



**DTN Committee Meeting
Friday 20th October 2023
10:00am – 12:00pm
MINUTES**

Present:

Shaun Carpenter (SC)
Pratik Choudhary (PC)
Jackie Elliot (JE)
Mark Evans (ME)
Geraldine Gallen (GG)
Una Graham (UG)
Claire Harris (CH) (RHI)

Sufyan Hussain (SH)
Amy Jolley (AJ)
Alistair Lumb (AL)
Eleanor Scott (ES)
Hannah Sutton (HS)
Emma Wilmot (EW)

Apologies:

Iain Cranston (IC)
Ketan Dhatariya (KD)
Anne- Marie Frohock (AMF)
Tim Street (TS)

1. Welcome

AL welcomed all to the meeting and extended a special welcome to HS who was unable to make the last meeting and introductions were made.

AL announced GG and SH's appointment as joint vice chairs of DTN following committee member vote. Apologies were noted from IC, KD, AMF, and TS.

2. Minutes from previous meeting held on 22nd August 2023 and review of actions.

The minutes of the meeting held on 22nd August 2023 were approved subject to the following amendments:

- Section 3.1 amendment of *"trying for pregnancy"* to *"pregnant women or trying for pregnancy"*.
- Correction to spelling of SH's name.

2.1 Review of actions.

- 2.1.1 Work together to produce a document supporting how the young people group should be moved higher up the prioritisation list.** It was noted that this would be required in the implementation phase and AL advised he will action this.
- 2.1.2 Produce an education pack to distribute to clinicians to support them with preparing for the roll out.** AL advised that GG is collating the documentation received so far with a view to provide education at regional meetings (see item 3.1).
- 2.1.3 Develop a list of key skills required to speed up the on boarding process.** AL advised that there is a list for review, based on the current DTN videos (See item 3.2)
- 2.1.4 Provide DTN support to Rose Stewart's psychology guidance document.** AJ reported that Rose Stewart is keen to meet up and discuss this further and she will keep the committee informed of the developments.

Item	Responsible	Action	Timescale
2.1	AL	Produce a document supporting how the young people group should be moved higher up the prioritisation list during implementation phase	December 2023
2.1.2	AL and GG	Produce an education pack to distribute to clinicians to support them with preparing for the roll out.	December 2023
2.1.2	PC and EW	Develop a list of key skills required to speed up the on boarding process.	December 2023
2.1.3	AJ	Keep the committee informed of meeting with Rose Stewart to provide DTN support to Rose Stewart's psychology guidance document	Ongoing

3. HCL roll-out – update

3.1 Prioritisation

AL reported that he engaged in a conversation with Partha, who emphasised the importance of exercising caution when discussing prioritisation. He explained that following this conversation, he is revising the previous committee discussions document. He advised that the re written document will highlight the following:

- Large numbers in England and Wales; approx. 140,000 people who are eligible (26,000 currently on pumps).
- The roll out cannot be done all at once.
- Local clinical teams will need to make decisions as to which patients should go onto HCL first.
- The aim to roll out HCL to all eligible patients over a 5-year period is a challenging task.
- The need to develop processes to meet demand for HCL technology in the eligible population over a 5-year period.
- Ensuring no inequalities in access to technology occur; potential inequalities need to be considered when making decisions and clinical teams will need to track their own data to ensure inequality does not appear in the process.
- Where roll outs have been successful in past the fewest criteria possible has been determined. Need to ensure prioritisation is realistic where HbA1c criteria are set.
- The Hb1bc over 10% group includes people who are struggling to engage with technology and not meeting the goals they would like.
- Local teams should consider other factors including children and young people up to age 25 and those with high diabetes distress.
- Need to consider people who are already on insulin pumps in the first phase as they already have many of the skills needed to use HCL successfully and recommend they may be a group where DTN can support access to HCL in a relatively short period of time for a larger group of people.
- Switching this group to HCL will also allow less experienced teams to learn about the system and not exclude people already on pumps from the roll out.
- Ensure that implementation teams are aware of current inequalities within people who use pumps.

