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Abbreviations

PWD	-	People With Diabetes
BGM	-	Blood Glucose Monitoring
NICE	-	National Institute for Health and Care Excellence
NDA	-	National Diabetes Audit
GP	-	General Practitioner
SMBG	-	Self Monitoring of Blood Glucose
KPI	-	Key Performance Indicators
HCP	-	Health Care Professionals
ICHOM	-	International Consortium for Health Outcomes Measurement
RCGP	-	Royal College of General Practitioners
RPS	-	Royal Pharmaceutical Society
HEE	-	Health Education England
BG	-	Blood Glucose



Actionable Recommendations Matrix

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Actionable Recommendations Matrix

Recommendation	Action for Whom?	Mechanisms of Action	Tools Required	Timeframe Deliverable	Measure of Success
Create and adopt robust KPIs used to measure outcomes by HCPs and service users	NHS England	Agree KPIs and implement them	<ul style="list-style-type: none"> ICHOM standard set (for example) but broadened to include all service users Data extraction identifying variation and confounders to best practice implementation 	9-12 months	<ul style="list-style-type: none"> Implementation and use of agreed KPIs Position on league table report
Provide and share models of best practice based on agreed KPIs tailored to local commissioners to reduce variation in outcomes	<ul style="list-style-type: none"> Ascensia Diabetes Care NHS England Commissioners Service providers eg. GP practices and Community Pharmacies 	<ul style="list-style-type: none"> Direct support to primary care Facilitate liaison between CCGs Engaging professional bodies eg. RCGP and RPS 	<ul style="list-style-type: none"> Toolkit for every HCP and PWD containing help cards on enhanced communication; goal setting; setting and achieving targets Business case (and other) templates to secure appropriate services 	6-9 months	<ul style="list-style-type: none"> Improved delivery of 9 care processes Improved access to BG testing Improved HbA1c Reduction in complications, eg., hypoglycaemic episodes Buy-in and engagement of relevant stakeholders; eg. Diabetes UK, commissioners and professional bodies
Increase access, availability and uptake of ongoing structured diabetes education for HCPs and PWD tailored to support individualised self-management including the use of digital technology and apps	<ul style="list-style-type: none"> NHS England Health Education England Industry (inc. Ascensia Diabetes Care) Commissioners NICE 	<ul style="list-style-type: none"> Provision of HCP training and audit of utilisation Recognition of education delivered in routine person-centred care 	<ul style="list-style-type: none"> Funding available by HEE endorsed by NHS England for attendance at accredited courses Checklist of structured education in routine care for every PWD Clinical evaluation of apps Short specific training funded by industry 	9-12 months	<ul style="list-style-type: none"> Enhanced skills by HCPs as evidenced by certificates of attendance and achievement Enhanced skills of PWD as evidenced by completed checklists Evidence of improved adoption of KPIs
Optimise blood glucose management <ul style="list-style-type: none"> appropriate access to high-quality BGM technology expert advice and support for optimal interpretation and action including the use of apps 	<ul style="list-style-type: none"> NHS England Industry (inc. Ascensia Diabetes Care) Professional bodies Diabetes UK and other charities/advocacy groups Commissioners 	<ul style="list-style-type: none"> Analysis of real-world BG data Simulation studies on impact of variation in BGM test technical performance on clinical outcomes Economic simulation studies on impact of variation in BGM technical performance on resource utilisation Training and support offered to service providers eg. Practice Nurse, Pharmacists, GP 	<ul style="list-style-type: none"> Evidence that all BGM technology meets international performance standards 	18-24 months	<ul style="list-style-type: none"> Purchasers aware of adverse impacts of poorer quality BGM systems Re-establishment of regulation of BG strips through a UK-based technology evaluation unit. Reduction in use of BGM tests that do not meet international standards Adoption of an audit process, eg., similar to Heald et al's approach Local data on improvement of SMBG and clinical outcomes eg. NDA

The IDEAL Group is a multidisciplinary panel of diabetes specialists with a visionary outlook to improve diabetes care outcomes across the UK. The primary objective of IDEAL is to review current practice across the NHS to assess and recommend better ways to approach education, access and learning for people with diabetes. The IDEAL Group has expertise that spans across diabetes management, medicine, pharmacy, technology, nursing, health professional and patient education, psychology, commissioning and the perspective of living with diabetes. Their programme of action is focused on harnessing this professional expertise to build consensus, network, research, share knowledge and collectively seek to make things better; both for practitioners working in partnership with and for people living with diabetes.

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References: 1. Heald AH, Livingston M, Fryer A, Cortes G, Anderson SG, Gadsby R, Laing I, Lunt M, Young RJ, Stedman M. Real-world practice level data analysis confirms link between variability within Blood Glucose Monitoring Strip (BGMS) and glycosylated haemoglobin (HbA1c) in Type 1 Diabetes. Int J Clin Pract. 2018 Aug 31:e13252. doi: 10.1111/ijcp.13252