Diabetes Competency Programme

(New in post Diabetes Specialist Nurses)

Name of Organisation		
Name		
Position & Band	**Primary Care Diabetes Specialist Nurse Band 6**	
Date	**From**	**To**
Mentor Name		
Position		

WAND Welsh Academy for Nursing in Diabetes

How to use this competency programme

This competency programme is based on the document – *An integrated career and competency framework for diabetes nursing 4th edition* Trend UK (2015). It can be used in a number of ways to develop the experienced registered nurse who has been successful in securing a post in the field of adult diabetes. It provides a focus against which to plan professional development in diabetes care for both the new in post diabetes nurse and the specialist diabetes team who will be responsible for his/her mentorship across the primary/secondary care interface. It is complimentary to the framework itself and should be seen as a structure rather than a task oriented programme. The structure supports diabetes development needs, and if used creatively and flexibly in approach will allow the new in post to identify, source and learn from the wider multidisciplinary team in order to gain the expertise to work at proficient level. The consolidation and learning in post after the one year programme will determine the progression to senior practitioner or expert nurse. The active seeking of and participation in peer review of one's own practice is an essential element both during the competency phase and throughout one's career.

The Knowledge and Skills Framework (NHS Employers, 2004) and revalidation as described in *The Code: professional standards of practice and behaviour for nurses and midwives* (NMC 2014) highlights the responsibility of the nurse to develop their own portfolio of evidence that demonstrates competency for the roles they undertake. The completion of the one year competency programme will align appropriately with these responsibilities and need not be duplicated. The documentation to support the programme will include structured observation of practice; supervised practice; reflective pieces on patient consultations with 360^0 feedback; observed delivery of diabetes education to other health care professionals and case history discussion and participatory learning. Some competencies may be achieved at the outset if the nurse has undergone the relevant training and has evidence of supervised practice and performs the care on a regular basis. To avoid repetition there may be evidence that supports the necessary knowledge and skills across several competencies.

In line with the NMC revalidation process, it is recommended to supplement this programme with a reflective accounts log which is peer reviewed in the professional development discussion (PDD). The templates can be found on the NMC website www.nmc.org.uk

Competency statement 1: Screening, prevention and early detection of Type 2 diabetes

At the end of the 1 year programme the new in post DSN should be able to demonstrate competency at proficient nurse level (3) for the prevention and early detection of type 2 diabetes

Domain for assessment	Demonstrated Yes/No		Comments
	6/12	12/12	
Describe the symptoms of diabetes			
Demonstrate an understanding of the importance of prevention or delay of onset of Type 2 diabetes in individuals at risk			
Demonstrate knowledge of the advice required to people at risk of diabetes with regard to lifestyle changes, including exercise programmes and dietary changes for the prevention of Type 2 diabetes			
Demonstrate an understanding of impaired fasting glycaemia/impaired glucose tolerance and cardiovascular risk			
Identify individuals at risk of Type 2 diabetes (e.g. long-term steroid use; antipsychotic medication; previous gestational diabetes and initiate appropriate screening & diagnostic tests			
Interpret test results and if diagnostic make appropriate referrals			
Demonstrate ability to make a comprehensive assessment of an individual's risk of Type 2 diabetes			

utilising a valid diabetes risk assessment tool			
Participate in and refer to programmes in conjunction with other agencies that address the role of lifestyle intervention in the prevention or delay in progression to Type 2 diabetes			
Participate in and refer people to screening programmes in conjunction with other agencies for the early detection of Type 2 diabetes (e.g. care/residential homes)			
Support other HCP in maintenance of a register and ensure appropriate follow-up/system of recall is in place for those at risk to identify the progression to Type 2 diabetes			
Discuss the care pathway for individuals newly diagnosed with Type 2 diabetes			
Educate other HCP with regard to the risk factors for Type 2 diabetes			
Describe the links between Type 2 diabetes and other conditions (e.g. vascular disease) and demonstrate awareness of local policies regarding vascular screening and diabetes prevention			

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Competency Statement 2: Promoting Self-Care

At the end of the 1 year programme the new in post DSN should be able to demonstrate competency at proficient nurse level (3) to support the person to self-care for their diabetes.

