

SIGN guideline on Prevention and remission of type 2 diabetes

Consultation report on: Plain language version

The consultation		
Open consultation took place from 28 May to 25 June 2024. Interested stakeholders were invited to complete a survey to provide feedback on the draft information. 10 people participated in the consultation process. All participants declared their interests.		
How do you usually access health information?		
Responses: Leaflets – 20% Websites – 60% Apps – 0% Other online services – 10% Other – 10%		
1. Please tell us about the way the booklet is written. Is the language and tone appropriate?		
Responses: Yes – 80% No – 20%		
	Feedback	Group Response
	The language is reasonably easy to understand, and technical terms are explained.	Thank you. We involved people with lived experience to make sure language was clear.
	Easy to read and understand	Thank you.
	Written well using everyday language. Any medical terms have been explained	Thank you.
	The language is clear and technical terms are explained.	Thank you
	Mostly fine but Page 2 - should have an "or " between bullet points	We avoid the 'or' between the bullets so screen readers can read successfully.

SIGN guideline on Prevention and remission of type 2 diabetes

Consultation report on: Plain language version

	<p>Page 4 - for clarity the first sentence could be revised to - Insulin is a hormone that helps glucose get into your cells. Type 2 diabetes happens when your body doesn't produce enough insulin to regulate your blood glucose levels or when your body doesn't respond to the insulin it does produce"</p> <p>Para 4 - Replace Cardiovascular disease, hypertension and obesity with "heart disease, high blood pressure and being overweight"</p> <p>Insert - your risk ALSO increases with age</p> <p>Para 5 - replace "lowest" with "low"</p> <p>Replace last sentence - "Even if you feel healthy, you may still be at risk if you are overweight"</p> <p>Page 6 - First recommendation box - Insert " if you have conditions that increase the risk of Type 2 diabetes SUCH AS HEART DISEASE OR HIGH BLOOD PRESSURE , its important to get assessed.</p> <p>Page 12 replace "technology-assisted" with "online"</p>	<p>Agree and changed</p> <p>Agree with using heart disease and high blood pressure but we need to keep obesity in as this is more than being overweight (BMI 30 or higher). This is the suggested term to use for people living with the condition.</p> <p>Agree, add also</p> <p>This paragraph has been removed</p> <p>This needs to stay. People would not have any symptoms and it is good to raise awareness of this.</p> <p>Removed</p> <p>Agree</p>	
	<p>Making it more human</p>	<p>Agree, we will go through this again</p>	

SIGN guideline on Prevention and remission of type 2 diabetes

Consultation report on: Plain language version

	Basic straight forward	Good you find this straightforward to read, thank you.	
	It's a fair mix of plain language and necessary technical terms	Agree, we explained all necessary medical terms.	
	It's written really clearly, and the definitions are provided. They stand out since in boxes.	Thanks for this feedback	
	Well written and clear document	Thanks for this feedback	
2. Please tell us what you think of the content. Does the content help people understand what the latest research and good practice supports around assessment, diagnosis, treatment, and management?			
Responses: Yes – 70% No – 30%			
	Feedback	Group Response	
	In general, the information is helpful in terms of the question above but I think the symptoms of type 2 should be included.	Agree and added to page 4	
	Each section is well explained in simple language	Thank you for your feedback	
	Clearly sets out which info has come from the research and what is based on clinical experience. I find this really useful as longtime you don't know what information is based on. I'm not sure I have consent though when I was getting assessed.	Thank you for your feedback. The evidence suggested that people need to give their consent for assessment.	
	It covers the areas above from when the patient comes in contact with the medical profession.	Thank you. We were keen to provide information about when and how care should happen.	
	Mostly OK but might raise some false expectations	We hope that when the clinical guideline is published, it will change practice. Agree	

