NHS
Stockport
Clinical Commissioning Group

Stockport CCG Prescribing Pathway: FreeStyle Libre® and FreeStyle Libre2®

Prescribing agreement between Stockport CCG and Stockport NHS Foundation Trust (SFT)

NHS Stockport Clinical Commissioning Group

STOCKPORT CCG PRESCRIBING PATHWAY: FREESTYLE LIBRE® AND FREESTYLE LIBRE2®

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ROLE	CONTRIBUTORS	DATE
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CHANGE CONTROL		
This section outlines any changes to this document		
Summary and description of change		Date
1.		
2.		
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Contents

Introduction:

In an effort to streamline the appropriate use of the FreeStyle Libre® (FSL)* device, when recommending this treatment in patients registered with Stockport GP practices, we have collaboratively devised this prescribing pathway which is a formalized prescribing agreement between Stockport CCG and Stockport NHS Foundation Trust (SFT). It outlines the responsibilities of the patient, diabetes specialist and the GP practice when treatment with FSL is initiated.

The pathway was created following extensive consultation and input from all SFT diabetes services, including adult, paediatrics, and maternity sector. It is in-line with the updated prescribing criteria from Greater Manchester Medicines Management Group (GMMMG)[1] and NHS England[2].

In Stockport CCG the FreeStyle Libre Flash (Abbott) Glucose Monitoring System may be prescribed for use in **adults, young people and children**.

***Unless otherwise indicated, all statements herein referring to "FreeStyle Libre" also apply to FreeStyle Libre 2.*

Reference:

1. GMMMG. FreeStyle Libre and FreeStyle Libre 2 Flash Glucose Monitoring System. (February 2021). Available online: http://gmmmg.nhs.uk/docs/nts/GMMMG-FreeStyle-Libre-recommendation-Feb-21-FINAL.pdf
2. NHS England. Flash Glucose Monitoring: National arrangements for funding of relevant diabetes patients. (November 2020). Available online: https://www.england.nhs.uk/publication/flash-glucose-monitoring-national-arrangements-for-funding-of-relevant-diabetes-patients/

Appendix 1: Prescribing Pathway

FreeStyle Libre2® Prescribing Pathway Flowchart

1-First Clinic Review

- Patient assessed by Diabetes Specialist as suitable for a FreeStyle Libre trial phase for 3 to 6 months, as per GMMMG criteria.
- Patient agreement contract explained and form signed
- Collect baseline information to log on the audit tool of choice (e.g. ABCD audit)
- Send initiation letter to GP practice
- Education session pre-booked for patient (remote or live session)

2 - Communications (week 1-4)

- Patient to participate in education session
- Reader to be provided by the diabetes clinic if applicable
- GP to issue prescription for FreeStyle Libre sensors

3 - Second Clinic Review (post week 8)

- Diabetes Specialist to conduct a second clinic or virtual reviews as appropriate
- For virtual reviews at least 70% of data should be captured from sensor
- Continue to log data in the audit tool of choice
- If any problems arise, arrange further clinic/virtual reviews for patient as appropriate

4 - Final Clinic Visit (3-6months)

- Final clinic assessment after completing 3-6 months initiation phase
- Review if agreed outcomes are met
- Send letter to GP - to either stop or continue future FreeStyle Libre prescriptions
- Log outcomes in the audit tool of choice

NHS Stockport NHS Foundation Trust

Patient Sticker

Patient/Carer Agreement: Trial Phase with Freestyle Libre2® Flash Glucose Monitoring System

As part of your diabetes management you been started on the blood glucose monitoring device called Freestyle Libre2®, for a trial phase of 6 months. As part of the trial phase the following must be agreed:

Patient must agree:

- That they meet the clinical National and GM criteria for initiation of this device
- To a personal target plan during the trial phase, with your specialist
- To attend education on FreeStyle Libre monitoring, provided by the diabetes team (online or in person)
- To participate in regular reviews with the diabetes team (can't miss more than 1 consecutive appointment)
- To scan glucose levels no less than 8 times per day, and use the sensor >70% of the time
- To upload FreeStyle Libre data online (e.g. LibreView, or equivalent) and share it with the diabetes specialist, for support on managing progress