AL confirmed that he would collate all these points into a document to share to the committee. He asked the committee to provide suggestions for inclusion.

The following was suggested:

- Consideration of pregnancy and a pre HCL pathway for those with high HB1C
- Training needs will be different between the categories of pump users.
- Clear definition of what prioritisation means to mitigate against an increase in inequalities.
- Well managed prioritisation for HB1C, be aware of language.

- Concerns that pump companies cannot keep up with demand for pump orders and ensure they are prepared for the roll out and the ordering process is easier.
- Should be doing equity of outcomes not just access.
- Regional clinical teams must have the flexibility to identify those with the most clinical need and teams must receive general guidance to get started.

3.2 Key skills

AL presented draft key skills document to the committee and advised that a group including EW and PC have recorded some videos. He summarised that the document outlines the key skills people need to safely use a closed loop system including essential sensor, pump, and diabetes skills and desirable HCL skills. The committee reviewed this document and considered if anything further should be added to the document and the training videos.

SC noted that all points that were raised on the Derby Facebook group have been covered in the videos but wondered if some of the guidance needed updating slightly due to changes in systems available and usage.

ME commented that the videos are aimed at both healthcare professionals and people living with diabetes and questioned whether a non-medical audience would understand some of the terminology such as algorithms. He added that he was impressed with the option to send comments while watching the videos.

The committee agreed that most important key skill is the “*sick day rules*” and this needed more emphasis. It was suggested that a video could be recorded on “*sick day rule and what to do if things go wrong*”. It was noted that people must be able to access to equipment and essential supplies to follow sick day rules and understand when to switch back or switch to MDI. EW suggested pump companies could be approached for a HCL resource pack with all the kit required for patients to support them and AJ highlighted the importance of improving communications with GPs on the technology changes.

3.3 Planned educator events

GG reported on two educator events:

- 6th February 2024: London
- 12th March 2024: Manchester

She advised that these will larger events next year to accommodate the growing demand and will include “speed dating of tech”, service delivery, psychology skills and workshops. She added that these events will be aimed at people who are looking to develop their skills in technology such as junior members of the team and inpatient teams.

3.4 Collation of useful documents

GG reported on investigations into how to support regions with HCL and those who are unable to attend the educator events. She advised that she is considering providing more regional events and developing a resources pack to be presented at these events. GG advised that she will be contacting committee members individually to source these resources such as a follow up clinical sheet, guidelines, competency frameworks, case studies etc. She explained that these resources will be collated into a DTN endorsed education pack for the regions to deliver to their own teams.

3.6 Psychology guidance

AL thanked AJ for leading on this.

Item	Responsible	Action	Timescale
3.4	GG	Contact all committee members individually for input into DTN education resource pack	December 2023
3.4.1	All	Provide GG with the relevant resource you have for the DTN education resource pack	January 2024

4. HCL in pregnancy update

ES advised that the AiDAPT randomised control trial in type 1 pregnancy which ran in the UK was published on 5th October in the New England Journal of Medicine. She explained that the study was a random sample of 124 women using either HCL technology with CamAPS system or using existing system. She reported that the results showed that those using the CamAPS system spent 68% of time in the target glucose level range for pregnancy compared to 58% time in range for those using their existing system.

She outlined key findings from the study as follows:

- Study showed HCL could be safely initiated in first trimester.
- Blood glucose levels improved consistently in mothers of all ages regardless of their previous glucose levels,
- Women gained less weight during pregnancy.
- Substantial reduction in blood pressure complications.

ES concluded that this study provides solid randomised control evidence to support the use of HCL in pregnancy. She highlighted that the only system licensed for use in pregnancy is the CamAPS system. She reported that following publication of the NICE TA it is anticipated that HCL will be rolled out to 250 pregnant women per month across England and Wales across 172 diabetes and pregnancy services and is keen to follow on from the successes of the CGM roll out by involving all stakeholders from the beginning including experts by experience, pump companies, Diabetes UK, and JDRF.

