

# A new e-learning module for healthcare assistants working with older people with diabetes



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As the population of people with diabetes increases and diabetes care becomes more complex, clinicians and carers will need access to education to ensure their clinical skills are up to date, evidence-based and appropriate to the individual. Whilst we would all agree with the need for education for the reasons above, we must also recognise that accessing education is becoming increasingly difficult. Funding for individual courses, often supplied by pharmaceutical companies, has fallen significantly as budgets in the private and public sector are scrutinised and reduced. Bespoke courses, which many of us senior nurses remember from early on in our DSN careers, are no longer funded or provided. And what of our generalist colleagues? How can they access education and updates when diabetes is not their only clinical challenge? In short, they are more disadvantaged than most specialist clinicians.

Working in an acute Trust, over the years, we have tried to upskill ward-based clinicians with study days, study lunches and short updates, with limited success. The study days and half days are relegated to the past, as the only study time supported by my Trust, as with many others, is for mandatory training. Wards are too short-staffed and overwhelmed with acutely sick patients to release much of the workforce for training updates outside of these mandatory parameters. We have also tried a “bite-sized chunks” approach, with 15-minute sessions focussing specifically on one of the top five areas of clinical incidents and patient risk in the Trust, with varying success. Staffing levels appear to be the main difficulty.

In the community, staff are often limited to mandatory training, with some diabetes training when they can be spared. They are nursing more and more people, often with multiple comorbidities, frailty and cognitive problems, which further strains a limited workforce. In my experience, staff working in nursing and rest homes have greater difficulty as

they have regular staff changes, and any education which leads to improved practice can begin to fail as staff leave.

Clearly, traditional methods of teaching – that is, with a teacher present – may need reconsidering. Learning online via modular courses in diabetes is becoming more widespread; however, uptake for some healthcare providers is still limited by access to computers, plus the fact that any studying has to be done in one’s own time. Furthermore, while some online modules exist in these areas, they have to be paid for either by individuals or by Trusts, Clinical Commissioning Groups or Health Boards.

However, a new free e-learning initiative to help educate healthcare assistants working with older people in the community, GP practices and care homes has been developed. Given that this group of healthcare providers may see patients at any stage in the diabetes journey, it is important that they know what to look for, to understand what to report and escalate, and share fact-based information to help patients make informed choices where possible. ■

## Free online learning opportunity

**Diabetes and older people: Community care** is a two-part module for healthcare assistants working in the community, care homes and GP practices, and for allied health professionals seeking a basic understanding of diabetes, its risks and management.

Funded in full by NHS Wales, the module has been developed by the Primary Care Diabetes Society and is available for free at: <https://learning.wales.nhs.uk/course/view.php?id=319>

NHS Wales have also kindly made the module available in the rest of the UK. Users in England, Scotland and Northern Ireland can access it at: [www.cpd.diabetesonthenet.com](http://www.cpd.diabetesonthenet.com)

Each module takes up to 30 minutes to complete and can form part of users’ continuing professional development.