

20th May, 2020.

FAQ's about Diabetes following the latest data and COVID19.

1. Should people with diabetes be shielding?

NHSE teams have collected all the data and have sent this to the Chief Medical Officer for consideration. We will await further instructions on this and cascade accordingly. Till then, the advice is to stay at home unless essential as per PHE guidelines

2. I'm high risk, what can I do?

While you can't control a lot of the things that put you at higher risk (e.g. age, ethnicity), there will be things you can work on and it's important that you focus on these as much as you can.

- ✓ Keep to social distancing measures, wash your hands, and where possible, stay at home
- ✓ Check your glucose levels regularly and look for patterns or trends where you can make changes
- ✓ Make small changes to one thing at a time so you can assess what worked, and ask your clinical teams for help if necessary
- ✓ Take your insulin and any prescribed medications regularly
- ✓ Try to reach and maintain recommended healthy exercise levels and a healthy weight
- ✓ Take time to refresh your memory and update yourself on your sick day rules - ensure you have enough ketone strips at home (if needed), which are in date, should you become ill
- ✓ Keep hypo treatments at home, just in case you need them
- ✓ Ensure members of your family know how to help you in the event of low or high blood sugars
- ✓ Use wider platforms available to you to help you manage your diabetes
- ✓ Continue to check your feet daily & ask for help if you notice anything
- ✓ Continue to attend or partake in your routine screening if & when it becomes available

Sick day Rules:

Type 1 Diabetes: https://trend-uk.org/wp-content/uploads/2020/03/A5_T1Illness_TREND_FINAL.pdf

Type 2 Diabetes: https://trend-uk.org/wp-content/uploads/2020/03/A5_T2Illness_TREND_FINAL.pdf

Children & Young People: http://www.a-c-d-c.org/wp-content/uploads/2012/08/Patient-advice-for-sick-day-rule_v4-2.pdf

Hypos:

<https://youtu.be/-XdjQFN8kbo>

<http://trend-uk.org/wp-content/uploads/2017/02/Hypo-leaflet-V4.pdf>

3. My child has diabetes – should they go back to school?

We realise this is a very big decision for most families. We are awaiting guidance from the Chief Medical Officer regarding this. However, you can access a statement from the Association of Children's Diabetes Clinicians (ACDC) on this. This is a very personal decision to each family, which we cannot give blanket advice for. This will encompass all kinds of things such as the age of your child, their diabetes, as well as things such as their self-management skills. We therefore strongly recommend you read the statement on the ACDC website and ask for help from your child's clinical teams if you are still concerned.

Association of Children's Diabetes Clinicians: <http://www.a-c-d-c.org/>

4. My child is young, and I am worried that he will require hands on assistance at school – to help with injections/hypos etc. How do we do this with social distancing?

Every situation for children and returning to school is different and so we can't give specific advice. However, we would encourage you to speak to your child's clinical diabetes team and the school team to ensure they can help your child in the best way possible.

5. What should I tell my employer?

Every employment situation is different and we can't give specific employment advice. However it's important to discuss any concerns you might have with your employer. If you can see an opportunity to make your work safer for you, you should raise it with your manager.

You should discuss any changes in guidelines or new information with your employer. A work assessment should take place to identify any precautions that may be needed to manage risk. Your employer should discuss the workplace risk assessment with you to identify the practical ways of managing those risks. If you have already had a work place risk assessment this may need to be re-visited in light of any new information, risk or guidance.

6. Should I continue to stay at home once lockdown is lifted?

The current advice is still to stay at home as much as possible and work from home if you can. Limit contact with other people and adhere to social distancing & good hygiene practices if you go out (2 metres apart where possible). Continue to wash your hands regularly and do not leave home if you or anyone in your household has symptoms.

Until a vaccine for the COVID virus is identified, it is likely that social distancing will need to be maintained for some time after lockdown and that people with additional vulnerabilities will need to be particularly careful about this.

7. How does this data change things?

Based on the global data, we were already aware that there were increased risks for people living with diabetes, and this is why we advised people living with diabetes to be particularly stringent about social distancing and staying at home.

This data gives us more detail on specific risks such as type of diabetes and interactions with characteristics like age, race, lifestyle factors and other comorbid conditions. We can use this data to identify higher and lower levels of risk with the population of people with diabetes, and to advise them on the level of precaution that they may need to take.

8. Do I need to see my team? Are they too busy?

You do not necessarily need to see your diabetes team if you feel you are doing ok. Teams are getting back to full capacity levels of staffing now and will be hopefully fully staffed over the coming weeks. Many redeployed DSNs are starting to return to their original positions. So whilst clinics may still be a little different in how they run, most teams will be offering virtual services and can be contacted at present.

Please do contact them for clinical queries and help. We are still here to help you and are never too busy! These are available to you for help if you need it:

DUK helpline: Monday to Friday 9am-6pm: **01372 720148**

NHS England helpline: for clinical queries, Monday to Friday 9-5: **0345 123 2399**

9. Can my GP help give me any new advice?

Your GP and primary care teams can help you with clinical queries by all means. They are awaiting guidance from the Department of Health as much as we are so will not be able to support you at present with any new information regarding this data.

10. I have diabetes and I am over 40yrs old, will the shielding guidelines/guidance change for me?

NHSE teams have collected all the data and have sent this to the Chief Medical Officer for consideration. We will await further instructions on this and cascade accordingly. Please do keep checking in with us for regular updates.

11. I'm a keyworker with diabetes, should I stop or change my work?

If you're a key worker, you will likely have already been taking significant precautions at work to protect yourself. You should continue to do this. You can also speak to your occupational health department, line manager, employers or HR department for more help. Your clinical diabetes team cannot make these decisions for you or assist with letters documenting this.

12. My partner has diabetes and I am a keyworker – what should I do?

If you're a key worker, you will likely have already been taking significant precautions at work to protect yourself and your partner. You should continue to do this. You can also speak to your occupational health department, line manager, employers or HR department for more help.

13. Can I get my HbA1c taken at my GP practice or Diabetes clinic?

Always best to ask your own surgery. We know many practices are doing regular long-term condition reviews including blood tests. The reviews are increasingly undertaken by phone or video. Some areas may still have problems with accessing certain tests that is why we say check with your GP practice. Finally remember test results are often available to your secondary care team even if they are done in your GP practice. You can continue to monitor your glucose also, writing this down can sometimes help show patterns and trends, which gives us a good idea on things.

14. Is it safe to visit my GP surgery or attend the Emergency Department (A&E)?

Yes! A lot of work has gone into making GP surgeries and the ED safe for patients and staff alike. Patients with suspected COVID19 are NOT typically seen in GP surgeries and are separated in emergency depts. This is to ensure they assessed in other ways or places that avoid these patients being in contact with anyone else. These places are absolutely open to you should you need them. Please do not wait at home if you need urgent help. You can also call 111 to see if where your needs can be met.

Please keep an eye out on @_diabetes101 for regular updates.
We are trying to get information to you as timely as we can.
For now, please stay safe, from Team 101!

Team @_diabetes101

follow all the professionals on twitter ✓

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