The Qualification Hub

Qualification Specification

TQH Level 2 Certificate in Wellness-Based Support for Long Term Conditions in Diabetes



The Qualification Hub (TQH)

The Qualification Hub (TQH) is an Awarding Organisation based in Northern Ireland that is regulated by CCEA Regulation. TQH is responsible for creating and granting professional and technical (vocational) qualifications at Levels 2 and 3 within the 08.1 Sport, Leisure and Recreation sector.

TQH Contact Details

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Qualification Level

The level of a qualification reflects the level of difficulty and complexity of the knowledge and skills it requires. The qualification levels range from Entry Level 1 to Level 8.

Qualification Size

In the context of qualifications, size refers to the total amount of time typically required for a learner to complete all study and Explainment activities. This is measured as Total Qualification Time (TQT), which includes both Guided Learning Hours (GLH)—the time spent under direct supervision or instruction—and time spent on independent study and assessment preparation. (See GCOR J1.8).

The start and end dates of TQH qualification's operation signify the duration of its regulated lifecycle. The end date marks the final deadline for learners to enrol in the qualification. After this date, learners have a maximum of 2 years to finish the qualification and obtain their certificate.

All The Qualification Hub qualifications are published to the Register of Regulated Qualifications (https://register.ofqual.gov.uk/). This site shows the qualifications and awarding organisations regulated by CCEA Regulation.

TQH Qualification Regulation Information

TQH Level 2 Certificate in Wellness-Based Support for Long Term Conditions in Diabetes
Operational start date: TBC
Certification end date: TBC
Sector Subject Area – 8.1 – Sport, leisure and recreation
Grading is pass/fail.

Links to National Standards
The Chartered Institute for the Management of Sport and Physical Activity (CIMSPA) Learning and Development Requirements (LDR).

Entry Requirements

Entry to this qualification is at the discretion of the centre. There are no formal mandatory prerequisites; however, learners will benefit most from holding a relevant Level 2 qualification or having prior interest/experience in health, physical activity, fitness, wellbeing, or nutrition.

Centres are responsible for ensuring that this qualification is appropriate for the age and ability of their learners, and that learners possess the necessary literacy, numeracy, and communication capability to safely and effectively fulfill the learning outcomes.

This qualification is intended for individuals who wish to develop their knowledge and understanding of wellness-based support for adults living with, or at risk of, diabetes within the boundaries of a non-clinical role.

Progression
Achievement of this qualification may support progression to further learning in health, wellbeing, physical activity and long-term condition management.

Learners may progress to a range of qualifications in areas such as:

- Wellness-Based Support for Long Term Conditions
- Exercise Referral
- Behaviour Change and Client Engagement
- Physical Activity and Health
- Nutrition and Healthy Lifestyle Support
- Health Coaching
- Personal Training
- Community Health and Wellbeing

Learners may also progress to higher-level qualifications in health, fitness, physical activity or related professional development programmes where appropriate.

The qualification may also support progression into a range of support roles within health improvement, community wellbeing, physical activity, fitness and lifestyle services, where practitioners work within clearly defined professional boundaries and refer individuals to appropriately qualified healthcare professionals when required.

Delivery Languages

This qualification is available in English only at this time.

Qualification Target Group – Health and Fitness Professionals, Sports Coaches.

Qualification Aim

The *"TQH Level 2 Certificate in Wellness-Based Support for Long Term Conditions in Diabetes"* course enables learners to develop the knowledge and skills required to understand how diabetes and its various forms influence physical health, exercise performance, and lifestyle outcomes. Learners will be able to describe key principles, Outline their impact on well-being and performance, and apply this understanding to real-world scenarios including exercise planning, client support, and health promotion.

Qualification Objectives

By the end of this course, participants will be able to:

- The learner will be able to understand the concept of diabetes pathophysiology across multiple conditions.
- The learner will be able to recognise the signs, symptoms and diagnostic indicators of different forms of diabetes.
- The learner will be able to apply knowledge of exercise and physical activity considerations for individuals with diabetes.
- The learner will be able to understand nutritional and weight management strategies in diabetes support.
- The learner will be able to integrate person-centred approaches into workplace and daily living support.
- The learner will be able to Outline risk, progression and long-term health implications associated with diabetes.
- The learner will be able to understand professional boundaries, scope of practice and referral pathways.
- The learner will be able to differentiate between multiple forms of diabetes in relation to management and support needs.
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Purpose

The purpose of this qualification is to provide learners with an understanding of the pathophysiological, behavioural and lifestyle-related requirements of supporting individuals with diabetes. Learners are provided with an understanding of the key concepts of diabetes management, including exercise, nutrition and person-centred support, and how these can be used in exercise and health sessions with clients. Learners are also provided with the knowledge and skills to be able to plan, prepare and deliver safe and effective exercise and lifestyle support sessions.

