



# Implementation Guidance Pack and Frequently Asked Questions

**Healthy Living**  
for people with type 2 diabetes

## **Introduction:**

The NHS Long Term Plan outlined NHS England's (NHSE) commitment to expand self-management services through commissioning [Healthy Living for people with type 2 diabetes](#).

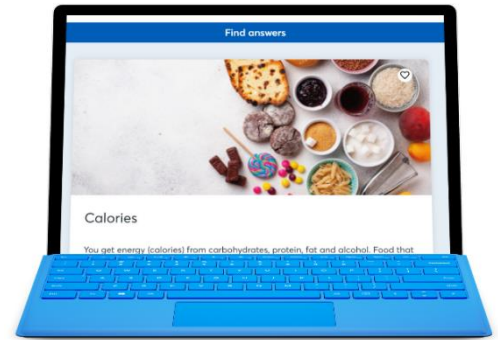
Healthy Living is a web-based structured education programme that provides people (over the age of 18) with the skills and knowledge they need to self-manage their type 2 diabetes effectively. The programme is user-led and offers an alternative means of accessing support to the more traditional, group-based structured education programmes.

The programme is funded by NHS England (NHSE) and is free to healthcare systems and to the participant.

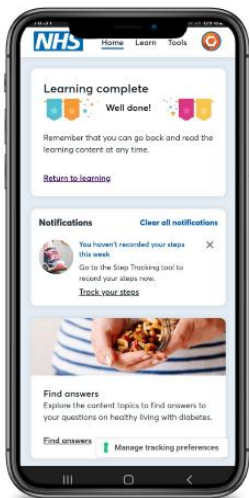
## **Purpose:**

This document provides local commissioners and implementation teams with the information and resources required to roll out the Healthy Living programme effectively.

“ The changes I've seen in my health since starting Healthy Living have been massive. I have lost two stones! ”



“ I like the Healthy Living programme because it's easy to follow and offers good advice. To others who are thinking about joining, I'd say you have nothing to lose except weight and bad habits! ”



“ I monitor my blood pressure at home and was not aware of when I should contact my GP. The figures given in this article have given me the information I needed. ”

“ Found it very informative and so helpful in understanding diabetes. With this new knowledge I feel able to make more informed decisions in managing my condition. ”

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## 1. About the Programme

### 1.1 What is Healthy Living?

The [NHS Long Term Plan](#) outlined NHS England's (NHSE) commitment to expand self-management services through commissioning [Healthy Living for people with type 2 diabetes](#).

Healthy Living is a web-based structured education programme that provides participants with the skills and knowledge they need to manage their type 2 diabetes effectively. The programme is a great way for people to find out more about:

- type 2 diabetes
- healthy eating
- getting enough exercise
- living, working, and socialising with diabetes
- looking after feet and eyes
- reducing diabetes related distress, and more

Healthy Living is self-directed, so participants can complete the programme at a pace that suits them and a time that fits their schedule.

Healthy Living can help participants:

- feel confident in managing type 2 diabetes
- reduce diabetes-related stress and improve health and wellbeing
- achieve and maintain a healthy weight
- be motivated to make healthy choices and live a healthy life
- feel confident to make decisions about healthcare and treatment options

### 1.2 What is the evidence base?

The programme was originally developed by University College London (UCL) and was known as HeLP Diabetes. RCT outcomes demonstrated improved glycaemic control over 12 months, a reduction in diabetes related distress in those recently diagnosed, and lower incremental costs (ROI estimated at £111) compared to the control group. The BMJ (British Medical Journal) open access paper can be found [here](#).

The UCL team also designed an implementation study proving the feasibility of rolling HeLP out at scale. You can read this [here](#). The UCL trial was publicly funded and the project team wanted to ensure that the benefits of this research flowed back to the public via the NHS.

### **1.3 Is it accredited?**

The programme is QISMET (Quality Institute for Self-Management Education and Training) accredited and has received NHS DTAC (Digital Technology Assessment Criteria) accreditation.

### **1.4 What are the commissioning arrangements?**

Healthy Living has been commissioned across the whole of England by NHSE. The commissioning period runs to 31 March 2024 initially.

The programme is provided to local health economies free of charge.

## **2. Programme features**

### **2.1 Is it available in other languages?**

The Healthy Living programme is delivered in English.

Participants can translate the Healthy Living programme text using an online tool such as google translate. This way of translating content is in line with other NHS web based services such as nhs.uk.

