

## SFHDiabGA2

### Assess and investigate individuals with suspected diabetes



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#### Overview

This standard is about assessing individuals with suspected diabetes and deciding whether further investigations should be requested. The individual, or their companions, may suspect they have diabetes, and request an assessment, or they may have been advised to seek an examination by another healthcare practitioner. The setting in which the assessment takes place might include the individual's home, community settings, day centres, surgeries, mobile assessment centres and hospitals.

Users of this standard will need to ensure that practice reflects up to date information and policies.

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#### Performance criteria

*You must be able to:*

- P1 explain clearly to the individual
  - P1.1 your own role and its scope, your responsibilities and accountability
  - P1.2 the information that will be obtained and stored in records and with whom this information might be shared
  - P1.3 what is involved in the assessment
- P2 respect the individual's privacy, dignity, wishes and beliefs
- P3 minimise any unnecessary discomfort and encourage the individual's full participation in the assessment
- P4 obtain the individual's informed consent to the assessment process
- P5 communicate with the individual in an appropriate manner, recognising the stressful nature of a potential diagnosis of diabetes
- P6 ask the individual to explain their condition in their own words, if possible, or obtain the story from any person accompanying the individual
- P7 ask appropriate questions that will enable you to assess whether the individual may be experiencing diabetes
- P8 obtain/confirm the individual's and their family's relevant medical history
- P9 obtain/confirm the individual's recent and past medications
- P10 carry out baseline observations and tests relevant to confirming the presence of diabetes
- P11 make a justifiable assessment, based on the individual's responses, baseline observations and tests and other medical conditions, whether to refer them for further investigations
- P12 request further investigations, if required, following national, local and organisational guidelines and protocols
- P13 explain to the individual why you are requesting further investigations, if any, what can be expected to happen and the expected timescales and possible implications of normal and abnormal results
- P14 provide opportunities for the individual to ask questions and increase their understanding of diabetes
- P15 assess how the individual is feeling and provide reassurance where appropriate
- P16 agree a date to review the results of further investigations
- P17 make a full, accurate and clear record of the information obtained, results of baseline observations and tests, further investigations requested, and agreed follow-up action

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### Knowledge and understanding

*You need to know and understand:*

- K1 the NSF for diabetes
- K2 NICE guidelines on diabetes monitoring, management and education
- K3 causes of diabetes
- K4 signs and symptoms of diabetes
- K5 normal and abnormal blood glucose and HbA1c values
- K6 how to monitor glucose levels, HbA1c, blood pressure
- K7 typical progressive patterns of diabetes
- K8 the importance and effects of patient education and self management
- K9 the psychological impact of diabetes, at diagnosis and in the long term
- K10 how to gather information from patients about their health
- K11 how to work in partnership with patients and carers
- K12 the social, cultural and economic background of the patient/carer group
- K13 the impact of nutrition and physical exercise
- K14 the effects of smoking, alcohol and illicit drugs
- K15 the effects of, and how to manage, intercurrent illness
- K16 how to manage hypoglycaemia
- K17 the medications used to manage diabetes
- K18 the long term complications of diabetes and when they are likely to occur
- K19 how to examine feet and assess risk status
- K20 how to monitor cardiovascular risk
- K21 how to monitor for renal disease
- K22 how to monitor for diabetic retinopathy
- K23 the law and good practice guidelines on consent
- K24 the staff member's role in the healthcare team and the role of others
- K25 local guidelines on diabetes healthcare
- K26 local referral pathways
- K27 local systems for recording patient information
- K28 quality assurance systems
- K29 the process of notification for legal and insurance purposes
- K30 sources of practitioner and patient information on diabetes
- K31 contact details of local and national support groups
- K32 how individuals can access facilities for exercise and physical activity, education and community activities

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### Additional Information

#### External Links

This competence links with the following dimensions and levels within the NHS Knowledge and Skills Framework Working Draft Version 6 (March 2003):

Dimension: HWB7 Interventions and treatments

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