

The Royal Wolverhampton Hospitals NHS Trust

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Policy Title: Diabetes (general)
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Authors Title: Diabetes Outreach Team
Policy Location: Intranet

Planning for the Safe Discharge of Patient New to Insulin Therapy

Practice Statement:

To ensure patient who has been started on or had insulin therapy/device changed (in line with clinical practice GNCP 23) is safely and appropriately prepared and equipped for discharge from hospital to own home or residential care. This should help prevent delayed discharge.

Help may be enlisted from the Diabetes Outreach Team to facilitate this process.

Equipment List:

- Insulin pen(s) and insulin cartridge (if refillable pen is chosen)
- Insulin needles (these are available from pharmacy on TTO)
- Sharps-bin
- Blood glucose meter, Meter test strips
- Lancing device, Lancets
- Home glucose monitoring diary
- Instructional leaflet for both insulin pen and meter
- Treatment sheet / Diabetes chart

Action:

1. With the help of the diabetes team and discussion with the patient, choose a suitable insulin regimen, and device that the patient will be able to use independently and safely.
2. Ensure insulin is prescribed correctly by a doctor on the diabetes chart and treatment sheet.
3. From first injection (providing patient is able) encourage self injection with support and guidance from ward staff (see clinical practice GNCP 23).
4. Inform patient of insulin dose prior to discharge. This should be written clearly in blood monitoring diary.
5. All patients on insulin (where able) should be self monitoring blood glucose levels and recording them. Ensure patient has been provided with a blood glucose meter, and is instructed how to use the device safely and competence is checked

prior to discharge. They should be shown how to record in a diary, when to test and what their target level is.

6. Ensure that on day of discharge patient has all necessary equipment to last until further supplies can be obtained from own GP (minimum 7 days):
 - o Insulin pen(s)
 - o Insulin cartridge (if refillable pen is chosen)
 - o Insulin needles (these are available from Pharmacy on TTO)
 - o Sharps-bin
 - o Blood glucose meter, Meter test strips
 - o Lancing device, Lancets
 - o Home monitoring diary
 - o Instructional leaflet for both insulin pen and meter

It is also helpful to provide a list of items for prescription in detail for the GP to continue supply.

7. Ensure patient is educated regarding hypoglycaemia, including prevention and treatment. Patient should also be referred to a dietician
8. Ensure patient has the contact number for the diabetes nurses prior to discharge: 01902 695310. An appointment should be booked for return to diabetes centre via Diabetes Outreach Team.
9. If patient is unable to self inject safely before expected discharge then a referral should be made to the district nursing service. If the patient is never likely to self inject independently then a supply of insulin in 10ml vial, insulin syringes and sharps-bin should be sent with the patient. A letter of authorisation should be signed by a doctor stating the insulin type, dose, frequency and timing. This should also be sent with the patient (whether on syringe or pen method).

References:

Department of Health (2001) National Service Framework for Diabetes: Standards. DOH, London. 21.

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NHS Executive (1997) *Key Features of a Good Diabetes Service.* Dept of Health, London.

Rodgers J (1999) The Wessex Starting Insulin Study: practicalities of initiating insulin. J of Diabetes Nursing vol3;1 p20-4.

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Diabetes Discharge Planning for Patient New to insulin or insulin type/device changed