Domain for assessment	Demonstrated Yes/No		Comments
	6/12	12/12	
Support the person with diabetes to develop self-care skills			
Assess the ability of the person with diabetes to self-care and work with them and/or their carer to optimise self-care skills			
Demonstrate an understanding of tailored, structured education for Type 1 diabetes in the support of optimisation of self-care skills and promotion of informed decision-making about lifestyle choices			
Demonstrate an understanding of tailored, structured education for Type 2 diabetes in the support of optimisation of self-care skills and promotion of informed decision-making about lifestyle choices			
Demonstrate an understanding of the difference between structured education and other forms of education and provision of information			
Provide information and support to encourage the person with diabetes to make informed choices about controlling and monitoring their diabetes, including choice of treatment			

and follow up; risk reduction; monitoring control and complications			
Participate in the delivery of structured education for Type 2 diabetes			
Demonstrate an understanding of the effects of different forms of exercise on blood glucose levels and the adjustments required with insulin and/or dietary intake			
Identify psychosocial barriers to self-care and make appropriate referral			
Facilitate the development of an agreed care plan			

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Competency statement 3: Mental health

At the end of the 1 year programme the new in post DSN should be able to demonstrate competency at proficient nurse level (3) to care for someone with diabetes and mental illness

Domain for assessment	Demonstrated Yes/No		Comments
	6/12	12/12	
Assess mental health problems and how they impact on the risk of developing Type 2 diabetes and diabetes management			
Raise the issue of mental health/addiction problems sensitively during individual consultations			
Demonstrate knowledge of the psychological impact of diabetes and facilitate referral to the psychological support or mental health services as required			
Demonstrate a basic understanding of the mental health issues commonly seen and how they affect glycaemic and lipid control			
Manage and co-ordinate individual patient care and education programmes			
Refer or ensure an appropriate mental health practitioner is involved in the person's care if they are demonstrating poor mental health			
Recognise the implications of mental health on lifestyle choices and support			

the person with small achievable changes			

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Competency Statement 4: Nutrition

At the end of the 1 year programme the new in post DSN should be able to demonstrate competency at proficient nurse level (3) to meet the person's individual nutritional needs in relation to diabetes.

Domain for assessment	Demonstrated Yes/No		Comments
	6/12	12/12	
List the principles of a balanced healthy diet			
Calculate and interpret BMI			
Understand which foods contain carbohydrate and how these affect blood glucose levels (carbohydrate awareness)			
Have a basic knowledge of the principles of carbohydrate counting			
Identify people at risk of malnutrition and situations where healthy eating advice is inappropriate			
Refer the person with diabetes to a dietician when appropriate			
Work in partnership with the person with diabetes and with groups to identify realistic and achievable dietary changes to help individuals to manage their diabetes			

Demonstrate awareness of the dietary factors that affect BP and lipids management			
Demonstrate an understanding of how lifestyle (i.e. diet and physical activity) and pharmacological agents impact on glycaemic control			
Facilitate the person with diabetes to make informed decisions about nutritional choices			
Demonstrate knowledge of the care of people undergoing enteral feeding and the impact that different feeding regimens have on blood glucose levels in line with local policy			

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Competency statement 5: Urine glucose and ketone monitoring

At the end of the 1 year programme the new in post DSN should be able to demonstrate competency at proficient nurse level (3) for the safe use of urine glucose or ketone monitoring and associated equipment

Domain for assessment	Demonstrated Yes/No		Comments
	6/12	12/12	
Perform the test according to manufacturer's instructions and local guidelines			
Document and report the result according to local guidelines			
Interpret the result and if outside expected range for that person, make the appropriate referral			
Assess other parameters that may affect results and make appropriate referral			
Teach the testing procedure to HCP, the person with diabetes or their carer and the actions required based on the result of glucose or ketone testing			
Identify where testing for ketones is appropriate			
Identify and refer for other investigations and or treatment in response to moderate or large presence of ketones			

Instigate further tests such as HbA1c and random plasma glucose			
Demonstrate ability to educate patients on appropriate action to take if ketones moderate/high and crisis advice e.g. if vomiting			
Discuss how these results can be used to optimise treatment interventions according to evidence based practice, and incorporate preferences of the person with diabetes			

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Competency statement 6: Blood glucose and ketone monitoring

At the end of the 1 year programme the new in post DSN should be able to demonstrate competency at proficient nurse level (3) for the safe use of blood glucose monitoring and associated equipment.

