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Value  
your  
voice

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Put ‘joint decision-making’ at the  
heart of your diabetes care

## Why might I have seen my prescriptions reduced or changed to another meter?

This decision may be as a result of guidance by your Local Health Economy (LHE) or your Local Health Board. This guidance (also called 'a formulary') is normally to try to reduce prescription costs in your area. However, it is just guidance and exceptions can be made at the discretion of your healthcare team.

A recent survey conducted by Diabetes UK found that 27% of respondents had, in the past 12 months, been refused a prescription for blood glucose test strips or have had the number of test strips on their prescription restricted. Budget constraints or “excessive testing” were the most frequent reasons given for these refusals and restrictions<sup>1</sup>.

For many people with diabetes, self-monitoring is necessary to manage their diabetes well. Not everyone needs to self-monitor, but if they do they should have access to test strips and the meter they need.

**Diabetes UK, 2017<sup>1</sup>**

You've probably heard about the cost of diabetes...

### Short term savings have big long-term costs

Problems in diabetes care multiply when things are put off. Attempts to save money in the short term can often lead to having to spend much more money in the long term and can have a devastating impact on the lives of people with diabetes<sup>2</sup>.

Diabetes costs the NHS £10 billion each year - around 80% of these costs are spent on complications such as amputations and blindness<sup>2</sup>.



## Complications can be avoided

“Acting early to prevent complications developing and treating them as early as possible both limits their impact on the person’s life and saves the NHS money.”

**Diabetes UK, 2014<sup>2</sup>**

Blood glucose control is essential to avoid serious complications. In addition to checking longer-term control of blood glucose using the HbA1c test at the clinic, many people need to self-monitor at home to get a closer view of how different foods, exercise and medication influence their blood glucose levels.

For people with Type 1 diabetes, this self-monitoring is to avoid both hypoglycaemia and hyperglycaemia, and can improve glycaemic control and reduce long term complications.<sup>3</sup>

Estimated average cost of a leg amputation is around **£12,000<sup>4</sup>**.

**£1034-** estimated cost for a hospital admission in England due to a hypo<sup>5</sup>

“We urge people with diabetes to challenge restrictions to their prescription for test strips and meters if they feel that their needs are not being met and their ability to self-manage their condition undermined.”

**Diabetes UK 2017<sup>1</sup>**

## Like people with diabetes, not all meters are the same

Choosing a meter that reliably delivers accurate results should be a clear-cut decision. It allows you to trust your blood glucose readings and have the confidence to manage your condition and treatment choices accordingly.

According to Diabetes UK, 66 per cent of survey respondents were given no choice of blood glucose meter. Of these, one in four were not happy with the meter provided. For instance, the meter was too large to easily move around or didn't upload the data to a computer<sup>1</sup>.

**But diabetes is not a simple disease**— it's different, physically and emotionally, for every person who has it. When it comes to selecting a blood glucose meter, it is important to discuss how you are going to manage your diabetes outside of your doctor's appointments and what you will need to enable you to fit testing in to your day-to-day life so that you can spend more time in range.

Having a blood glucose meter that fits your needs, lifestyle and preferences is something you should be able to discuss with your healthcare team. This is especially important if you need to improve your blood glucose control.

Perhaps you need to be able to test discreetly while you are out and about.

Perhaps you need a meter that will help you reduce your HbA1c, or one with a large screen.

Or perhaps it is virtually pain-free finger pricking that will make it easier for you to stick to testing at the right times.

## How can I ask my GP to continue to provide the strips I need?

You should always work with your healthcare professional to come to a solution. The first step should be communicating why you wish to continue to use your meter and why blood glucose monitoring is beneficial to your diabetes, using the NICE guidelines and recommendations to strengthen your case.



Some people may find it difficult to question a decision made by their healthcare professional, even if they don't agree with it. But working in partnership with your healthcare team and being involved in making decisions for your own care and treatment may lead to better outcomes for you and your healthcare team.

## It's a matter of informed choice



You should have the opportunity to make informed decisions about your care and treatment, in partnership with your healthcare team.

The National Institute for Health and Care Excellence (NICE) provides advice on the care and support that should be offered to people who use health and care services in the UK.

Being familiar with the NICE guidelines on blood glucose monitoring may be beneficial to help you to know under what circumstances self-monitoring is recommended. Knowing the right reasons and frequencies for testing, especially where it personally applies to you, may provide helpful support for your conversation with your healthcare team.

If your healthcare team feels that your blood glucose monitoring is not effective and you are not acting on the information appropriately, ask about structured education courses to help enable you to make the most of your blood glucose testing.



Download our NICE to know leaflet at [www.accu-chek.co.uk/nicetoknow](http://www.accu-chek.co.uk/nicetoknow) or [www.accu-chek.ie/nicetoknow](http://www.accu-chek.ie/nicetoknow)

## What if I am unable to discuss this with my healthcare team?



You can write to your GP or healthcare team to seek written clarification about why they have decided to reduce or change your prescription.

