



## Diab HA6 Help individuals with diabetes to change their behaviour to reduce the risk of complications and improve their quality of life

### OVERVIEW

This standard covers working with individuals with diabetes to enable them to change their behaviour to improve their quality of life and reduce the risk of longer term complications through changes to diet, lifestyle and physical activity. This change may concern a specific aspect of behaviour that is one element in a total care plan. The role of the healthcare professional in this standard is to work collaboratively with the individual, and to identify goals and plans for change through discussion and agreement. Users of this standard will need to ensure that practice reflects up to date information and policies. Version No 1

### KNOWLEDGE AND UNDERSTANDING

You will need to know and understand:

- 1.national frameworks for service delivery for diabetes
- 2.national guidelines on diabetes management and education
- 3.causes of diabetes
- 4.signs and symptoms of diabetes
- 5.normal and abnormal blood glucose and HbA1c values
- 6.how to monitor glucose levels, HbA1c, blood pressure
- 7.typical progressive patterns of diabetes
- 8.the importance and effects of patient education and self management
- 9.the psychological impact of diabetes, at diagnosis and in the long term
- 10.how to gather information from patients about their health
- 11.how to work in partnership with patients and carers
- 12.the social, cultural and economic background of the patient/carer group
- 13.the impact of nutrition and physical exercise
- 14.the effects of smoking, alcohol and illicit drugs
- 15.the effects of, and how to manage, intercurrent illness
- 16.how to manage hypoglycaemia
- 17.the medications used to manage diabetes
- 18.the long term complications of diabetes and when they are likely to occur
- 19.how to examine feet and assess risk status
- 20.how to monitor cardiovascular risk
- 21.how to monitor for renal disease

- 22.how to monitor for diabetic retinopathy
- 23.the law and good practice guidelines on consent
- 24.the staff member's role in the healthcare team and the role of others
- 25.local guidelines on diabetes healthcare
- 26.local referral pathways
- 27.local systems for recording patient information
- 28.quality assurance systems
- 29.the process of notification for legal and insurance purposes
- 30.sources of practitioner and patient information on diabetes
- 31.contact details of local and national support groups
- 32.how individuals can access local facilities for exercise and physical activity, education and community activities
- 33.principles of cognitive behavioural therapy and how to apply them
- 34.principles of motivational interviewing

## PERFORMANCE CRITERIA

You must be able to do the following:

- 1.communicate with individuals in a manner that is appropriate to them and which encourages an open exchange of views and information
- 2.encourage individuals to
  - 1.identify practical changes in behaviour that could improve their health
  - 2.recognise the benefits of changing their behaviour and the alternatives available to them
  - 3.value themselves positively and recognise their ability to change
- 3.explore
  - 1.the motivation of the individual regarding changing their behaviour
  - 2.obstacles they may face in attempting to change their behaviour
  - 3.how the obstacles can be addressed constructively
  - 4.the support available to help them change behaviour
- 4.identify with individuals a range of strategies for changing their behaviour, which are consistent with
  - 1.their condition and personal circumstances
  - 2.the risks associated with their behaviour
  - 3.evidence of how to achieve behaviour change
- 5.where individuals agree to develop a plan to change their behaviour, help them to identify
  - 1.realistic short and long term goals for changing their behaviour
  - 2.a realistic plan for achieving the goals
  - 3.when and how the plan will be reviewed
- 6.provide information on facilities or support that will be of help to individuals in changing their behaviour
- 7.make an accurate record of the plan which can be followed by other members of the care team, the individual and carer
- 8.encourage individuals to value their attempts and achievements in changing their behaviour, and provide positive support and reinforcement when they have achieved

less than they expected

9.review with individuals

1.how they can maintain their new behaviour

2.how they can deal with any problems they are encountering

3.whether they are making effective use of the support available to them

4.whether the plan should be adjusted in the light of progress to date

10.agree arrangements for supporting individuals that are consistent with

1.the agreed plan for change

2.their need for support

3.the resources available for their support

11.encourage individuals to seek further support from you and from other people when they are in need of it

12.update the record of the plan and progress with it in a form which can be followed by other members of the care team, the individual and carer

## ADDITIONAL INFORMATION

This National Occupational Standard was developed by Skills for Health. This standard links with the following dimension within the NHS Knowledge and Skills Framework (October 2004): Dimension: HWB4 Enablement to address health and wellbeing needs