Domain for assessment	Demonstrated Yes/No		Comments
	6/12	12/12	
Perform the test according to manufacturer's instructions and local guidelines – evidence of completing POCT training			
Document and report the result according to local guidelines			
Recognise and follow local internal quality control policy and external quality assurance programmes, including disposal of sharps			
Interpret results and assess other parameters and take appropriate action including testing for urine or blood ketones			
Report readings outside of acceptable range to the appropriate person			
Ability to teach people with diabetes and/or their carers to self blood glucose monitor with a variety of meters			
Ability to teach healthcare professionals the technique and principles of targeted blood glucose monitoring with a variety of meters			

Teach people with diabetes or their carer to interpret glucose and ketone test results and take appropriate action			
Initiate further tests such as HbA1c or random blood glucose as appropriate			

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Competency statement 7: Oral therapies

At the end of the 1 year programme the new in post DSN should be able to demonstrate competency at proficient nurse level (3) for the safe administration and use of oral antihyperglycaemic medication.

Domain for assessment	Demonstrated Yes/No		Comments
	6/12	12/12	
Demonstrate knowledge of the types of oral antihyperglycaemic agents and mode of action			
Demonstrate knowledge of therapeutic doses			
Demonstrate knowledge of the timing of doses			
Demonstrate an understanding of the various factors that impact on the pharmacodynamics and pharmokinetics of antihyperglycaemic agents			
Demonstrate knowledge of common side effects the types of antihyperglycaemic agents			
Recognise the progressive nature of Type 2 diabetes and the changes in the medication that may occur overtime			
Demonstrate knowledge of and work within national and local guidelines applying the principles of evidence-based practice including clinical and cost effectiveness			

Describe indications for the initiation of oral hyperglycaemic agents			
Recognise when treatment needs to be adjusted and recommend appropriate adjustments as required			
Describe lifestyle factors that may influence prescribing patterns			
Demonstrate ability to assess the impact of multiple pathologies, co-morbidities, existing medications and contraindications on management options			
Demonstrate awareness of issues related to polypharmacy and drug interactions			
Evaluate treatment outcomes and make appropriate referrals			

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Competency statement 8: Injectable therapies

At the end of the 1 year programme the new in post DSN should be able to demonstrate competency at proficient nurse level (3) for the safe administration and use of insulin and other injectables.

Domain for assessment	Demonstrated Yes/No		Comments
	6/12	12/12	
Describe the effect of insulin on blood glucose levels			
Demonstrate a broad knowledge of different insulin types; their onset, peak and duration of action and use in regimens			
Demonstrate a broad knowledge of GLP-1 receptor agonists (type/action/side effects)			
Demonstrate a broad knowledge of the various pen devices available			
Assess individual patient's self-management and educational needs and meet these needs or make appropriate referral			
Demonstrate proficiency regarding education relating to commencement of injectable therapy			
Initiate insulin or GLP-1 receptor agonist therapy where clinically appropriate			
Recognise when injection therapy needs to be adjusted in relation to			

patient's self- blood glucose monitoring and HbA1c			
Demonstrate an ability to detect lipohypertrophy and discuss the effect on blood glucose levels along with the necessary action and adjustment to insulin therapy			
Recognise the potential psychological impact of insulin or GLP-1 receptor agonist therapies and offer support to the person with diabetes or their carer			
Recognise the signs of needle fear/phobia and discuss strategies to help manage this			
Demonstrate awareness of the needs of the individual glycaemic target ranges dependant on age; diagnosis; and individual circumstances following local policies			
Support a person with diabetes to achieve an individualised level of self-management and an agreed glycaemic target			
Be aware of sharps policy			

Mentor signature……Date……..

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Competency Statement 9: Hypoglycaemia

At the end of the one year programme the new in post DSN should be able to demonstrate competency at proficient nurse level (3) for the identification and treatment of hypoglycaemia.