Specialist responsibilities

- Offer treatment with the FreeStyle Libre to eligible patients as per National and GM criteria only
- Provide suitable training and education
- To create and agree a personalised target plan during the trial phase, together with the patient

Continuation criteria:

- Patient to fulfil agreed education requirements start of the trial phase.
- Patient to achieve the following one or more agreed personal target plans at the end of the trial phase;
  - Reduction in BGTS use from ____ to____ ☐
  - Reduction in HbA1C of 0.5% or more, within 6 months ☐
  - Reductions in severe/non-severe hypoglycaemia* ☐
  - Reductions in episodes of diabetic ketoacidosis ☐
  - Reductions in admissions to hospital ☐
  - Improvement of time in range ☐
  - Improvement of psychological well being ☐

** - Note: Libre will be withdrawn should complete hypoglycaemic awareness be regained and maintained.*

Patient/Carer agreement:
The information above has been explained to me and I understand that NHS provision of Freestyle Libre sensors will be discontinued after 6 months if there is inadequate benefit, in line with this document.
Patient/Carer's
Signature: …… Date:……

Stockport NHS Foundation Trust

Relevant Department Address
Telephone Number
Email Address

Patient name:

Address:

Date:

Dear <Name of Patient>,

RE: Education for trial phase with *FreeStyle Libre2®

You have been referred by your diabetes specialist, to participate in an education session as part of your Freestyle Libre initiation on:

Date: _____

Time: _____

Location: _____

To confirm your attendance or request an alternative date, please call: <**insert telephone number**>

The education session will be led by the diabetes team. Who will cover all aspects of the FreeStyle Libre use during your trial phase.

We have sent a request to your GP to prescribe FreeStyle Libre sensors; please can you ensure that you bring those with you to the education session. Please also register onto the Libre View website at www2.libreview.com, before participating in the event if you can.

We are looking forward to seeing you soon.

Yours sincerely,

<Clinician's name>

Cc GP

NHS Stockport NHS Foundation Trust

Relevant Department Address
Telephone Number
Email Address

GP Name
Address
Date
Patient Details

Dear Dr <Name>

RE: Start trial treatment with FreeStyle Libre2®

Your patient has been assessed as suitable, as per GMMMG, for a trial phase with the flash glucose monitoring system, FreeStyle Libre 2®.

Your patient meets one or more of the following 7 criteria for initiation:

1. Patient with Type 1 diabetes OR with any form of diabetes on hemodialysis and on insulin treatment; ☐
   -who in either of the above, are clinically indicated as requiring intensive monitoring >8 times daily, as demonstrated on ammeter download/review over the past 3 months.
   OR with diabetes associated with cystic fibrosis on insulin treatment

2. Pregnant women with Type1 Diabetes, or actively trying to conceive. ☐
   Or Pregnant women with Type 2 Diabetes on basal bolus insulin regime.

   (Patients developing gestational diabetes are excluded from this recommendation unless they meet other criteria within this recommendation.) Pregnant patients will be expected to return to their previous method of blood glucose testing after 12 months in total, inclusive of postdelivery period.

   ***For patient <X> pregnancy due date is: <insert date>**

3. People with Type 1 diabetes unable to routinely self-monitor blood glucose due to disability who require carers to support glucose monitoring and insulin management. ☐
   (This could also apply to children)

4. People with Type 1 diabetes for whom the specialist diabetes MDT determines have occupational (e.g. working in insufficiently hygienic conditions to safely facilitate finger-prick testing) or psychosocial circumstances that warrant a 6-month trial of Libre with appropriate adjunct support. ☐

   "psychosocial circumstances" is defined as patients who had warranted formal assessment for psychosocial support as a result of their diabetes. This could also apply to children/adolescents.

