Insulin Titration- Group Education

‘Improving your blood glucose control through self-titration of insulin’

Introduction
Evidence shows improvement in glycaemic control reduces risk of long term complications (Turner 1998, DCCT 1995). People with diabetes are responsible for 95% or more of their daily care (Funnel and Anderson 2004; St. Vincent Joint Taskforce for Diabetes 1995). People with Diabetes managed on insulin need to self–titrate their insulin dose appropriately to improve their glycaemic control. Successful self-management of diabetes requires knowledge about the condition, how it needs to be treated and what needs to be done (Diabetes UK 2009).

We have developed interactive patient empowerment (Tang, Funnell; Anderson 2008, NICE 2003) group education to enable patient on twice daily insulin to self titrate their insulin dose using "Step 2" titration technique according to their 4 point blood glucose self-monitoring profile, diet and life style.

Aims
The aim of the three hours group education programme is to:
• Provide patients with essential diabetes information in plain language to help build self-management knowledge and skills
• Enable patients to self-titrate their insulin dose confidently and appropriately.

Intended audience
Insulin treated people with diabetes on twice daily insulin regime

Source of Referrals
• Doctor and Diabetes Specialist nurse clinics
• GP practices
• Self-referrals

Referral criteria to the group education
To receive education about insulin adjustment and/or support in actually making the adjustments, Patient will meet the following conditions:
• New to insulin therapy or need knowledge and skills to self-titrate insulin dose
• Able and willing to do self-blood glucose monitoring, record and report the results
- Able and willing to contact the Diabetes Specialist Nurse on a regular basis for assistance and further education regarding insulin adjustments.
- Demonstrate an interest in improving control and having regular follow-up
- Verbal and written English language skills

**Exclusion criteria**
- Acutely or severely ill (examples: immediately post-op, end stage renal disease)
- Non-English speaking
**Resources**
Power point presentation
Lap top
Overhead projector
White board/screen
Blood glucose monitoring record books
Pens for participants to write with
Injection devises
Sharps box
Personal blood glucose meters

**Group Education**
A single, three-hour session held once a month in the Diabetes Centre
6-12 people for each per session

**Seating Arrangement for patients**
Horse shoe arrangement

**Evaluation**
Outcome Measures, HbA1c, Blood pressure, weight. BMI, Knowledge, Locus of control, Treatment satisfaction (Bradley 1994a, 1994b, 1994c and 1994d)
Programme for the session

1 Overview of Diabetes and insulin
- Introduction
- Understanding diabetes
- What is insulin
- How does insulin work
- Why do I need insulin
- How long will I have to take insulin
- Are there different types of insulin
- Which insulin is best for me
- How often do I take insulin
- How do I inject insulin
- Where do I inject insulin
- How to store insulin
- How to look after the equipment
- Disposing of pens/needles
- Why should I test my blood glucose level
- How often do I monitor my blood glucose levels?
- Why do I need to record the blood glucose levels results
- What is good glucose level control
- Why do I need good control
- Insulin and your food
- Insulin and exercise
- Insulin and driving
- What care to expect

2) Coffee break

3) Activities
- How do I self adjust my insulin?
- What factors influence my diabetes control?
- How do I manage my high blood glucose levels?
- How do I manage low blood glucose levels?
- How do I manage my diabetes when I feel sick?
- How do I manage driving and my diabetes?
- How do I manage my diabetes when I exercise?
- How do I manage when I travel or go on holiday?

4) Questions and answers

5) Close
References