However, while online translator tools can accurately interpret individual words or phrases, they may not always be able to interpret the meaning of larger or more complex pieces of information. Localities should continue to commission structured education services based on local population need, including those required in other languages.

### **2.2 Does Healthy Living provide content adapted to different cultures?**

Healthy Living provides tailored information on healthy eating adapted for service users from Black African, Black Caribbean, and South Asian ethnic backgrounds.

The information has been adapted from resources produced by Carbs & Cals, Diabetes UK and The Eatwell Guide, and reviewed by colleagues from BAME Networks across the NHS.

### **2.3 Is this service suitable for people with accessibility needs?**

The programme has been developed to follow Web Content Accessibility Guidelines (WCAG 2.1). This ensures digital services are accessible to a diverse range of needs, including participants with impairments to their vision, hearing, mobility or thinking and understanding (for example dyslexia, autism).

### **2.4 Is this service suitable for people with lower digital literacy?**

As part of the programme development, Healthy Living conducted research with participants who represent the potential audience for the service, including those who have lower digital literacy levels, to ensure the programme is inclusive to a wide range of needs.

## **2.5 Is it suitable for people who have barriers to accessing digital services?**

While digital options offer benefits for many groups of people, there are others who may struggle to access online services for a variety of reasons. For example, Gypsies and Travellers who are less likely to have access to or use the internet than the general population, or the homeless who may not have access to digital devices.

To ensure the programme does not create further barriers to accessing services, the following mitigations are in place:

- Healthy Living is accessed on a web browser so participants can use the programme on public computers.
- The programme is available via self-referral, so users do not need to see a GP to access the service.
- The programme is advertised through direct-to-consumer methods to try and reach those who do not engage with healthcare services using traditional methods.
- Local health systems commission face to face structured education programmes to ensure there is provision in place to meet a wide range of needs. As the Healthy Living programme is only one of many options, where a digital programme is not a suitable, services users can be offered an alternative.

## **2.6 Is it suitable for people with learning disabilities?**

See section 2.3 for programme adjustments based on accessibility needs. Additionally, the programme content is written in plain English and delivered in bitesize articles, alongside videos and other interactive elements.

However, individual needs as a result of living with a learning disability can vary from person to person, so we encourage the referrer to consider what's appropriate for the individual. Carers can sign up to the service alongside the individual to support learning, or if more appropriate, in place of.



### 3. Referring into the programme

#### 3.1 Who is eligible for the programme?

Quick Reference Eligibility Guide		
<b>Participants must be:</b> <ul style="list-style-type: none"><li>• Aged 18+</li><li>• Diagnosed with type 2 OR;</li><li>• A carer or relative of a person living with type 2 diabetes</li></ul>	<b>Participants must NOT:</b> <ul style="list-style-type: none"><li>• Living with type 1 diabetes</li><li>• Have non-diabetic hyperglycaemia (NDH)</li><li>• Be less than 18 years old</li><li>• Be on the End of Life (EOL) pathway</li></ul>	<b>Participants must have:</b> <ul style="list-style-type: none"><li>• An email address and;</li><li>• Regular access to a smartphone, tablet, laptop or desktop computer</li></ul>

The local referrer should make a final decision before undertaking referral activity to determine clinical suitability.

#### 3.2 What are the referral routes?

##### Self-referral

Participants can self-refer to the Healthy Living programme by creating an account online at this webpage <https://www.healthyliving.nhs.uk/>. An NHS number is not required, but the participant will need to provide their name, date of birth, email address and a few other details.

##### GP referral

Referrers can signpost users to the self-referral route. A direct referral pathway into the service from GP systems is currently under development. Once available, NHSE will communicate to Primary Care via Diabetes Regional and Clinical Networks. There are several resources available to promote the self-referral pathway, see 'Resources and further information' in this document.

#### 3.3 What approaches should ICBs use to reach eligible participants?

Healthy Living's self-referral pathway creates an opportunity for a whole-system approach to referring into the programme. ICBs should take action to ensure structured education programmes can be easily accessed in line with NICE guidelines (this is: soon after diagnosis **and** at annual reviews). There are several approaches referrers can take to identify eligible users including:

- **On diagnosis and throughout diabetes care pathway:** ICBs should embed Healthy Living into the structured education care pathway. Referrers can offer the programme at diagnosis, at annual reviews or other healthcare appointments as appropriate.