**In your letter, you should include:**

- Why you need to continue testing
- The number of times you need to test
- Details of how you use the test results
- What actions you might take based on your results
- Why you wish to stay on your current meter

If you are dissatisfied with the written response from your healthcare team, you might want to make use of the following to assist you:

## Department of Health Letter (UK)

If you are in the UK, The Department of Health has released guidance which highlights that self-monitoring blood glucose is essential for people with Type 1 diabetes. You can send this letter to your healthcare professional team, or the wider Local Health Economy trust to ensure they are aware of the necessity of test strips. You can download the letter here:



<https://www.gov.uk/government/publications/importance-of-finger-prick-tests-in-managing-type-1-diabetes>

## Diabetes UK Advocacy Service

Diabetes UK has a well-developed advocacy service that can help you if you need support for the availability of test strips. They have a pack that can be downloaded from the Diabetes UK website, or requested from the Diabetes UK Careline.



[www.diabetes.org.uk/How\\_we\\_help/Helpine/Your-rights/Advocacy-packs](http://www.diabetes.org.uk/How_we_help/Helpine/Your-rights/Advocacy-packs)

## Get involved with your local CCG

Clinical Commissioning Groups (CCGs) commission most of the hospital and community NHS services in the local areas for which they are responsible. Some CCGs have patient groups you can get involved with or they link up activities with local Healthwatch groups. You can find details about how to get involved with your CCG on their website.



<http://www.nhs.uk/NHSEngland/thenhs/about/Pages/getinvolved.aspx>

**ENGLAND**

**Patient Advice and Liaison Service (PALS)**

PALS help resolve concerns or problems when you are using the NHS in England. They provide information about the NHS complaints procedure.

[www.nhs.uk/chq/Pages/1082.aspx](http://www.nhs.uk/chq/Pages/1082.aspx)

**SCOTLAND**

**Patient Advice and Support Service (PASS)**

PASS is delivered by the Scottish Citizens Advice Bureau (CAB) Service. The service is independent and provides free, confidential information, advice and support to anyone who uses the NHS in Scotland.

[www.cas.org.uk](http://www.cas.org.uk)

**WALES**

**Community Health Councils (CHCs)**

CHCs are independent organisations which provide help and advice if you have problems with or complaints about NHS services. Each CHC has a complaints advocacy service to assist with individual complaints.

[www.communityhealthcouncils.org.uk](http://www.communityhealthcouncils.org.uk)

**NORTHERN IRELAND**

**The Patient and Client Council**

The Council provides free and confidential advice, information and help to make a complaint.

[www.patientclientcouncil.hscni.net](http://www.patientclientcouncil.hscni.net)

**Your local MP**

You could also contact your local MP for support at [www.writetothem.com](http://www.writetothem.com)

Please note the inclusion of named agencies does not constitute a recommendation or endorsement by Roche Diabetes Care. Whilst every effort is made to ensure accuracy, Roche cannot be held responsible for errors or omissions. This information should not be considered a complete guide to the law, which also changes from time to time. Legal advice should always be taken if in doubt.

**References:**

1. Diabetes UK. April 2017. Testing times: restrictions accessing test strips and meters for people with diabetes. Available from: [https://www.diabetes.org.uk/Documents/campaigning/1092\\_Testing%20times\\_test%20strips%20and%20meters%20report%20WEB%20final.pdf](https://www.diabetes.org.uk/Documents/campaigning/1092_Testing%20times_test%20strips%20and%20meters%20report%20WEB%20final.pdf) [Accessed 12/04/2017]
2. Diabetes UK. January 2014. The cost of diabetes report. Available from: <https://www.diabetes.org.uk/Documents/Diabetes%20UK%20Cost%20of%20Diabetes%20Report.pdf> [Accessed 02/03/2017]
3. Diabetes UK. March 2017. Position Statement Self-monitoring of blood glucose (SMBG) for adults with Type 1 diabetes. Available from: <https://www.diabetes.org.uk/Documents/Position%20statements/SMBGType1%20Final%20April%202017.pdf> [accessed 13/04/2017]
4. National Institute for Health and Clinical Excellence. August 2012. National costing report: Lower limb peripheral arterial disease. Available from: <https://www.nice.org.uk/guidance/cg147/resources/costing-report-186857245> [Accessed 02/03/2017]
5. McEwan P, Larsen Thorsted B, Wolden M, et al. 2014. Healthcare resource implications of hypoglycemia-related hospital admissions and inpatient hypoglycemia: retrospective record-linked cohort studies in England. *BMJ Open Diabetes Research and Care* 2015;3:e000057.doi:10.1136/bmjdr-2014-000057

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Roche Diabetes Care Limited, Charles Avenue,  
Burgess Hill, RH15 9RY, UK.  
Company registration number: 9055599