This qualification includes the essential knowledge and skills that are needed to meet the requirements of the physical activity sector's minimum standards for deployment.

Requirements for Tutors

Tutors should hold, or be working towards, a teaching qualification. The following examples are acceptable, although TQH will consider other teaching qualifications on request:

- Preparing to Teach in the Lifelong Learning Sector (PTLLS).
- Certificate in Teaching in the Lifelong Learning Sector (CTLLS).
- Diploma in Teaching in the Lifelong Learning Sector (DTLLS).
- Certificate of Education.
- PGCE.
- Award in Education and Training.
- Certificate in Education and Training.
- Bachelor of Education (BEd)

The tutor will need to demonstrate they have the appropriate knowledge, understanding, and competence for TQH qualification they wish to teach.

Tutors must hold a relevant qualification in addition to CIMSPA membership OR have been actively engaged in the industry, working for a minimum of 4 operational hours per month during the last 12 months prior to the tutor's role. This ensures tutors keep pace with the current trends and standards of others working in their industry.

Requirements for Assessors

Assessors should hold, or be working towards, a recognised assessing qualification. The following examples are acceptable, although TQH will consider other assessor qualifications on request:

- D32/33 qualification.
- A1 qualification.
- Level 3 Award in Understanding the Principles and Practices of Assessment or equivalent.
- Level 3 Award in Assessing Vocationally Related Achievement or equivalent.
- Level 3 Award in Assessing Competence in the Work Environment or equivalent.
- Level 3 Certificate in Assessing Vocational Achievement or equivalent.

If assessors wish to assess work-based competency qualifications, they must hold, or be working towards, one of the following qualifications:

- D32/D33 qualification.
- A1 qualification.
- Level 3 Award in Assessing Competence in the Work Environment or equivalent.
- Level 3 Certificate in Assessing Vocational Achievement or equivalent.

Assessors must hold a relevant qualification in addition to appropriate occupational competence. They must also hold CIMSPA membership, where applicable, **or** have been actively engaged within the relevant industry for a minimum of four operational hours per month during the 12 months immediately preceding their appointment as an assessor. This helps ensure that assessors remain current with contemporary industry practice and professional standards.

Trainee assessors must be provided with a clear action plan for achieving the appropriate qualification(s). Until these qualifications are achieved, all assessment decisions must be countersigned by a suitably qualified assessor.

Requirements for an Internal Quality Assurer (IQA)

IQA's should hold, or be working towards, a recognised Internal Quality Assurance qualification. The following examples are acceptable, although TQH will consider other IQA qualifications on request:

- Level 4 Award in Understanding the Internal Quality Assurance of Assessment Processes and Practice.
- Level 4 Award in the Internal Quality Assurance of Assessment Processes and Practice.
- Level 4 Certificate in Leading the Internal Quality Assurance of Assessment Processes and Practice.
- V1 (previously D34).

Internal Quality Assurers must hold a relevant qualification in addition to CIMSPA membership OR have been actively engaged in the industry, working for a minimum of 4 operational hours per month during the last 12 months prior to the IQA role. This ensures staff keep pace with the current trends and standards of others working in their industry.

Trainee IQA's must be given a clear action plan for achieving the appropriate qualification(s) and their decisions should be countersigned by a suitably qualified individual until the qualification(s) are achieved.

Important Notes

- It is not best practice for the IQA to provide the QA for aspects of course delivery that s/he has tutored
- It is not permitted for the IQA to provide the internal quality assurance of his/her assessment decisions.

Centre Performance

External Quality Assurance (EQA)

The EQA will typically visit the Centre twice a year, with one visit being announced and the other unannounced.

The role of the External Quality Assurer is to collaborate with the Centre to review its systems and procedures, interview assessors for consistency, support and work with the IQAs, and interview learners both remotely and in person, sampling assessments both incognito and openly with the Centre. The EQA will also examine internal quality assurance decisions and records, and verify that full qualification or individual unit certifications are correct.