Domain for assessment	Demonstrated Yes/No		Comments
	6/12	12/12	
State normal blood glucose ranges both pre and post prandial for Type 1 and Type 2 diabetes			
Discuss and demonstrate competent use of blood glucose monitoring equipment to confirm hypoglycaemia			
Describe the signs and symptoms of hypoglycaemia			
Describe the possible causes of hypoglycaemia			
Discuss the possible causes of nocturnal hypoglycaemia and strategies to address the dawn phenomenon			
Identify the possible causes for repeated episodes of hypoglycaemia in relation to longevity of diabetes/treatment options/injection sites/hypoglycaemia unawareness and its implications			
Identify how hypoglycaemia can impact on the individual to achieve optimum glycaemic control. Discuss the psychological aspect and barriers to intensification of treatment			

Discuss the DVLA requirements on safety for driving			
Demonstrate an understanding of the local guidelines on hypoglycaemia management and appropriate treatment for different levels of hypoglycaemia			
Work with people with diabetes to prevent recurrent hypoglycaemia and reduce future risk			
Advise and adjust diabetes therapies for those identified at high risk of hypoglycaemia			
Demonstrate sound interpretation of blood glucose levels and HbA1c results in the context of the clinical presentation to identify unrecognised hypoglycaemia			
Act as a resource to other health care professionals for information on hypoglycaemia			
Participate in education of other health care professionals and carers of people with diabetes in the identification, treatment and prevention of hypoglycaemia			

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Competency Statement 10: Hyperglycaemia

At the end of the 1 year programme the new in post DSN should be able to demonstrate competency at proficient nurse level (3) for the identification and treatment of hyperglycaemia.

Domain for assessment	Demonstrated Yes/No		Comments
	6/12	12/12	
State the normal blood glucose range both pre and post prandial for Type 1 and Type 2 diabetes			
Discuss local guidelines on blood glucose and blood/urine ketone testing and demonstrate competent performance of both			
Discuss the appropriate treatment for the different levels of hyperglycaemia including those for type 1 and type 2 diabetes			
Demonstrate knowledge of the role of POCT and the internal quality control and external quality assurance programmes			
Describe signs and symptoms of hyperglycaemia			
Identify possible causes of hyperglycaemia			
Discuss the impact that glucocorticosteroids have on blood glucose levels and trends			
Discuss the significance of different			

levels of hyperglycaemia and their implications for management			
Demonstrate an awareness on the actions to take to prevent hyperglycaemic crisis during illness (sick day rules)			
Discuss appropriate glycaemic targets and treatments for special patient groups (e.g. pregnant women, older people, others with significant co-morbidities, the frail and those in end of life care)			
Discuss the treatment to resolve hyperglycaemia in accordance with local policies or individual clinical management plans			
Discuss the implications for asymptomatic hyperglycaemia in the older person			
Demonstrate an understanding of the management of life threatening conditions DKA/HHS			
Participate in working in partnership with the person with diabetes or their carer to agree treatment goals			
Demonstrate an understanding of the barriers to achieving optimum glycaemic control			
Participate in education of people with diabetes, their carer and other health care professionals in the identification, treatment and prevention of hyperglycaemia			

Mentor Signature……..…….Date……

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Competency Statement 11: Intercurrent illness

At the end of the 1 year programme the new in post DSN should be able to demonstrate competency at proficient nurse level (3) to manage intercurrent illness.

Domain for assessment	Demonstrated Yes/No		Comments
	6/12	12/12	
Identify common signs of intercurrent illness			
Demonstrate an awareness of the impact of intercurrent illness on glycaemic control			
Undertake comprehensive assessment and patient history in a variety of settings			
Initiate appropriate preliminary investigations and demonstrate interpretation skills and initiation of appropriate action			
Discuss scenarios where urgent medical advice and/or admission to hospital needs to be sought			
Support the person with diabetes or their carer in managing diabetes during intercurrent illness			
Give advice about sick-day management including ketone testing where appropriate according to local policy and provide written information			
Educate people with diabetes, their			

carer and health care professionals about sick-day diabetes management and when to seek medical advice			
Recognise when treatment may need adjusting, according to local and national guidelines or polices			
Advise treatment adjustments according to individual circumstances following local policies or individual clinical management plans			

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Competency Statement 12: Managing diabetes in hospital