SIGN guideline on Prevention and remission of type 2 diabetes

Consultation report on: Plain language version

	<p>Page 4 - para 2 - insert It is possible FOR SOME PEOPLE to prevent" - not everyone can prevent it.</p> <p>Page 5 - recommendation box - are blood test used in every health board?</p> <p>Page 6 - first recommendation box - should this also reference the signs of diabetes?</p> <p>fourth recommendation box - are home tests widely available?</p> <p>Page 7 second recommendation box - you need to explain the different measures here</p> <p>Box 5 - move up and expand</p> <p>Page 8 - first box - move up to below box 2 on page 7</p> <p>Page 9 - BP 1 change to - "what actions you can take THAT MAY</p>	<p>Guideline is suggesting that this is done to ensure consistency in health boards</p> <p>These have been added to page 4.</p> <p>They are available a local pharmacies. Added 'Home test kits are available at pharmacies and can be used alongside advice and support from your healthcare professional.'</p> <p>% removed. We do not feel we can be prescriptive as it will vary based on patient characteristics and risk among other considerations</p> <p>This still needs to go to DTP</p> <p>Agree</p> <p>Agree</p>	
--	--	--	--

SIGN guideline on Prevention and remission of type 2 diabetes

Consultation report on: Plain language version

	<p>PREVENT type 2 diabetes "</p> <p>BP 6 - should we be prescribing injections to people without diabetes whilst people who have it are not able to get because of shortages?</p> <p>Page 12 BP 5 - is this form of prevention programme widely available?</p> <p>BP7 - is self-monitoring widely available?</p> <p>Page 13 - Incretin based therapies are mentioned first but these are not commonly the first to be prescribed especially with the current shortages. I would suggest that Metformin should be listed first.</p> <p>Page 14 - para 2 - revise " may take metformin WITH THE AIM</p>	<p>BP6 - the guideline provides advice on best practice. While there are shortages it is up to health boards to prioritise who gets treatment.</p> <p>BP5 The prevention programme is widely available - it is part of the national obesity strategy and NHS boards are working towards implementing steps 2 and 3 of the strategy. This has now been included in the main guideline.</p> <p>BP7 - the self monitoring is checking your weight, recording progress with physical activity, rather than testing/monitoring for diabetes.</p> <p>Stick to current order as it will be a clinical decision and some patients may not qualify for one or the other</p> <p>Agree but may take a trial of metformin is more reflective of guideline wording. Added in 'trial'.</p> <p>Studies are based on standard release Metformin so need to keep current wording</p> <p>Outside the scope</p>	
--	---	--	--

SIGN guideline on Prevention and remission of type 2 diabetes

Consultation report on: Plain language version

	<p>OF PREVENTING type 2 diabetes</p> <p>Box 3 - perhaps mention slow-release metformin</p> <p>Should SGLT-2 Inhibitors (eg Empagaflozin) be mentioned and listed second to reflect prescribing practices?</p> <p>Page 16 - para 1 - should remission be 6 months? needs to say that not everyone can achieve remission. is remission appropriate in a prevention booklet?</p> <p>Page 20 - is it appropriate to signpost Challenging Weight Stigma as this resource is aimed at professionals rather than patients?</p>	<p>Reworded to reflect that people can work towards remission.</p> <p>Removed, thank you</p>	
	<p>Symptoms should be one of the first contents - including Diabetes UK Four Ts of - Tiredness, Toilet, Thirsty and Thinner - should be included</p>	<p>Symptoms of Type 2 been added to page 4. The 4 Ts are more for Type 1</p>	
	<p>clear and concise there is almost no info from GP surgery and everything is now self-referral much better to read at own leisure</p>	<p>We hope this is helpful for people</p>	
	<p>a)I had a feeling as I read the booklet that there is a little repetition. The less there is the better, as the booklet will be shorter.</p>	<p>Group do not want to cut anything out and feel one section nicely leads to the next one.</p>	