The Centre is responsible for providing the EQA with access to its premises, staff, learners, data, records, meetings, and documents as required. The Centre uses TQH Platform and all learner data is available online 24/7.

The EQA will validate evidence on the TQH system on a weekly basis to provide feedback and certification.

Standardisation

It is a method that assures all staff members, such as teachers, trainers, assessors, and quality assurance personnel, interpret and adhere to the programme's requirements or qualifications in the same manner.

If requested, centres offering units of a TQH qualification must attend and provide assessment materials and learner evidence for standardisation events.

Learner Registration

- Use its best endeavours to verify that the identity and information provided by the Learners
- upon registration is accurate and complete as per Identification Policy;
- Register Learners promptly upon enrolment with the Centre. The centre must register learners on TQH platform 14 days after enrolling learners at centre level;
- Only register Learners for qualifications whom it reasonably expects to complete a qualification;
- Only register Learners for qualifications the centre is approved to deliver;
- Take all reasonable steps to ensure that learners are fully informed about the requirements of their selected qualifications as set out in the relevant qualification specifications and guides published by TQH.
- Provide appropriate induction and support to learners, in accordance with TQH Policies and Procedures.
- Have in place arrangements to allow for recognition of prior learning, where this is appropriate for a qualification, and in accordance with the relevant TQH Policies and Procedures;

(To obtain further information regarding registration, kindly refer to Registration of Learners)

Administration

Certification

The primary responsibility for initiating certificate claims lies with the Centres. A Centre cannot make a claim for certification unless it is confident that the student has completed all necessary assessments and has reached the required level of proficiency for the qualification. Only after completing all internal quality assurance procedures can a Centre make this determination. Certificates will be issued within 20 working days.

Qualification Fees

TQH publishes all up to date qualification fees in its Fees and Invoicing Policy.

Equality, Fairness and Inclusion

In developing the specifications for these qualifications, TQH has taken into account the demands of equality legislation. If you need more information or guidance on how to access fair assessments or want to know more about TQH's Reasonable Adjustments and Special Considerations policies.

TQH Centre handbook contains additional information on the headings mentioned. Please refer to it for further details.

Structure and Content

Accreditation Number	Pending
Guided learning hours	194
Total qualification time	280
Credits	28

Unit	**Level**	**GLH**	**Credits**	**Portfolio**	**Practical observation**
Understanding the Pathophysiology, Diagnosis and Management of Diabetes in Adults	2	35	5	✔	
Understanding Exercise and Physical Activity in Diabetes Support	2	35	5	✔	
Understanding Nutrition and Weight Management in Diabetes Support	2	38	5	✔	
Understanding Workplace, Daily Living and Person-Centred Support in Diabetes	2	28	4	✔	
Understanding Professional Practice, Boundaries and Referral in Diabetes Support	2	28	4	✔	
Understanding Risk, Progression and Long-Term Health Implications of Diabetes	2	30	5	✔	

