

## **Thames Valley Priorities Committee Commissioning Policy Statement**

**Policy No. TVPC73**

**Flash Glucose Monitoring System (Freestyle Libre®)**

**Recommendation made by  
the Priorities Committee:**

January 2018/Updated April 2019; November 2020<sup>1</sup>

**Date of issue:**

**January 2021**

Flash Glucose Monitoring System (FGS) is appropriate for certain people with diabetes alongside other technologies for people with differing diabetes management needs. A Consensus Guideline by NHS England has been developed setting out the appropriate clinical use of these technologies<sup>2</sup>.

### **Criteria**

Initiation of FGS should be by a specialist NHS diabetes service and will be on a 6 month trial basis initially followed by a review to assess its benefit and effectiveness.

FGS is for people with diabetes, (over the age of 4 years) attending a specialist clinic. It is recommended that patients must be well motivated to manage their condition. They need to have been assessed by the specialist clinician and deemed to meet one or more of the following criteria:

1. People with Type 1 diabetes

OR with any form of diabetes on haemodialysis and on insulin treatment

*who, in either of the above, are clinically indicated as requiring intensive monitoring >8 times daily, as demonstrated on a meter download/review over the past 3 months*

OR with diabetes associated with cystic fibrosis on insulin treatment

2. Pregnant women with Type 1 Diabetes - 12 months in total inclusive of post-delivery period.

3. People with Type 1 diabetes unable to routinely self-monitor blood glucose due to disability who require carers to support glucose monitoring and insulin management.

4. People with Type 1 diabetes for whom the specialist diabetes MDT determines have occupational (e.g. working in insufficiently hygienic conditions to safely facilitate finger-prick testing) or psychosocial circumstances that warrant a 6-month trial of Libre with appropriate adjunct support.

5. People with Type 1 diabetes or insulin treated Type 2 diabetes who are living with a learning disability and recorded on their GP Learning Disability register. FGS for insulin treated Type 2 diabetes may be offered in primary care with specialist input.

6. People diagnosed with Autism Spectrum Disorder without a learning disability but who have either Type 1 Diabetes or Type 2 Diabetes controlled with insulin may be considered for a FGS if they have a care plan stating this is a reasonable adjustment required to contribute to controlling their blood glucose level.

7. Previous self-funders of Flash Glucose Monitors with Type 1 diabetes where those with clinical responsibility for their diabetes care are satisfied that their clinical history suggests that they would have satisfied one or more of these criteria prior to them commencing use of Flash Glucose Monitoring had these criteria been in place prior to April 2019 AND has shown improvement in HbA1c since self-funding.

**General Continuation criteria for FGS (applicable to all patients)**

Contingent upon evidence of meeting the above conditions AND that on-going use of the Flash Glucose Monitoring is demonstrably improving an individual's diabetes self-

NOTES:

- Potentially exceptional circumstances may be considered by a patient's CCG where there is evidence of significant health status impairment (e.g. inability to perform activities of daily living) and there is evidence that the intervention sought would improve the individual's health status.
- This policy will be reviewed in the light of new evidence or new national guidance, e.g., from NICE.
- Thames Valley clinical policies can be viewed at <http://www.fundingrequests.ccsu.nhs.uk/>