At the end of the 1 year programme the new in post DSN should be able to demonstrate competency at proficient nurse level (3) to manage diabetes during a hospital admission and before and after surgery

Domain for assessment	Demonstrated Yes/No		Comments
	6/12	12/12	
Understand the needs of a person with diabetes in hospital in relation to general care & comfort, pressure relief, nutrition & fluids, monitoring of glycaemic control and administration of appropriate medication			
Demonstrate awareness of the importance of daily foot checks in those with poor mobility, the frail and the bedbound			
Recognise the impact that glucocorticosteroids have on blood glucose levels in existing diabetes and treatment pathways to manage steroid-induced diabetes			
Be aware of the impact of enteral feeding of food supplements on blood glucose			
Demonstrate awareness of local guidelines regarding appropriate nutrition, monitoring of glycaemic control and administration of diabetes medication			

Enable a safe and effective discharge plan for the person with diabetes following liaison with relevant agencies			
Explain and advise on care relating to hospital procedures and investigations for the person with diabetes			
Assess and where appropriate enable a person with diabetes to self-manage their diabetes during an inpatient stay according to local policy			
Demonstrate a knowledge of all current diabetes treatment			
Be aware and advocate national and local guidance and training requirements on insulin safety			
Deliver regular diabetes training for ward staff			
Understand the principles of VRIII and FRIII and support safe use and transfer to regular diabetes therapies as appropriate in line with local and/or national policies			
Demonstrate knowledge of national guidelines for the care of people with diabetes admitted to hospital			
Participate in the development or maintenance of local guidance for the care of people with diabetes in hospital			
Participate in informing national initiatives in the improvement of diabetes inpatient care (NADIA)			

Assess and respond to problems relating to the care of people undergoing surgery against national recommendations, standards and guidelines			

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Competency Statement 13: Pregnancy

At the end of the 1 year programme the new in post DSN should be able to demonstrate competency at proficient nurse level (3) to support a woman with diabetes preparing for, during and after a pregnancy

Domain for assessment	Demonstrated Yes/No		Comments
	6/12	12/12	
Demonstrate an understanding of the need for pre-conception care and follow local/national guidelines			
Identify women with diabetes of childbearing age and provide appropriate pre-conception advice and education including the need for higher dose folic acid			
Demonstrate an ability to provide appropriate education and support to achieve pre-conception targets			
Act as a named contact person for women with diabetes contemplating pregnancy			
Demonstrate awareness and use of protocols specifically related to the care of women who develop diabetes in pregnancy including post pregnancy testing and risk factor management			
Be aware of the latest national guidelines for the management of pregnancy complicated by diabetes			
Demonstrate awareness of the issues involved in a pregnancy complicated by diabetes			

Demonstrate knowledge of the appropriate referral system including to the specialist diabetes team			
Demonstrate an understanding and be involved in the implementation of individual management plans and care targets			
Demonstrate an understanding of the physiology of the different stages of pregnancy and their effect on blood glucose levels			
Identify medications contraindicated in pregnancy and make appropriate referrals			
Demonstrate an awareness of importance of communication with the specialist team across primary and secondary care			
Demonstrate an awareness of psychosocial impact of diabetes in pregnancy providing emotional support and motivational strategies			
Demonstrate knowledge of care recommendations for the management of diabetes in pregnancy including the pathway for foetal monitoring			
Be a named patient contact for the pregnant woman, or new mother with diabetes			
Participate in audit of healthcare			

outcomes			

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DSN Signature……...……..…Date……...

Competency statement 14: Cardiovascular disease (CVD)

At the end of the 1 year programme the new in post DSN should be able to demonstrate competency at proficient nurse level (3) to care for people with hypertension and CHD

Domain for assessment	Demonstrated Yes/No		Comments
	6/12	12/12	
Identify people with diabetes at risk of developing CVD			
Demonstrate knowledge of lifestyle measures such as diet, exercise and smoking cessation and their impact on reducing CVD risk			
Ensure people with diabetes understand how their medications work, how to take them, its side effects and when to report them			
Undertake a comprehensive CVD risk assessment using accepted risk calculation tool (QRisk2)			
Interpret and act on test results appropriately			
Order appropriate tests and specialist investigations			
Refer people with diabetes for appropriate specialist intervention			
Initiate and develop personalised care plans and set goals with the person with diabetes			

Influence therapeutic decisions			
Show proficiency in developing and delivering education			
Manage and co-ordinate individual patient care and education programmes			
Participate in the development of local guidelines and protocols in line with policies relating to the prevention and management of CVD			

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Competency statement 15: Neuropathy

At the end of the 1year programme the new in post DSN will be able to demonstrate competency at proficient level (3) to care for people at risk of or with neuropathy.

