

Frequently Asked Questions (FAQs)

Hybrid Closed Loop System Access for People Living with Type 1 Diabetes in West Yorkshire

The questions and responses in this document are aimed at people living with type 1 diabetes, their family/carers and members of the public with an interest in diabetes medical technology.

These frequently asked questions (FAQs) are those which have been raised about West Yorkshire's hybrid closed loop (HCL) systems delivery plan. Our delivery plan is in line with the [NHS England 5-year HCL implementation strategy](#) which recommends a five year delivery plan aimed at increasing access to HCL technology for those eligible within our communities using a staggered approach. Implementation of HCL began on the 1st of April 2024.

Children and young adults and people who are pregnant/trying to conceive with type 1 diabetes are the priority populations to access HCL systems in years one and two.

What is a hybrid closed loop system?

Hybrid closed loop systems, sometimes called an 'artificial pancreas', enable an insulin pump and a continuous glucose monitor to work together to help manage blood sugar levels.

The continuous glucose monitor automatically senses sugar levels in the fluid between the blood vessels and cells, without the need for finger-prick testing. A computer programme on a phone or inside an insulin pump uses this data to work out how much insulin the body needs to help keep blood sugar levels stable. The pump then automatically gives the right amount of insulin.

While this removes a lot of the input needed from the person using the system, the individual still needs to tell the system about exercise and input details of the carbohydrates they eat.

What are the benefits of hybrid closed loop?

People using hybrid closed loop systems have reported having less hypoglycaemic episodes, more confidence in keeping active and less worry about their blood sugar levels during the

day or at night. Studies show it reduces the burden of managing diabetes on individuals and their carers.

The [National Institute for Care and Excellence](#) (NICE) also gathered evidence to show that hybrid closed loop systems are more effective than standard care at maintaining blood glucose levels within a healthy range.

Who can get hybrid closed loop?

NICE has recommended that the NHS in England makes hybrid closed loop systems available to the following groups of people:

Adults living with type 1 diabetes who have an HbA1c of 58 mmol/mol (7.5%) or more, or have disabling hypoglycaemia, despite best possible management with at least one of the following:

- continuous subcutaneous insulin infusion (CSII) (also known as an insulin pump)
- real-time continuous glucose monitor
- intermittently scanned continuous glucose monitor.

Children and young people living with type 1 diabetes (under 19 years old).

Women, trans men and non-binary people living with type 1 diabetes who are pregnant or planning to become pregnant.

For adults the recommendations include certain eligibility criteria. 'Disabling hypoglycaemia' is when instances of low blood sugar (hypos) occur frequently or without warning, making the person constantly anxious about having a hypo. The term 'despite best possible management' means that a person's clinic has worked with them to get the best possible results using an insulin pump and/or continuous glucose monitor on its own, before prescribing a hybrid closed loop system.

Why will it take up to 5 years for everybody who is eligible to be offered hybrid closed loop?

The national roll-out of hybrid closed loop systems began in April 2024. The staggered approach across five years reflects the funding available to NHS England to support access to HCL for individuals living with type 1 diabetes who are eligible; prioritising those with the greatest clinical need.

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Additionally, to ensure patients are safe and supported to use HCL effectively, NHS trusts should only provide hybrid closed loop if they have access to specialist trained clinical staff experienced in providing insulin pumps and continuous glucose monitors for type 1 diabetes. NHS England is aware that the level of specialist clinical support varies between trusts and that it will take time to build staff capacity and improve clinical skills within adult diabetes services across the country. Our strategy sets out a phased implementation over 5-years to allow time for this to happen.

When can I get hybrid closed loop?

It may take up to five years for everybody who is eligible to be offered hybrid closed loop. This is because NHS trusts providing care for adults with diabetes need time to build staff capacity and improve the availability of specialist clinical teams, before they are ready to support the roll out of this technology.

Paediatric services caring for children and young people are better placed in terms of access to specialist staff, so will be able to offer hybrid closed loop to a greater number of eligible people over the initial years of the phased roll out.

When individuals living with type 1 diabetes attend appointments for their diabetes care, local diabetes teams will discuss the options available and will make a decision on whether to offer hybrid closed loop based on the team's capacity and the individual's clinical need.

Who will get priority access to HCL systems in West Yorkshire?

NICE and NHS England have defined who is eligible for HCL and have developed a five year implementation plan which describes how access to HCL is staggered across the five years for those eligible people starting on the 1 April 2024. In West Yorkshire, in year one and two, priority HCL access is to be given to:

- children and young people (under 19)
- people who are receiving maternity diabetes services.
- all adults (over 19) with debilitating recurrent hypoglycaemia (defined as requiring third party assistance/intervention on two or more occasions).

