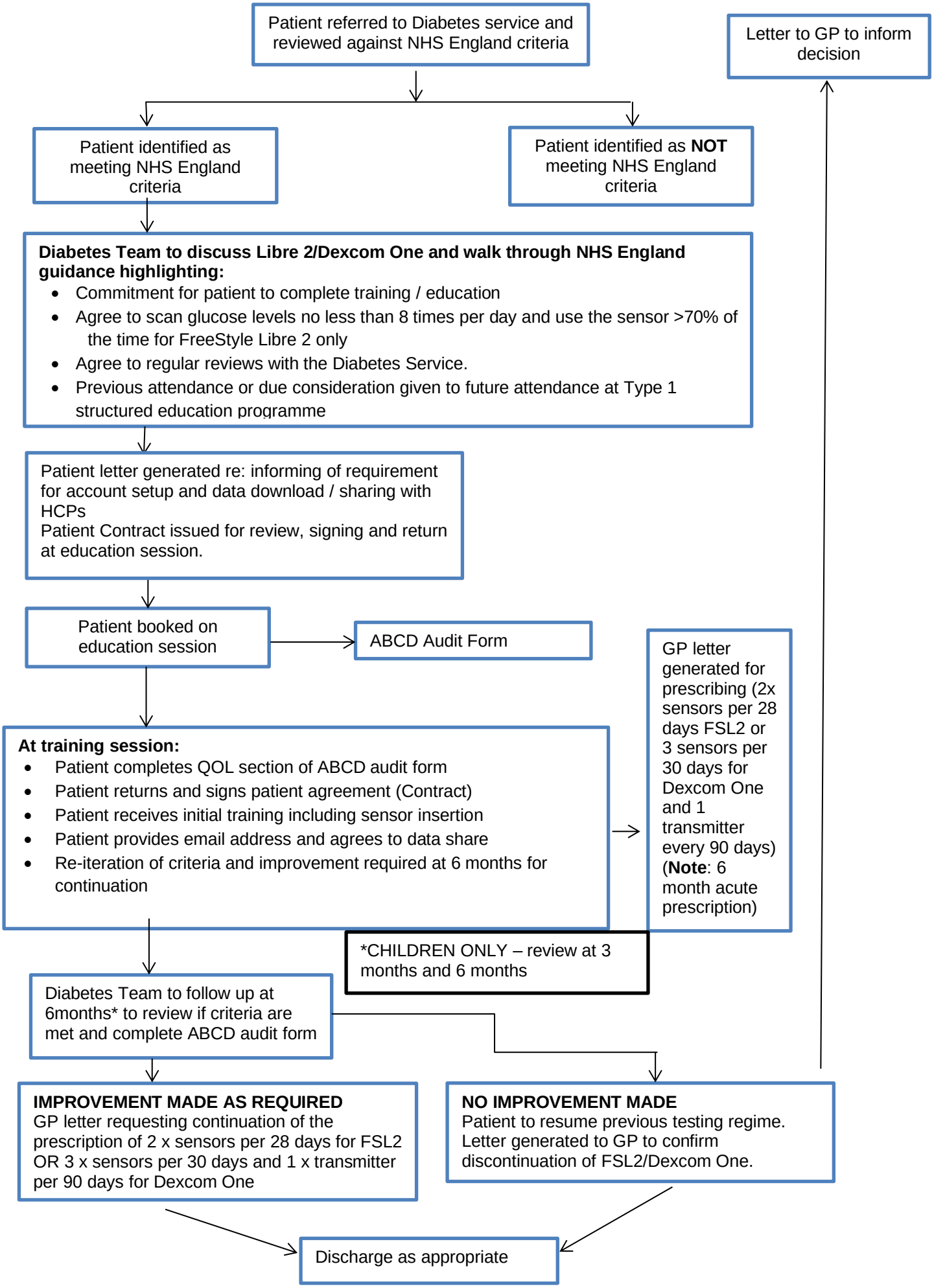
12.0 Policy development and review

12.1 The SSOT ICB policies will be reviewed no less than every three years from the date of approval. The lead person for the policy will be responsible for ensuring that the review is undertaken and where changes are required that the process of consultation on the revised arrangements is completed.

13.0 References

1. NHS England Flash Glucose Monitoring: National Arrangements for Funding of Relevant Diabetes Patients March 2019
2. National Institute for Health Care and Excellence. Type 1 diabetes in adults: diagnosis and management (nice.org.uk). NICE 26 August 2015 updated 17 August 2022. Available at https://www.nice.org.uk/guidance/ng17 Accessed on 25 May 2023
3. Abbott July 2023 available at https://www.freestyle.abbott/uk-en/freestyle-librelink-update.html. Accessed on 17 July 2023.
4. Abbott July 2023 Home | Healthcare Professionals | FreeStyle | Abbott Accessed on 17 July 2023
5. NHS England Comms Pack: Flash Glucose Monitors for people living with diabetes and a learning disability Nov 2020

Appendix 1- FreeStyle Libre 2/Dexcom One Pathway Adults / Paeds)



Appendix 2- GP Initiation Letter

GP Address

Date today

Dear GP

Patient NHS No:
Patient Hospital No:
Patient Initials and DOB:

Your patient has been reviewed today by the diabetes team and has met the NHS criteria for the initiation of FreeStyle Libre 2 or Dexcom One – *delete as appropriate*

Your patient has agreed to the following:

1. To be educated on flash glucose monitoring or Dexcom One
2. To scan glucose levels no less than 8 times per day and use the sensor >70% of the time **if using flash glucose monitoring**
3. To participate in regular reviews with the local clinical team and to share their data
4. A 6 month review to determine the continued prescribing of FreeStyle Libre 2 or Dexcom One
5. To sign a patient contract and agree personal target outcomes

Could you please add to the following to the patient's medication record:

FreeStyle Libre 2 sensors x 2 (28 day supply) OR
Dexcom One sensors x 3 (30 day supply) and Dexcom One transmitter x1 (90 day supply)
Delete whichever is appropiate

Your patient will be reviewed and followed up by the diabetes team in 6 months to ensure that the patient is still eligible to continue with FreeStyle Libre 2 or Dexcom One – *delete whichever is appropriate.* You will be informed of the outcome of this review.

Yours sincerely