5. Previous self-funders of Flash Glucose Monitors with Type 1 diabetes where those with clinical responsibility for their diabetes care are satisfied that their clinical history suggests that they would have satisfied one or more of these criteria prior to them commencing use of Flash Glucose Monitoring had these criteria been in place prior to April 2019 AND has shown improvement in HbA1c since self-funding. ☐

6. For those with Type 1 diabetes and recurrent severe hypoglycemia or impaired awareness of hypoglycemia, NICE suggests that Continuous Glucose Monitoring with an alarm is the standard. Other evidence-based alternatives with NICE guidance or NICE TA support are pump therapy, psychological support, structured education, islet transplantation and whole pancreas transplantation. However, if the person with diabetes and their clinician consider that a Flash Glucose Monitoring system would be more appropriate for the individual's specific situation, then this can be considered. ☐

7. People with Type 1 diabetes or insulin treated Type 2 diabetes who are living with a learning disability and recorded on their GP Learning Disability register ☐

Use of FreeStyle Libre in people with type 2 diabetes (other than within criteria 1, 2 and 7 in this document) is not recommended.

Action for GP:

- Commence prescription for FreeStyle Libre2® - 2 sensors per month (each sensor lasts 14days), for a period of 6 months months. A follow up letter will from the specialist clinic will follow post review.
- If criteria 2 is selected (pregnant women), no follow up is required. Please **STOP** prescribing the sensors after the pregnancy due date of: **<insert date>.**

Patients are advised that should they receive a 'faulty' sensor, to contact the manufacturer directly for a replacement (Abbott Customer Careline 0800 170 1177). You should **not** issue another prescription in such event.

Patients may still, on occasions be required to perform blood glucose and/or blood ketone testing. Please continue to prescribe their test strips as an acute prescription. Use of these test strips will be reduced to a lower level. If this is not the case then please let us know as the patient may not be suitable for ongoing use of the FreeStyle Libre® system, or may need further education during the 6 month trial period.

Follow up arrangements:

We will ensure your patient receives the required training and monitoring during the 6 months trial phase with FreeStyle Libre®, in-line with GMMMG.

Training clinic is scheduled on: <insert date>.

Review in clinic: <insert date, for 6months review>

At the end of the trial phase, we will assess if they have met the criteria to continue long-term use with FreeStyle Libre®, and inform you of the outcomes.

If you have any concerns or questions, please feel free to contact us.

Yours sincerely,

<Clinician's name>

NHS Stockport NHS Foundation Trust
Relevant Department Address
Telephone Number
Email Address

GP Name

Address

Date

Patient Details

Dear Dr <Name>

RE: Continuation for long-term FreeStyle Libre2®

I am writing to inform you that your patient has successfully completed a 6 month trial of the flash glucose monitoring system, FreeStyle Libre2®, and has been assessed as suitable to continue using this system on a long-term basis.

The following one or more diabetes improvement outcomes have been met:

- Reduction in BGTS use from ____ to____ ☐
- Reduction in HbA1C of 0.5% or more, within 6 months ☐
- Reductions in severe/non-severe hypoglycaemia* ☐
- Reductions in episodes of diabetic ketoacidosis ☐
- Reductions in admissions to hospital ☐
- Improvement of time in range ☐
- Improvement of psychological well being ☐

We will continue to monitor your patient and will inform you in writing if their circumstances change.

Action for GP:

- Please continue prescribing FreeStyle Libre2® 2 sensors per month, on repeat.

Patients are advised that should they receive a 'faulty' sensor, to contact the manufacturer directly for a replacement (Abbott Customer Careline 0800 1701177). You should **not** issue another prescription in such event.

Yours sincerely,

<Clinician's name>

Relevant Department Address
Telephone Number
Email Address

GP Name

Address

Date

Patient Details

Dear Dr <Name>

RE: Stop treatment for FreeStyle Libre2®

I am writing to inform you that following the trial phase for treatment with FreeStyle Libre2®, your patient has been assess as not suitable to continue this treatment on a long-term basis.

Unfortunately the following one or more criteria have **not** been met:

- Actively engaged with the diabetes clinic ☐
- Commitment to training in the use of Freestyle Libre® ☐
- Reduction in blood glucose test strips (BGTS) use ☐
- Reduction in HbA1C of 0.5% or more, within 6 months ☐
- Reductions in severe/non-severe hypoglycaemia ☐
- Reductions in episodes of diabetic ketoacidosis ☐
- Reductions in admissions to hospital ☐
- Improvement of time in range ☐
- Improvement of psychological well being ☐

We will continue to monitor your patient's diabetes management as usual and will inform you in writing if their circumstances change.

Action for GP:

- Please stop prescribing FreeStyle Libre2® sensors.

Yours sincerely,

<Clinician's name>