

Equality Impact and Risk Assessments

Pan Merseyside Policy Review - Continuous Glucose Monitoring systems for Continuous Glucose monitoring in Type 1 Diabetes Mellitus and Insulin Pumps

Midlands and Lancashire CSU

Current Status

Stage 1 Draft

Review Date

12/12/2017

Person Responsible

Harinder Sanghera

Service

Policy for the funding of Insulin Pumps and Continuous Glucose Monitoring devices for patients with diabetes.

Service Area

Individual Funding Request / Individual Patient Activity Procedure for Lower Clinical Value.

Project Lead

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Explanation

Insulin Pumps are portable devices attached to the body that continuously deliver amounts of rapid or short acting insulin via a catheter placed under the skin. Insulin Pumps offer an alternative to insulin injections as they reduce the need for multiple insulin jabs per day and give the user increased ability to control blood glucose levels. Diabetes UK estimate that around 1 in 1,000 people with diabetes wears an insulin pump. Continuous Glucose Monitoring (CGM) devices measure blood glucose (blood sugar) levels every few minutes throughout the day and night. A tiny electrode called a glucose sensor is inserted under the skin to measure glucose levels in tissue fluid. It is connected to a transmitter that sends the information via wireless radio frequency to a monitoring and display device. The policy provides CCG's and Commissioners guidance on circumstances for the commissioning of Insulin Pump and CGM devices. This policy has been identified as low clinical priority. The CCG's have a limited funding resource and therefore have to prioritise services that are commissioned. CCG's currently gives greater priority to life threatening and chronic ill health. The Policy Review Group are working to identify areas of impact through the changes they make, balanced with the need to align eligibility for treatments with best clinical evidence and balancing health resources for the whole population. This policy is part of a suite of policies that are being reviewed collaboratively across Merseyside CCG's. The CCG's that are part of this review are: NHS Halton Clinical Commissioning Group NHS Liverpool Clinical Commissioning Group NHS St Helens Clinical Commissioning Group NHS South Sefton Clinical Commissioning Group NHS Southport and Formby Clinical Commissioning Group NHS Warrington Clinical Commissioning Group. This assessment has been carried out by the Equality and Inclusion team at MLCSU.

Assessment

Equality Impact

1	Does this issue plan to withdraw a service, activity or presence?	
<p>No: This assessment is based on a reviewed policy on the commissioning of Insulin Pump and Continuous Glucose Monitoring (CGM) devices for patients with type 1 diabetes. The policy outlines the criteria for when Insulin Pumps can be commissioned. This is based on clinical reasons. The policy is based around the commissioning of Insulin Pumps where patients have type 1 diabetes and who are not managing their glucose levels well.</p>		
2	Does this issue plan to reduce a service, activity or presence?	
<p>No. The review does not plan to reduce a service. There is currently no criteria policy in place.</p>		
3	Does this issue plan to introduce or increase a charge for Service?	
<p>No. There is no plan to introduce a charge for patients accessing these monitoring devices / pumps.</p>		
4	Does this issue plan to make a change to a commissioned service?	
<p>No. Commissioned services for supporting patients with type 1 diabetes remain unchanged.</p>		
5	Does this issue plan to introduce, review or change a policy, strategy or procedure?	
<p>Yes: this is a new policy to provide clinicians with criteria for providing patients with Continuous Glucose Monitoring devices and Insulin Pumps. The criteria is still being developed with a review paper shared with the policy group dated 9/2/2018. Further discussion with the policy group has amended criteria relating to children, definitions of severe hypoglycemia.</p>		

6	Does this issue plan to introduce a new service or activity?	
<p>Yes: the policy will enable patients (meeting the criteria) to access a differing treatment to help manage their condition.</p>		
7	Is this primarily about improving access to, or delivery of a service?	
<p>No. The new policy should not impact on the current access of support for this cohort of patients. However the review work will help patients access consistent treatment and consistent criteria across the area.</p>		
8	Does this affect Employees or levels of training for those who will be delivering the service?	
<p>Yes. Staff involved in making decisions on this treatment will require information on the new policy.</p>		
9	Does this issue affect Service users?	
<p>Yes. This is a relatively new technology for the treatment of patients with type 1 diabetes. The criteria is not yet agreed however any criteria will impact on this patient group across all age groups.</p>		
10	Can you foresee a negative impact on any Protected Characteristic Group(s)? <i>If YES please state what these could be.</i>	
<p>Possibly. Currently review work has highlighted criteria needing to meet the physiological differences between adults and children. Type 1 diabetes is a long term conditions which falls into the protected characteristic of 'disability'. Further engagement work on the draft criteria will help understand any impacts on protected groups.</p>		

