

This document is designed to be used by diabetes educators to assess their learning needs and progress in relation to Continuous Subcutaneous Insulin Infusion referred to as Insulin Pump (IP).

Commented [AJ(T1)]: Do we also need to state HCL

Section 1 relates knowledge and providing information prior to commencing or changing IP

COMPETENCY	None	Gaining	Achieved
Have knowledge of NICE indications for IP			
Able to discuss with people considering a pump the advantages on IP			
Able to inform people of the disadvantages of IP therapy			
Advise people of potential risk associated with IP therapy			
Explain the basic concept of how the pump will deliver insulin to meet the Individual's needs (type of insulin, basal and bolus settings)			
Inform people of the current IPs supported at Kings			
Demonstrate each IP device providing explanation of			
COMPETENCY	None	Gaining	Achieved
Details of battery, recharge, water resistance			
Details of insulin delivery process including cannula			
Medtronic cannula and infusion sets			
Pod differences EROS DASH and Omnipod 5			
Ypsopump cannula and infusion sets			
TSlim cannula and infusion sets			
Advanced function capabilities eg temp targets			
Have a knowledge of each pumps Hybrid Closed Loop (HCL) functionality			
Can explain the concept of how HCL works			
Knows the continuous blood glucose monitor (CGM) with IP			
Know the name of each pumps HCL and its interface requirements – pump / handset / smart or android phone			
Know the interfaces required to enable each pumps HCL			
Can provide detail on each HCL algorithm applying the CARES Framework (2019) notably, targets, user variable each pump in HCL mode and options to adapt the HCL algorithm			
Medtronic / SmartGurd			
Omnipod / SmartGlucose			
Ypsopump and DANA / Cams AP FX			
TSlim CIQ			
Explain the pathway for pump assessment and time requirements for commencing the pump and training commitment			
Identify IP candidates NOT suitable for a group start			
- Consider psychological/emotional/medical history			
- Review historical medical notes			

Commented [AJ(T2)]: Your centre

- Physical disabilities – impacting dexterity/vision/memory			
Identify IP candidates who would benefit from a group start BUT HIGH RISK			
- Close monitoring Diabetes Eye Disease			
- Renal function			
- Extra nutritional support ie Gastroparesis, active foot disease			
- History of neuropathy			
- Dialysis or failed SPK			
Able to sign post people to further information from DTN-Education Platform and IP companies			
Know the Standard Operating Procedure (SOP) for Pump assessment			
Undertake a Pump Assessment (pump ready) adhering to the SOP			
Spent time with the IP coordinator to understand procurement and ordering			

Section 2 relates to training and support provided by educator while starting/changing IP

COMPETENCY	None	Gaining	Achieved
Able to calculate safe starting insulin pump settings and explain these			
Advise on the changes to background insulin 12 – 24 hours prior IP start			
Prepare for IP session 1 including pre pump information despatched			
Deliver session 1 IP start group			
Input and support the inputting of IP settings			
Able to confirm basal and bolus settings active			
Activate and check alarms, alerts and safety function active			
Advice on temporary basal as necessary			
Advice on need for bolus at time of starting pump			
Counsel on management hyperglycaemia and Sick Day Rules in manual mode			
Counsel on hypoglycaemia treatment options when using IP in manual mode			

Commented [AJ(T3): Needs generic description

Commented [AJ(T4): Remove?

Commented [AJ(T5): When eating / correction

With addition of Continuous Blood Glucose Monitoring			
Able to teach application of CGM			
Dexcom			
Guardian 4			
Freestyle libre			
Able to link the CGM to the IP			
COMPETENCY	None	Gaining	Achieved
Know the data sharing platform for each CGM			
Set up data sharing platform accounts and advise people how to connect			
Have completed training on each HCL for			
SmartGuard			
Cams AP FX			
Control IQ			
SmartGlucose (omnipod)			
Advise people of the specific process for each pumps HCL training			
Able to check, activate and deactivate HCL			
Teach people using HCL on the management of			
Hypoglycaemia			
Managing unexplained hyperglycemia , Sick Day rules and ketones			
Provide review progress of people having recently started IP			
Deliver tSlim teleconsultation supporting first TSlim set change			
Competent to deliver session 2 IP Start			
Competent to deliver session 3 IP Start			
Able to establish if data sharing platform is linked			
Aware of OPA follow up requirements and these are in place			

Commented [AJ(T6): We don't do this - are we including this and therefore recommending it as a standard OP

Commented [AJ(T7): Needs more generic description - what is in the sessions that is being delivered?

Section 3 relates to review people using IP therapy in addition to usual T1 diabetes review

COMPETENCY	None	Gaining	Achieved
Access all data sharing platforms for CGM and IP			
Can review and interpret data to identify blood glucose patterns / anomalies to explore with IP user			

Identify safe and appropriate self-management of the IP by the user in relation to set change			
Identify safe and appropriate self-management of the IP by the user in relation to bolus administration			
Identify and assess interruptions to usual basal insulin delivery i.e suspensions (manual or automatic) use temporary settings			
Can support people changing basal and bolus settings in on the pump			
Identify safe and appropriate management of hypoglycaemia			
COMPETENCY	None	Gaining	Achieved
Able to recalculate basal doses for people on HCL for occasions when manual mode is needed			
Identify safe and appropriate management hyperglycaemia			
Aware daily living advice relating to			
Travel			
Going for investigations			
Going into hospital			
Top trouble shooting –			
1. Reasons for hyperglycaemia			
2. Emergency management when IP fails			
3. Cannula/Sensors fall off			
4. Skin allergies			
5. Alarm fatigue			
6. Changes in weight			
7. IP management when pursuing NEW or one off activities : mountain climbing/running marathons/adventure holidays			
8. End of life care and support			
9. Care planning when transitioning off the insulin pump			

Commented [AJ(T8): Shall we specify to know extended bolus options per system?

Commented [AJ(T9): Add another area - exercise / activity basic guidance, using temp targets etc



Self Assessment Number and Date: _____

Discussion Date: _____

Next Actions: _

1. _____

2. _____

Next self assessment:

Please keep a record for PDR and share with line manager