- **Bulk referrals:** GP practices can search Practice registers for eligible people and contact them to offer the programme via text message or letter.
- **Outside of GP settings:** Community care providers, secondary care staff, social prescribers, 3<sup>rd</sup> sector stakeholders and faith and community groups can sign post eligible users to the self-referral registration page.
- **Direct-to-consumer routes:** Local stakeholders can add the Healthy Living web address to GP practice, CCG and local council webpages and social media accounts, encouraging eligible users to sign up to the programme.

See 'Resources and further information' in this document for patient leaflets, website and social media resources, letter templates and more, to support with whole-system referral activity.

### 3.4 What if we have other, similar programmes on offer?

Healthy Living has been commissioned to reduce the variation across England in access to, and choice of, quality structured education programmes. Offering a digital programme on a national footprint aims to promote choice and fill gaps in service provision to improve uptake to structured education.

Local health economies should support provision of choice and continue to commission structured education services based on local population need. Implementation of Healthy Living can address gaps in current service provision and/or offer choice for patients who do not want to take up the current service offer. The programme is provided at no cost to ICBs, with no referral caps and minimal eligibility requirements.

#### **Structured education (SE) vs. weight management (WM)**

Referral to structured education is requirement as per NICE guidance. People with type 2 diabetes can be referred to both Healthy Living and a WM service, either at diagnosis/annual review or after attending a WM programme.

Form the patient perspective, there are key differences between the two programmes. SE can help improve skills to self-manage diabetes effectively, WM programmes do not have this focus. While SE will cover WM principles, this is not the sole focus and provides information on topics such as medication, footcare, mental health and more. WM services generally have a single objective to help people lose weight, and not cover other elements related to diabetes care.

## **4. Using the programme**

### **4.1 How does the programme work?**

Healthy Living is 100% remote, self-led learning. Participants will start with the key essentials of type 2 diabetes and 'unlock' more content as they progress through each article. This is so learning is sequential and participants build knowledge as they go.

Participants can still read about specific topics as soon as they log in, using 'Find answers' in the 'Tools' section.

There is no time limit for participants to complete the programme and learning should be ongoing. We recommend bitesized sessions on a regular basis, with space between each session so participants can take time to put their learning into practice and form new habits.

### **4.2 Is there an app to download?**

No, the programme is web-based so participants can access the programme through their web browser and on multiple devices. Healthy Living can be used on desktops, tablets, and smartphones, allowing access to the service across different devices.

### **4.3 How long does it take to finish the programme?**

Everyone learns and reads at different speeds, so the completion time will vary across each individual. Participants can work through the 24 topics over a day or two if that suits them, but we encourage completion of the programme over a longer period of time, so learning can be implemented as behaviour change.

### **4.4 I'm a healthcare provider, can I sign up?**

The primary audience is people living with type 2 diabetes but we recognise that healthcare providers and commissioners may wish to access the programme to better understand the service offer.

You can sign up using the self-referral route. Select "I am a healthcare professional / I work in the diabetes field" on the registration form:

<https://www.healthyliving.nhs.uk/>.

## 5. Coding and reporting

### 5.1 What codes should I use for activity into the programme?

Process	Code Reference	Code
Referred*	Referral to diabetes structured education programme (procedure)	415270003
Declined*	Diabetes structured education programme declined (situation)	306591000000103
Attended	Attended diabetes structured education program (finding)	413597006
Completed	Diabetes structured education programme completed (situation)	755491000000100
Did not attend	Did not attend diabetes structured education programme (finding)	306861000000107

\*Primary Care to code patient records upon referral

Where a service user consents to their information being shared, the Healthy Living programme will report back to GPs on the status of participants attendance to enable patient records to be updated.

### 5.2 Will referrals count towards QOF?

Referral activity into the Healthy Living programme, within General Practice, which occurs in line with the indicator below counts towards [The Quality and Outcomes Framework](#) (QOF):

*NM27: NICE Quality and Outcomes Framework indicator: The percentage of patients newly diagnosed with diabetes, on the register, in the preceding 1 April to 31 March who have a record of being referred to a structured education programme within 9 months after entry on to the diabetes register.*

Actions taken by the GP to provide the self-referral webpage (using text, letter, leaflet, etc.) can be coded as “referred”. General Practices will need to code patient records upon referral with the correct codes to receive QOF payments.

### 5.3 Will NHSE report on programme sign ups?

#### Reporting to Primary Care (patient level data)

Healthy Living programme will report to GPs on the status of patient attendance in line with SNOMED codes. This is:

- **Did not attend:** completed the registration form but did not verify their account and access the programme.
- **Attended:** completed the registration form, verified their account and had at least one active engagement (for example accessed structured education content or used one of the programme tools).
- **Completed:** completed 60% or more of the structured education content. This threshold is modelled on dose vs. outcomes for other diabetes lifestyle services.