In years three to five, there will be further phased introduction of HCL systems for the adult population living with type 1 diabetes in West Yorkshire.

I'm pregnant or planning a pregnancy, why am I being offered hybrid closed loop?

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Women who are pregnant with type 1 diabetes are at increased risk of having a poor pregnancy outcome. Supporting women who are pregnant to spend as much time as possible in the pregnancy blood sugar target range reduces these risks a lot and increases the chances of them having a healthy baby. The earlier in pregnancy that the blood sugar levels get into the target range the better this is.

The best way to support pregnant women to spend the most amount of time in the pregnancy blood sugar target range is to start them on a pregnancy specific hybrid closed loop system either before pregnancy or as soon as they are pregnant.

There are several different hybrid closed loop systems available, however not all are licenced and suitable for pregnancy. If you are using a system that is not suitable for pregnancy, we recommend that you discuss options to switch to a compatible system with your local clinical team.

Who decided to delay HCL starts for adults in West Yorkshire?

This decision has not been taken by the clinician responsible for your care, rather, it is a decision of NHS West Yorkshire Integrated Care Board in response to the NHS England HCL implementation strategy and the funding which is being made available to West Yorkshire. Our delivery plan will ensure we use our allocated funding appropriately.

WYICB apologise for this delay and acknowledge how disappointing this decision will be for you and those involved in your care, including your specialist diabetes care team.

What should I do if I am not happy about my access to HCL being delayed?

In West Yorkshire our goal is to ensure equitable and optimal outcomes for people living with diabetes while managing NHS spend. Staggering HCL starts for specific populations living with type 1 diabetes supports this goal and allows time for diabetes specialist clinicians to upskill and become competent in initiating and supporting more people to use this relatively new HCL technology.

If you would like to discuss this decision to delay your HCL start, you are advised to discuss how you feel with your clinical team in the first instance. If you would like to raise a concern or complaint about the impact this decision has for you, please contact West Yorkshire Patient Advice and Liaison at wycib.pals@nhs.net.

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Is there a West Yorkshire HCL Pathway?

Three different HCL pathways are in development – one for children and young adults, one for people who are pregnant / trying to conceive and a pathway for adults. When approved all three pathways will be shared on the West Yorkshire Health and Care Partnership website here [Medicines information :: West Yorkshire Health & Care Partnership](#). It is anticipated the pathways will be approved before the end of February 2025.

What if I don't want hybrid closed loop?

Accessing hybrid closed loop or any other diabetes technology is an individual person's decision. Healthcare professionals will discuss with people on an individual basis if they are eligible and whether it is suitable for them. Health care professionals will support them in making the best possible decision.

Can I still have a continuous glucose monitor?

Yes. People with type 1 diabetes should discuss with their health care professional the range of options available to them and aim to initiate CGM which is HCL compatible to allow for people to upgrade to HCL if and when ready. Their healthcare professional will support them in making an appropriate decision for their care.

What is being done to train diabetes clinical teams on HCL systems?

A West Yorkshire training and competency framework has been developed which signposts to existing education resources on hybrid closed loops and other diabetes technology developed by approved national sources, including those by the technology manufacturers. The training resources reflect different health and care professionals roles and responsibilities when caring for people living with diabetes eligible for and using diabetes technology.

Across West Yorkshire we have teams who are already fully training to initiate HCL systems and to support people to use these to manage their diabetes. Clinicians from other clinical teams are invited to join these teams to observe and learn from those more experienced in starting HCL systems.

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A West Yorkshire HCL training event for all professionals with a role in supporting people to use HCL is in planning and it is anticipated this event will take place in the early 2025.

How will we know HCL is being implemented as per the NHS England guidance?

Oversight of HCL access in West Yorkshire will be undertaken by the West Yorkshire ICB and this will include monitoring access to HCL across all five of our Places.

NHS England are evaluating the impact of increased access to HCL using data entered quarterly by all diabetes specialist teams onto the national diabetes audit portal. This evaluation data will unlikely be available until later in the five-year implementation period. Information on the impact of HCL on diabetes health and care outcomes in West Yorkshire will be shared as it becomes available. Much research exists which highlights the benefits of reduced diabetes complications – go to [National Institute for Care and Excellence](#) for more details.

Where can I get more information?

People living with type 1 diabetes can talk to their diabetes care team if they have clinical questions. There is also useful information on the [Diabetes UK website](#) about hybrid closed loop systems and a helpful video on the [Breakthrough T1D UK website](#).

This [NHS decision support tool](#) helps people understand the diabetes technologies available in the NHS and which they are eligible for. It can be used to support discussions between someone living with type 1 diabetes and their healthcare professional.

Further information on managing type 1 diabetes is also available on the [nhs.uk website](#).

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