Unit 1 - Understanding the Pathophysiology, Diagnosis and Management of Diabetes

Learning Outcomes	Assessment Criteria
1. Understand the pathophysiology, presentation, diagnosis and management of Type 2 Diabetes in adults.	**1.1** Describe the pathophysiology of Type 2 Diabetes in adults. **1.2** Identify the clinical signs associated with Type 2 Diabetes. **1.3** Identify the symptoms associated with Type 2 Diabetes. **1.4** Describe how Type 2 Diabetes affects blood glucose regulation in adults. **1.5** Identify common features associated with the recognition of Type 2 Diabetes in adults. **1.6** Explain the diagnostic tests used to identify Type 2 Diabetes, including blood glucose and HbA1c measures. **1.7** Outline the significance of diagnostic findings in the identification of Type 2 Diabetes. **1.8** Identify the main medications used to manage Type 2 Diabetes. **1.9** Describe the main pharmaceutical and non-pharmaceutical approaches used in the management of Type 2 Diabetes. **1.10** Describe differences between Type 2 Diabetes and other forms of diabetes.
2. Understand the pathophysiology, presentation, diagnosis and management of Type 1 Diabetes in adults.	**2.1** Describe the pathophysiology of Type 1 Diabetes in adults. **2.2** Identify the clinical signs associated with Type 1 Diabetes in adults. **2.3** Identify the symptoms associated with Type 1 Diabetes in adults. **2.4** Describe how Type 1 Diabetes affects blood glucose regulation in adults. **2.5** Identify common features associated with the recognition of Type 1 Diabetes in adulthood. **2.6** Explain the diagnostic tests used to identify Type 1 Diabetes, including blood glucose and ketone-related measures. **2.7** Outline the significance of diagnostic findings in the identification of Type 1 Diabetes. **2.8** Identify the main medications used to manage Type 1 Diabetes. **2.9** Describe the main pharmaceutical and non-pharmaceutical approaches used in the management of Type 1 Diabetes in adults. **2.10** Describe differences between Type 1 Diabetes and Type 2 Diabetes.
3. Understand the pathophysiology, presentation, diagnosis and management of prediabetes in adults.	**3.1** Describe the pathophysiology of prediabetes in adults. **3.2** Identify the clinical signs associated with prediabetes. **3.3** Identify the symptoms associated with prediabetes. **3.4** Describe how prediabetes affects blood glucose regulation in adults. **3.5** Identify common features associated with the recognition of prediabetes in adults. **3.6** Describe the diagnostic tests used to identify prediabetes, including blood glucose and HbA1c measures. **3.7** Outline the significance of diagnostic findings in the identification of prediabetes.

	3.8 Identify the main non-pharmaceutical approaches used in the management of prediabetes. **3.9** Explain the importance of early management approaches in adults with prediabetes. **3.10** Describe differences between prediabetes and Type 2 Diabetes.
4. Understand the pathophysiology, presentation, diagnosis and management of latent autoimmune diabetes in adults (LADA).	**4.1** Describe the pathophysiology of latent autoimmune diabetes in adults. **4.2** Identify the clinical signs associated with latent autoimmune diabetes in adults. **4.3** Identify the symptoms associated with latent autoimmune diabetes in adults. **4.4** Describe how latent autoimmune diabetes affects blood glucose regulation. **4.5** Identify common features associated with the recognition of LADA in adults. **4.6** Explain the tests and indicators used to support the identification of LADA. **4.7** Outline the significance of diagnostic findings in the identification of LADA. **4.8** Identify the main medications used in the management of LADA. **4.9** Describe the main approaches used in the management of LADA. **4.10** Describe differences between LADA and other forms of diabetes.
5. Understand the pathophysiology, presentation, diagnosis and management of gestational diabetes in relation to adult support needs.	**5.1** Describe the pathophysiology of gestational diabetes. **5.2** Identify the clinical signs associated with gestational diabetes. **5.3** Identify the symptoms associated with gestational diabetes. **5.4** Describe how gestational diabetes affects blood glucose regulation during pregnancy. **5.5** Identify common features associated with the recognition of gestational diabetes. **5.6** Explain the diagnostic tests used to identify gestational diabetes. **5.7** Outline the significance of screening and diagnostic findings in the identification of gestational diabetes. **5.8** Identify the main approaches used in the management of gestational diabetes. **5.9** Explain the importance of monitoring during pregnancy in relation to gestational diabetes. **5.10** Describe differences between gestational diabetes and other forms of diabetes.

6. Understand the pathophysiology, presentation, diagnosis and management of steroid-induced diabetes in adults.	**6.1** Describe the pathophysiology of steroid-induced diabetes in adults. **6.2** Identify the clinical signs associated with steroid-induced diabetes. **6.3** Identify the symptoms associated with steroid-induced diabetes. **6.4** Describe how steroid-induced diabetes affects blood glucose regulation in adults. **6.5** Identify features in medication history associated with steroid-induced diabetes. **6.6** Explain the diagnostic tests used to identify steroid-induced diabetes. **6.7** Outline the significance of diagnostic findings in the identification of steroid-induced diabetes. **6.8** Identify the main approaches used in the management of steroid-induced diabetes. **6.9** Explain the importance of blood glucose monitoring in adults receiving corticosteroid treatment. **6.10** Describe differences between steroid-induced diabetes and Type 2 Diabetes.
7. Understand the pathophysiology, presentation, diagnosis and management of secondary diabetes in adults.	**7.1** Describe the pathophysiology of secondary diabetes in adults. **7.2** Identify the clinical signs associated with secondary diabetes. **7.3** Identify the symptoms associated with secondary diabetes. **7.4** Describe how secondary diabetes affects blood glucose regulation in adults. **7.5** Identify underlying conditions associated with secondary diabetes. **7.6** Explain the diagnostic tests used to identify secondary diabetes. **7.7** Outline the significance of diagnostic findings in the identification of secondary diabetes. **7.8** Identify the main approaches used in the management of secondary diabetes. **7.9** Explain the importance of recognising the relationship between secondary diabetes and the underlying condition. **7.10** Describe differences between secondary diabetes and primary forms of diabetes.
8. Understand the pathophysiology, presentation, diagnosis and management of maturity onset diabetes of the young (MODY).	**8.1** Describe the pathophysiology of maturity onset diabetes of the young. **8.2** Identify the clinical signs associated with maturity onset diabetes of the young. **8.3** Identify the symptoms associated with maturity onset diabetes of the young. **8.4** Describe how MODY affects blood glucose regulation. **8.5** Identify recognition features associated with family history and presentation in MODY. **8.6** Explain the approaches used to identify MODY. **8.7** Outline the significance of diagnostic findings in the identification of MODY. **8.8** Identify the main approaches used in the management of MODY.

