

Comprehensive diabetes education for Care Home Staff: Analysing the safety and financial impact from the CARES national diabetes education programme upon health and social care

J Ridgeway*¹, L Willcocks¹, S Gregory¹, L Heggs¹, A Puttanna²

*Main author; ¹EDEN, Leicester Diabetes Centre, University Hospitals of Leicester, NHS Trust, UK; ²Sanofi



Leicester Diabetes Centre
Committed to Growing International Research, Education & Innovation



Background:

People with diabetes living in a care home setting or housebound have higher prevalence of complications and hospital admission. Eden has previously identified that diabetes education to care staff has a positive impact for service users with diabetes and reduces their risk of emergency care. This led to a hypothesis that nationally provided diabetes education would result in reduced hospital admissions and cost saving for health and social care.

Aim:

Provide diabetes education across the UK, enhancing care staff knowledge and confidence, to reduce hospital admissions, reliance upon community nursing support and cost.

Methods:

All participants undertook a learning journey via an **online platform** which consisted of:

- > a short recorded lesson
- > 3 (three) eLearning modules and
- > a group mentoring session.

To identify if the project aims had been met, each participant completed a pre and post audit questionnaire.

Results:

29 participants initially completed the programme: (see figure 1)

- ✔ Self Assessment showed improvement in several knowledge areas with the majority wanting to share and cascade this knowledge
- ✔ Care Planning and Footcare was a common theme for improving diabetes care
- ✔ The use of hypo boxes within these settings was also a priority for over half of the attendees



Figure 1: Pre-Post Knowledge & Confidence results from the first 29 Participants to complete the programme.

Audit Component	Pre Course	Post course
Mean average knowledge and confidence out of 5 (0 = poor 5 = very good)	2.96	4.26
Daily community nurse visitations to administer insulin	19	14
Delayed insulin administrations	3	2
Diabetes medication errors	4	2
GP / ambulance call outs for a diabetes issue	10	12
Diabetes related hospitals admission	4	3
Care Homes with a hypo box	12	18

Yearly cost saving >£55,000 based on the audit responses



Conclusions:

The initial undertaking of CARES has highlighted that diabetes education in care homes:

- ✔ Increased knowledge and confidence
- ✔ Reduced hospital admissions
- ✔ Reduced community nurse support
- ✔ Had financial savings



Disclosures

The project was sponsored by Sanofi, who had not input into the content of the education, printed workbooks or self directed learning