Domain for assessment	Demonstrated Yes/No		Comments
	6/12	12/12	
Demonstrate that all people with diabetes are at risk of developing neuropathy including sexual dysfunction			
Give good footcare advice to people with diabetes, their carer and other health care professionals			
Know which people in your care have neuropathy			
Demonstrate knowledge of foot screening and risk classification and educate other HCP in the footcare pathway in line with national guidance and/or local protocols			
Demonstrate awareness of complications and prevention of neuropathy			
Describe measures to prevent tissue damage in people with diabetes			
Be aware of erectile dysfunction as a neuropathic process and refer where appropriate			

Identify possible neuropathy and make appropriate referral to confirm diagnosis			
Screen for neuropathy according to local guidelines			
Identify risk factors for the development of neuropathy			
Identify factors that may affect neuropathy (e.g. poor glycaemic control)			
Be aware of treatment options for the treatment of neuropathy and the associated diabetes management			
Refer appropriately within the MDT for identified neuropathy issues			
Ensure people with diabetes can access appropriate foot care			

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Competency statement 16: Nephropathy

At the end of the 1year programme the new in post DSN will be able to demonstrate competency at proficient level (3) to care for people at risk of or with nephropathy.

Domain to be assessed	Demonstrated Yes/No		Comments
	6/12	12/12	
Demonstrate that all people with diabetes are at risk of nephropathy			
Know which people with diabetes in your care have nephropathy			
Demonstrate awareness of annual screening tests to detect nephropathy			
Demonstrate awareness of complications and prevention			
Organise ACR tests, BP measurement and blood tests according to local guidelines and national protocols			
If test results outside expected range, refer appropriately and plan follow up			
Demonstrate awareness of the five different stages of chronic kidney disease			
Educate people with diabetes or their carer in prevention and importance of screening for nephropathy			
Demonstrate an awareness of diabetes medication contraindicated in renal disease			

Demonstrate an awareness of the impact that renal replacement therapy may have on glycaemic control			
Demonstrate an awareness of the impact of chronic kidney disease has on the excretion of some diabetes therapies			
Recognise when a referral to dietetics is warranted for advice on diabetes and renal diets			
Demonstrate awareness of fluid restriction in people with advance kidney disease			
Participate in guideline development			
Participate in multidisciplinary liaison			
Participate in education programmes for health care professionals			

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Competency statement 17: Retinopathy

At the end of the 1year programme the new in post DSN will be able to demonstrate competency at proficient level (3) to care for people at risk of or with retinopathy.

Domain for assessment	Demonstrated Yes/No		Comments
	6/12	12/12	
Demonstrate that all people with diabetes are at risk of retinopathy			
Educate the person with diabetes and their carer about the prevention of and the importance of screening for retinopathy			
Demonstrate awareness of retinopathy complications and prevention.			
Recognise the importance of good glycaemic, BP and cholesterol control in preventing and/or progressing diabetic retinopathy			
Support people with diabetes and impaired vision			
Participate in education programmes for health care professionals			
Be aware of and refer people with reduced vision to eye clinic personnel for vision aids			
Ensure that 3 monthly retinopathy screening is performed in pregnant women			

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Competency statement 18: Prison and young offender units

At the end of the 1 year programme the new in post DSN will be able to support someone at proficiency level (3) with diabetes residing in a prison or young offender unit.