#### Reporting to ICBs (population level data)

ICB level data packs will be made available later this year on FutureNHS, providing data at ICB to PCN level on uptake and demographic data.

### 5.4 Do localities need to report to NHSE?

Currently there are no requirements for localities to report into NHSE, activity will be monitored using the National Diabetes Audit (NDA) and the Healthy Living data set. Any assurance processes that are implemented between National/Regional/Local will aim to link in with processes already in place.

However, ICBs should embed Healthy Living into local assurance processes making best use of Healthy Living data packs to be provided by NHSE to ensure maximum utilisation of the service.

## 6. Additional information for Primary Care and other referrers

### 6.1 How referrers can support structured education pathways

Early attendance to structured education after diagnosis is effective in demonstrating improvements in glycaemic control, reducing diabetes related distress, and achieving a healthy weight. Additionally, there is a large cohort of people with established type 2 diabetes who are not meeting treatment targets (HbA1c, cholesterol and blood pressure) and would benefit from a refresher or re-referral to structured education.

While face to face structured education programmes are available across the whole of England, there are inequities in access to quality digital structured education. Having a variety of options allows people to choose services which may better match their circumstances.

Referrers at Primary Care level should:

- ensure diabetes structured education programmes can be easily accessed in line with NICE guidelines (soon after diagnosis **and** at annual reviews)
- take action to embed the Healthy Living programme within an agreed local diabetes education pathway
- implement methods to routinely identify people who have missed education in the past and offer suitable structured education

### 6.2 The referral process

Actions for the referrer to take:

1. Identify a person to be referred to the programme and ensure they meet the eligibility criteria above.
2. Signpost the individual to the self-referral registration page:  
<https://www.healthyliving.nhs.uk/>.
3. Record the referral activity in the patient record using the appropriate SNOMED code outlined in section 6.

Actions for the participant to take:

4. Participants will need to create an account by completing the registration page. Participants do not need their NHS number to register, but will need their name, date of birth, postcode, and an email address.

5. The Healthy Living programme will send an email to their chosen address for verification and provide instructions to access the programme.

### 6.3 Key messages

The key messages focus on the importance of managing type 2 diabetes, as well as raising awareness of the Healthy Living programme. These messages can be used independently from each other and will support you in communicating about the service. You can find more key messages in the comms toolkit, see 8.2 in this document for more info.

Key messages to participants:

- If you've been diagnosed with type 2 diabetes, managing your condition is important.
- Healthy Living is a free online service to help you manage your type 2 diabetes.
- Adopting a healthy lifestyle and staying in control of your type 2 diabetes can help you avoid complications such as vision loss, kidney failure, amputation, heart disease and strokes.
- By leading a healthy lifestyle and keeping your blood sugar levels under control you can reduce the risk of the complications of diabetes.
- On the programme you'll find information about type 2 diabetes, advice on mental wellbeing, and support to help you adopt and maintain healthy lifestyle choices such as improving your diet and getting more physically active.
- Healthy Living can help by providing knowledge and information so you can:
  - feel confident in managing your type 2 diabetes
  - reduce diabetes related distress
  - improve your health and wellbeing
  - achieve and maintain a healthy weight
  - feel motivated to continue making healthy lifestyle choices
- Healthy Living is an online service clinically proven to help you control your type 2 diabetes. You can get information and advice at home, work or on the move, putting you in control of your health.
- If you are over 18 years old and have been diagnosed with type 2 diabetes at any point, you can sign up for the Healthy Living service.
- If you care for or are a family member of someone living with type 2 diabetes, you can sign up too.

## 7. Additional information for commissioners

### 7.1 How commissioners can support structured education pathways

Improving the uptake to structured education and management of diabetes within the population requires a whole-system approach. Those newly diagnosed can be easily identified for referral, but there is a large proportion of people with established type 2 diabetes who are not meeting treatment targets. Regardless of length of diagnosis or previous attendance to a course, a person should be offered structured education if assessment suggests it is needed. Healthy Living is suitable for people who are both newly diagnosed, and who have established diabetes.

Healthy Living has been commissioned to increase patient choice and reduce the variation in access to accredited self-management programmes across England. ICB Commissioners should:

- Support referrers to offer diabetes structured education in line with NICE guidelines (this is: soon after diagnosis **and** at annual reviews).
- Take action to embed the Healthy Living programme within an agreed local diabetes education pathway
- Have a clearly defined action plan around communication, engagement and involvement of all key stakeholders that have responsibility or ability to signpost into Healthy Living.
- Implement reporting methods and monitor data to ensure the above actions are achieved.