ES highlighted the need for separate videos and best practice guides covering HCL in pregnancy and explained that the project would like to host some videos and resources on the DTN website and ensure that are integrated with other DTN resources.

AL suggested that the DTN updates the *Technology in Pregnancy Best Practice Guide* to include HCL guidance and asked ES to consider what videos and training need to be provided for implementation. It was agreed that ES and AL would discuss this matter separately and consider how to source funding for these resources.

Item	Responsible	Action	Timescale
4	AL and ES	Update the <i>technology in pregnancy best practise guide</i> to include HCL guidance.	December 2023
4.1	ES	Consider what videos and training need to be provided for implementation of HCL in pregnancy	December 2023
4.2	AL and ES	Meet to decide what videos and training need to be provided for implementation of HCL in pregnancy and how funding could be sourced	December 2023

5. DTN videos

5.1 Review of current videos

AL shared the list of videos currently available on DTN website and asked the committee to consider which videos should now be moved to the archived areas of the website. CH confirmed that RHI would be able to provide some statistics on which videos are the most popular through the number of views and would speak to Heather at RHI regarding a report to share with the committee.

The committee discussed how the videos are displayed on the new website decided that they should be displayed under in "videos" tab in the Education section for everyone to access and not categorised into patient and health professional lists. CH advised she would speak to Heather at RHI to ascertain what is possible.

5.2 Addition of updated HCL videos

The committee considered which videos needed updating. AL advised that he circulate the list of videos to the committee for them to review and comment on what needs to be updating and adding.

Item	Responsible	Action	Timescale
5.1	All	Consider which videos should now be moved to the archived areas of the website	December 2023
5.1.1	CH	Speak to Heather at RHI regarding a report on which videos have received most views on the DTN website	November 2023
5.1.2	CH	Speak to Heather at RHI about the possibility of displaying the videos under a "video" tab in the Education section of the DTN website for everyone to access and not categorised into patient and health professional lists	November 2023
5.2	AL	Circulate the list of videos to the committee	November 2023
5.2.1	All	Review the list of videos and advise AL which need updating and anything that needs adding	December 2023

6. Other workstreams – subgroups

AL suggested the committee creates subgroups to work on the below topics:

- Inequalities
- Young adults with diabetes
- CGM in type 2 diabetes

JE and UG expressed an interest in young adults with diabetes. AL suggested that for CGM in type 2, DTN could partner with PCDS. EW and ES confirmed that they would be happy to be involved in this work stream.

Other suggestions were:

- Tech and frailty
- Eating disorders and HCL pilot. AL took an action to reach out to Helen Partridge regarding whether it would be helpful for DTN to input into T1DE guidance.
- Cystic fibrosis

Item	Responsible	Action	Timescale
6	AL	Reach out to Helen Partridge regarding inputting into eating disorders and HCL pilot guidance for the regional team.	December 2023

7. Governance- Terms of Reference

AL explained that the group has grown organically to improve care with people with diabetes using diabetes technology and is a highly skilled and enthusiastic group of professionals and DTN is now recognised and well respected. He added that some governance now needs to be implemented as the DTN committee grows. The committee reviewed the Terms of Reference and agreed the following:

- All committee members must be a member of DTN (not ABCD as this is a Consultant only organisation).
- Committee recruitment process should be a call for applications, interview process, then appointment.
- No vice chair elect is required.

CH advised that she amend the Terms of Reference and circulate to the committee for review and approval.

Item	Responsible	Action	Timescale
7	CH	Amend the Terms of Reference and circulate to the committee for review and approval.	November 2023

8. AOB

SC advised that he has document from the Facebook group he would like to share with the committee, and he will send to AL via email.

AL asked the committee to advise if anyone is happy to run regional meetings to let him know. GG requested that HCL regional meetings are included as part of this request.

Item	Responsible	Action	Timescale
8	SC	Share the document from the Facebook with AL for circulation to the committee.	November 2023
8.1	ALL	Please advise AL if you are happy to run a regional meeting/ regional HCL meeting	November 2023