



**Maggie Watkinson**  
Editor

## Education programmes for people with diabetes: what needs to be done?

**E**ducating people with diabetes and their carers, whether family and friends or health professionals, is one of the fundamental roles of all nurses working in diabetes care, and there has been much recent interest in diabetes education. The National Institute for Clinical Excellence (NICE) published its *Guidance on the use of patient-education models for diabetes* in 2003 and, as we probably all know by now, recommended that structured education be made available for all people with diabetes, at diagnosis and on an ongoing basis.

### Recent initiatives

Diabetes education has, of course, been an important discussion topic for a very long time and prior to the NICE guidance there were several studies and articles exploring how best it might be undertaken. The DAFNE (Dose Adjustment For Normal Eating) trial was one of these. Since the NICE (2003) guidance has been published, the DESMOND (Diabetes Education and Self-Monitoring for Ongoing and Newly-Diagnosed patients) work on education for people with type 2 diabetes has also progressed and continues to expand. Nationally, the clarion call for structured education programmes seems to have been answered.

However, for those who are not directly involved with either of these projects, and for those who have developed or are developing their own diabetes education programmes, often in the face of limited resources, the NICE guidance was somewhat limited, dealing with the principles of good practice rather than specific recommendations. Consequently, there has been a somewhat muted response in many areas.

In order to review what needs to be done to implement the NICE guidance, a working group has been convened by the Department of Health (DoH) and Diabetes UK. One of the aims is to identify gaps in provision as well as potential routes to achieve the necessary standards. They will produce a document with recommendations on what needs to happen in the spring of this year.

### Key criteria

One of the achievements of the group so far is the publication of the key criteria that

structured education programmes should meet to fulfil the NICE guidance (Diabetes UK et al, 2004), which are out for consultation. Although this implies they have not been finalised, those who have education programmes already in place can begin to use the criteria to assess the quality of their diabetes education and, if necessary, rectify any problem areas, or at least identify barriers that prevent the programme meeting the criteria.

For instance, one requirement is that the outcomes of education programmes be audited; one potential outcome in this section is user involvement. Diabetes teams, whether in primary or secondary care, or working in an integrated fashion, could, if they do not already, ensure that service users are involved in the development and review of programmes. Another requirement is that the curriculum is structured; one component of this section is that the programmes are resource effective and have supporting materials. For example, diabetes teams could ensure, for relatively little expense, that appropriate resources are acquired and patient leaflets or handouts are developed if they are not already available.

Even if we think our education programmes are 'good' already, it is highly likely that reviewing the key criteria as a team will generate ideas to improve them further. Also, using the criteria and NICE guidance, business cases can be developed in advance to bid for any resources that will be needed and plans for the future made.

These criteria give us a tool to improve and maintain our diabetes education programmes, and are welcome. They, and the other topics the working group are looking at, will help us to continue to improve our services to people with diabetes. ■

DAFNE Study Group (2002) Training in flexible, intensive insulin management to enable dietary freedom in people with type 1 diabetes: dose adjustment for normal eating (DAFNE) randomised controlled trial. *British Medical Journal* **325**: 726

Diabetes UK, National Diabetes Support Team and Department of Health (2004) *Key Criteria that a Structured Education Programme Should Meet to Fulfil the NICE Requirements*. Available at [http://www.cgsupport.nhs.uk/downloads/NDST/Edu\\_prog\\_key\\_criteria.doc](http://www.cgsupport.nhs.uk/downloads/NDST/Edu_prog_key_criteria.doc) (accessed 14.01.05)

National Institute for Clinical Excellence (2003) *Technology Appraisal Guidance 60: Guidance on the Use of Patient-Education Models for Diabetes*. London, NICE

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