SIGN guideline on Prevention and remission of type 2 diabetes

Consultation report on: Plain language version

	<p>b) On page 7, the box 'Recommendation based on research evidence' please bullet point the two types for greater clarity.</p> <p>c) I am also worried that many more contacts will be given at the end. People can do searches much more easily these days, so that pages of website links are increasingly redundant (and daunting).</p> <p>d) Please ensure that driving is mentioned earlier in the book, as driving is not allowed in certain circumstances. Yet driving currently is only mentioned on page 21, in connection with DVLA.</p>	<p>We can bullet the two steps</p> <p>Evidence suggests that we should signpost to people to further sources of information.</p> <p>Driving is outside the scope as this is about prevention and remission. Group not aware of any reason this people will have restrictions but wish to keep in the link to the DVLA.</p>	
	<p>It's useful to have it set out in the boxes showing the evidence and what's based on clinical opinion and experience. Useful to have risk factors outlined at beginning. Really useful to have the Know your risk tool and call to action here. Assessment process set out well.</p> <p>I don't really remember being asked for consent for follow up care. Should I have signed something or is it just verbal?</p> <p>Useful to have information on the 2 tests to detect prediabetes. Maybe need to define what prediabetes is? Most will know as commonly talked about but some might not and if you include</p>	<p>Pleased to hear that you find this useful</p> <p>Sentence on consent removed to improve clarity.</p> <p>Prediabetes has been defined at the beginning on page 2</p>	

SIGN guideline on Prevention and remission of type 2 diabetes

Consultation report on: Plain language version

	<p>this you're helping those folk understand.</p> <p>Information box on page 9 is helpful and good you have stated that might be in person or phone etc as half the time you're not sure if it's appointment you need to have time for if in person or if it's I'll be quick via phone or video.</p> <p>Page 11 - really useful to talk about prediabetes as this is what it is and you want people to know it's a diagnosis. I know so many people have been diagnosed with this and they don't change.</p> <p>Really excellent and informative document</p>	<p>We didn't want to raise expectations that people would be seen in person.</p> <p>Important that people are aware of the seriousness of prediabetes.</p> <p>Thank you for your feedback</p>	
	<p>Does a good job at sharing the evidence. Makes it very clear for people. How will this be shared with professionals and the public? Will GPs refer people to this?</p>	<p>Thank you for your feedback. We will share as widely as possible with various stakeholders.</p>	
<p>3. Please share any ideas for graphics for inclusion in our booklet. What type of image for the front cover would be meaningful?</p>			
	<p>Feedback</p>	<p>Group Response</p>	
	<p>The large block of green makes it more difficult to print out at home from the pdf.</p>	<p>This is a template for drafts. This will go to DTP and will not have the green block</p>	
	<p>Maybe something arty?</p>	<p>Group to consider</p>	
	<p>More infographics and disability accessible photos</p>	<p>Group to consider</p>	
	<p>I did not feel the loss of graphics on reading the booklet. Blobs for cells on the front?</p>	<p>Group to consider</p>	
	<p>Not sure. Sorry not helpful! Maybe not anything too clinical.</p>	<p>Group to consider</p>	
	<p>Do you plan to have graphics in the information? None at the</p>	<p>Aiming for accessible content design which advises against graphics within</p>	

SIGN guideline on Prevention and remission of type 2 diabetes

Consultation report on: Plain language version

	moment. Maybe something not too depressing on the cover	the text.	
--	---	-----------	--

4. Please share any other comments on the booklet			
	Feedback	Group Response	
	Really good information for people at risk. I hope it is disseminated widely as will be helpful for people	We will disseminate to various stakeholders.	
	A weakness of the booklet is that it does not list the symptoms of type 2 diabetes. Without these the person will not know to seek a diagnosis. This could lead to delayed diagnoses and worse outcomes.	Added symptoms	
	Linking it Diabetes UK case studies for related sections of the guidelines for example https://www.diabetes.org.uk/your-stories/syeds-story-tragedy-into-change	An additional quote on life after bariatric surgery added	
	Well written and clear document	Thank you and pleased you find it helpful	
	Good resource for people	Pleased that you think this will be a good resource.	