Equality Risk

11	Have you got any general intelligence (research, consultation, etc.)? <i>If YES please list any related documents.</i>	
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<p>NICE Guidance (NG17): https://www.nice.org.uk/guidance/ng17/chapter/1-Recommendations#blood-glucose-management-2 NICE Guidance: (TA151) https://www.nice.org.uk/guidance/ta151 Diabetes UK (CGM): https://www.diabetes.org.uk/guide-to-diabetes/managing-your-diabetes/testing/continuous-glucose-monitoring-cgm Diabetes UK (Insulin Pumps): https://www.diabetes.org.uk/guide-to-diabetes/managing-your-diabetes/treating-your-diabetes/insulin-pumps</p>		
12	<p>Have you got any specific intelligence (research, consultation, etc.)? <i>If YES please list any related documents.</i></p>	
<p>Yes: IFR Data: Need to check IFR with MoB, none contained in IFR Data table. Rapid Review document produced on CGM monitoring 2014-2017. 9/2/2018. Shared with the policy review group. NB: CGM / Insulin Pump applications always have to be requested via an IFR. Activity Data is not available for this treatment because it is a new policy.</p>		
13	<p>Have you taken specialist advice? (Legal, E&I Team, etc). <i>If YES please state.</i></p>	
<p>Yes: The policy has undergone review with clinicians. The policy group have access to legal advice. The group have access to advice and guidance from Midlands and Lancashire CSU Equality and Inclusion team. On going support from MLCSU Communication and Engagement team.</p>		
14	<p>Have you considered your Public Sector Equality Duty? <i>Please provide a rationale.</i></p>	
<p>Yes: The policy review group are considering the potential impact of this policy on staff and patients in line with people with protected characteristics. Engagement work has been carried out with clinicians and is planned with the public and different stakeholders to understand the impact that this policy may have.</p>		
15	<p>Do you plan to publish your information? <i>Include any "Decision Reports"</i></p>	
<p>Yes: All Equality Impact Assessment reports will be made available to the public on request.</p>		
16	<p>Can you minimise any negative effect? <i>Please state how.</i></p>	

<p>Yes: Engagement work with the public will help to identify any negative effects of the policy and its criteria. This work will include stakeholders such as Diabetes support groups. The policy criteria has been developed with input from the regions leading Diabetologists and Medicines Management and in alignment with NICE.</p>		
17	<p>Do you have any supporting evidence? <i>If YES please list the documents.</i></p>	
<p>Yes: see above sections containing information. Engagement information to be added in due time. General research on diabetes suggests that certain groups may be less able to manage their condition well such as children, young people and people with learning disabilities.</p>		
18	<p>Have you/will you engage with affected staff and users on these proposals?</p>	
<p>Yes: The policy group has undertaken review of proposed changes within the revised policy. This has involved engagement with G.P's, Service Providers and Clinicians. Further engagement work will be carried out with stakeholders and the public.</p>		

Human Rights Impact

19	<p>Will the policy/decision or refusal to treat result in the death of a person?</p>	
<p>No. Refusal of this treatment should not result in the death of a person.</p>		
20	<p>Will the policy/decision lead to degrading or inhuman treatment?</p>	
<p>No. The policy should not lead to degrading or inhuman treatment.</p>		
21	<p>Will the policy/decision limit a person's liberty?</p>	
<p>No. The policy should not limit a person's liberty.</p>		
22	<p>Will the policy/decision interfere with a person's right to respect for private and family life?</p>	

No. The policy should not interfere with a person's right to respect for private and family life.		
23	Will the policy/decision result in unlawful discrimination?	
No. The policy should not lead to unlawful discrimination. Exceptional cases will be assessed through applications to the Individual Funding Request process.		
24	Will the policy/decision limit a person's right to security?	
No. The policy should not limit a person's right to security.		
25	Will the policy/decision breach the positive obligation to protect human rights?	
No. The policy should not breach human rights.		
26	Will the policy/decision limit a person's right to a fair trial (assessment, interview or investigation)?	
No. The policy should not limit a person's right to a fair trial		
27	Will the policy/decision interfere with a person's right to participate in life?	
No. The policy should not interfere with a person's right to participate in life		

Stage 2 Details

Equality Policies

No files uploaded

Equality Other

No files uploaded

Human Rights

No files uploaded

Additional Files

No files uploaded

Comments

Assessment Comment

This stage 1 Equality Impact Assessment is a scoping document. It has informed that there may be potential impact and therefore a stage 2 EIA will be undertaken. Criteria for the policy is still being developed.

22/05/2018

MULLOY, JENNIFER

Approval Comment

Recommend that the following is undertaken: 1. A stage 2 equality impact assessment is carried out. 2. Engagement work is carried out to include Diabetes stakeholder groups and patients / carers with diabetes including parents / carers of children and young children with diabetes.

22/05/2018

MULLOY, JENNIFER

Stage 2 Comment

No comment saved

Last Activation Comment

No comment saved

Last Deactivation Comment

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