The self-referral pathway opens up opportunities for signposting from all parts of the system. Commissioners should engage stakeholders to increase the awareness of the programme across each system area as appropriate:

Local stakeholders to be engaged with the programme			
GP Practice	Primary Care Network	Community	Secondary Care
<ul style="list-style-type: none"> <li>▪ General Practitioner</li> <li>▪ Practice nurses</li> <li>▪ HCAs</li> <li>▪ Diabetes specialist nurse</li> </ul>	<ul style="list-style-type: none"> <li>▪ Clinical pharmacists</li> <li>▪ Social prescribers</li> <li>▪ Care co-ordinators</li> </ul>	<ul style="list-style-type: none"> <li>▪ Community nurses</li> <li>▪ Dieticians</li> <li>▪ Podiatrists</li> <li>▪ Health and wellbeing coaches</li> <li>▪ Local council</li> <li>▪ 3<sup>rd</sup> sector care providers</li> </ul>	<ul style="list-style-type: none"> <li>▪ Diabetic inpatient service</li> <li>▪ Diabetic mental health service</li> <li>▪ Diabetes specialist nurse</li> </ul>



## 7.2 Incentivising referrals

Referral activity into the Healthy Living programme within general practice which occurs in line with the indicator outlined in section 5 counts towards QOF.

To avoid double payment, implementation funding should not be used to pay GP Practices for referral activity that fall within this incentive payment.

## 7.3 Information governance and data protection

When GP practices signpost users to the service, there is no requirement for the Practice to share data with the Provider. Personal data provided to the programme is done so by the data subject (i.e., the service user) as part of the registration process, and consents to their data being processed by the service provider.

At registration, the service user is required to read and agree to the Privacy Policy, Terms & Conditions and Fair Processing Notice (all can be found on the [self-referral webpage](#)).

NHSE are the data controllers for the Healthy Living programme. The service provider (Changing Health) has been selected to provide the digital platform for the Healthy Living programme. Changing Health:

- are ISO:27001 accredited
- have completed a Data Security and Protection Toolkit (DPST)
- have DTAC approval Have worked closely with NHSE to ensure that privacy by design is central to the build and that all parties are assured the Healthy Living programme remains GDPR compliant

The data controller (NHSE), as the organisation who commission the service, have undertaken the correct due diligence to reassure service users that their data will be handled correctly. As such, NHSE determine there is no requirement to undertake a local DPIA at ICB level. See **appendix 1** for the data sharing flow throughout the user journey.

## 7.4 Referral targets

As ICBs also commission structured education programmes locally, referral targets into the Healthy Living programme are not mandated and sites should continue working to improve uptake to structured education more generally. So

NHSE can support appropriately, uptake data will be monitored using NDA data.

## **8. Resources and further information**

### **8.1 Is there implementation funding available?**

Funding has been allocated to ICB footprints for the implementation and delivery of diabetes care for 2022/23. Local plans for using this funding should consider best use of the nationally commissioned digital structured education programmes, including Healthy Living for people with type 2 diabetes.

### **8.2 Where can I access resources to promote the programme?**

A list of promotional resources available are included on the next page and all are available to download from the FutureNHS Collaboration Platform.

To access the platform, create an account from the [homepage](#) and once logged in click the following URL: [National Diabetes Programme's Digital Workspace](#)

### **8.3 Who can I contact if I need further information?**

For further information or support, contact the Digital Team in the National Diabetes Programme at [england.digitaldiabetes@nhs.net](mailto:england.digitaldiabetes@nhs.net)