Domain for assessment	Demonstrated Yes/No		Comments
	6/12	12/12	
Demonstrate an understanding of the need to access meals/snacks and appropriate timing in relation to medication or injectable therapies			
Demonstrate an awareness of how lifestyle issues impact on the prevention and /or progression of diabetes			
Have a good knowledge of policies and procedures relating to the management of diabetes within the custodial environment			
Have an in-depth knowledge of prison/care homes policies relating to the use of prescription and medication and sharps disposal			
Demonstrate knowledge of the impact of substance and alcohol misuse on glycaemic control and the increased risk of hypoglycaemia			
Know when to refer for medical assessment or specialist care			
Have a working knowledge of other agencies e.g. community health staff' dietetics' ophthalmology and podiatry			

services, and how to refer to them			
Demonstrate an ability to assess someone on arrival to prison in terms of their previous knowledge of diabetes, previous access to diabetes care, and their understanding of their individual treatment goals			
Identify offenders with diabetes who are at high risk of poor glycaemic, lipid and BP control, and develop appropriate action plan			
Identify offenders who are at high risk of hypoglycaemia or lack hypoglycaemia awareness, and ensure that safeguarding is in place			
Demonstrate knowledge of the implications that “not-in-possession medications” may have on glycaemic control			
Follow local policy and in-house guidance regarding care of offenders with diabetes in secured units			
Be aware of the need for regular cardiovascular, neuropathy and retinopathy screening in offenders with diabetes			
Work with offenders with diabetes who have difficulty with medications adherence and encourage self-management with an agreed care plan if appropriate			
Ensure offenders understand how to take their medication, are aware of side-effects and how to report them			

Ensure the principles of active decision making and a care planning approach is available to all people with diabetes in the secured setting			
Manage and co-ordinate individual diabetes patient care and education programmes			
Have knowledge of how to monitor intercurrent illness and when to seek specialist advice			
Plan for ongoing diabetes care following release			

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Competency statement 19: Residential and Nursing Homes

At the end of the 1year programme the new in post DSN will be able to demonstrate competency at proficient level (3) to care for someone living in a residential or nursing home

Domain for assessment	Demonstrated Yes/No		Comments
	6/12	12/12	
Demonstrate an understanding of specific issues relating to the care of people with diabetes in residential or nursing homes			
Identify and review the specifics of diabetes management in each individual's care plan			
Have a good knowledge of policies and procedures relating to the management of diabetes and older people			
Know when to refer for GP assessment or specialist care			
Have a working knowledge of other agencies (e.g. community health staff, dietetic, podiatry, retinopathy services, social services and voluntary agencies and how to refer to them			
Follow local policy and guidance regarding care of people with diabetes in residential or care homes, and be aware of current national reports and guidance			
Identify people with diabetes who are at high risk of poor glycaemic, lipid and BP control			
Ensure residents and health care providers understand how to take medication, are			

aware of side effects and how to report these			
Manage and co-ordinate individuals patient care and deliver education programmes			
Have knowledge of how to monitor intercurrent illness in relation to glycaemic control and when to seek specialist advice. Educate health care providers on the same			
Report regular hypo and hyperglycaemic episodes to the GP for a joint review of management plan and medication adjustment			

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Competency statement 20: End of Life care

At the end of the 1year programme the new in post DSN will be able to demonstrate competency at proficient level (3) to care for someone with diabetes at end of life

Domain for assessment	Demonstrated Yes/No		Comments
	6/12	12/12	
Assess the person's needs and ensure they are pain free, adequately hydrated and symptom free from their diabetes			
Demonstrate awareness of the variation in time of palliative care and that diabetes control needs to be assessed on an individual daily basis			
Demonstrate an awareness on the effect glucocorticoid steroids may have on the development of diabetes and the treatment options			
Demonstrate knowledge of the management of existing diabetes and the use of glucocorticoid steroids			
Be aware that the aim of diabetes treatment in the last few days of life is to prevent discomfort from hypoglycaemia, hyperglycaemia, or DKA in people with Type 1 diabetes with minimum intervention			
Recognise that people with Type 2 diabetes may not need treatment for diabetes in the last few days of life			
Recognise that people with Type 1 diabetes may need a change in insulin i.e. to a once daily basal insulin depending on individual eating pattern			

Initiate and develop personalised care plans in collaboration with the person with diabetes and their carers/family			
Describe indications for the initiation or discontinuation of blood glucose lowering agents in agreement with the person with diabetes and their carer/family			
Advise on blood glucose monitoring and if required the appropriate frequency of monitoring in agreement with the person and carers/family			
Recognise when diabetes treatment needs to be adjusted			

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