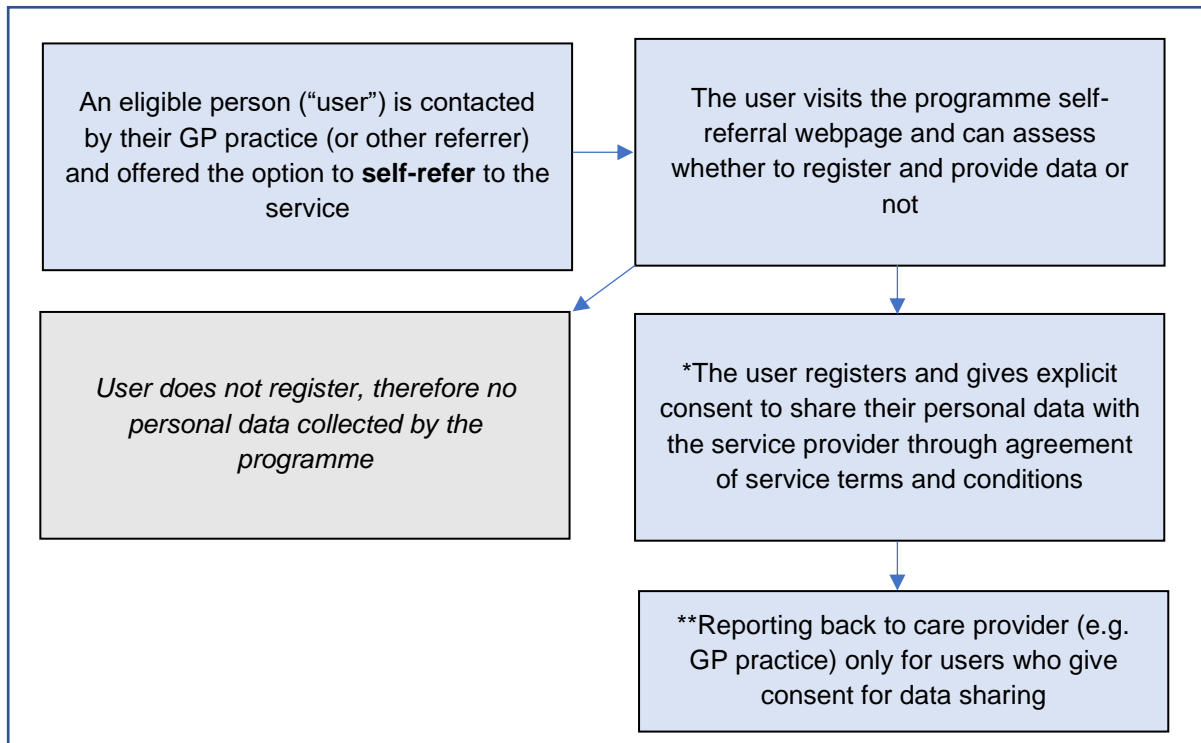
## Healthy Living for people with type 2 diabetes: Quick reference guide to promotional materials

All resources are available to download from the FutureNHS Collaboration Platform (see **section 8.2** in this document on how to access the platform).

	Resource	Primary Audience			Description
		Participant	Healthcare Professional	Commissioner	
1	Programme summary	✓	✓	✓	A half-pager summarising the programme and how to access it. Suitable for use on websites, bulletins, newsletters and more.
2	Patient leaflets (pdf)	✓			A print-ready foldable A5 patient facing leaflet that includes FAQs and how to join the programme.
3	A3 posters (pdf)	✓			A3 posters in a variety of designs to be placed in spaces where people with type 2 diabetes will see it (e.g., waiting rooms).
4	Webpage banners	✓			A rectangular image promoting the service designed for use on webpages. Add this to GP, CCG, and other patient facing webpages.
5	Social media imagery	✓			Promotional imagery suitable for use across social media platforms. Post alongside the social media copy below.
6	Social media copy	✓			Promotional wording with a call to action for people living with type 2 to register, suitable for use across all social media platforms.
7	Letter and text templates	✓			Template wording for use when inviting eligible participants to self-refer into the programme.
8	Waiting room/desktop screensaver	✓	✓		A promotional image to display on waiting room screens and staff desktop computers.
9	Implementation guidance and programme FAQs		✓	✓	<i>This document.</i> A guidance pack to provide commissioners and referrers with the information needed to roll the programme out effectively.
10	PowerPoint presentation		✓	✓	A presentation for local commissioners to use when introducing other stakeholders and HCPs to the programme
11	Comms Toolkit			✓	The toolkit is designed to help referrers communicate about the service, and enable commissioners produce local level resources.
12	Implementation plan template			✓	A template to support planning of communication and engagement activity to effectively rollout the service.

## Appendix 1

Data sharing flow throughout the **self-referral** user journey.



\*Personal data is provided to the programme by the data subject as part of the registration process. The user consents to sharing this information with Changing Health (service provider) and NHS England (data controller) when agreeing to the privacy notice, this is part of the registration process.

\*\* The service provider, Changing Health, reports activity back to the user's GP Practice (NHS Number and SNOMED code). Explicit consent is obtained by the data subject to do so, as part of the onboarding process.