	8.9 Explain the importance of genetic recognition in relation to MODY. **8.10** Describe differences between MODY and other forms of diabetes.
9. Understand how different forms of diabetes are distinguished in adults.	**9.1** Explain the importance of accurate diabetes classification in adults. **9.2** Outline how diabetes develops differently across forms of diabetes. **9.3** Describe how clinical signs and symptoms may vary across forms of diabetes. **9.4** Identify differences in recognition features associated with different forms of diabetes. **9.5** Describe how diagnostic testing supports distinction between forms of diabetes. **9.6** Identify differences in management approaches across forms of diabetes. **9.7** Explain how medication use may vary across forms of diabetes. **9.8** Outline how blood glucose presentation may vary across forms of diabetes. **9.9** Describe differences between the main forms of diabetes. **9.10** Explain the importance of diabetes-specific awareness in recognising different forms of diabetes.
10. Understand the boundaries between support-level practice and clinical-level responsibility in relation to diabetes.	**10.1** Describe how content may imply clinical-level understanding and responsibility in relation to diabetes. **10.2** Explain the difference between non-clinical support and clinical support when working with individuals with diabetes. **10.3** Identify appropriate wellness-based ways to support individuals with diabetes in a non-clinical manner. **10.4** Outline the professional boundaries of a nutrition and wellness practitioner when providing support to individuals with diabetes. **10.5** Describe when referral to an appropriate healthcare professional is required. **10.6** Compare the roles and responsibilities of non-clinical support and clinical support in relation to diabetes care.

UNIT 1: Understanding the Pathophysiology, Diagnosis and Management of Diabetes in Adults - Content Amplification (Delivery and Assessment Guidance)

Level: 2 | GLH: 35 | Credits: 5

Learning Outcomes 1 – 3: Pathophysiology, Presentation, Diagnosis and Management of Type 2, Type 1, and Prediabetes (AC 1.1 – 1.10, AC 2.1 – 2.10, AC 3.1 – 3.10)

Syllabus Content (Range)

- Type 2 Diabetes (AC 1.1 – 1.10): Pathophysiology of insulin resistance and impaired beta-cell function; clinical signs (acanthosis nigricans, central adiposity) and symptoms (polyuria, polydipsia, lethargy); impaired blood glucose homeostasis; diagnostic benchmarks (Fasting Plasma Glucose ≥7.0 mmol/L, HbA1c ≥48 mmol/mol / 6.5%); pharmaceutical management (Metformin, SGLT2 inhibitors, GLP-1 receptor agonists) vs. non-pharmaceutical management (dietary modification, weight management, physical activity).
- Type 1 Diabetes (AC 2.1 – 2.10): Autoimmune destruction of pancreatic beta-cells resulting in absolute insulin deficiency; rapid onset presentation (weight loss, ketoacidosis risk); diagnostic indicators (capillary blood glucose, ketones, C-peptide, autoantibodies); daily basal-bolus insulin therapy and continuous glucose monitoring (CGM); distinguishing from Type 2 diabetes.
- Prediabetes (AC 3.1 – 3.10): Pathophysiology of impaired fasting glucose (IFG 5.6–6.9 mmol/L) and impaired glucose tolerance (IGT / HbA1c 42–47 mmol/mol); asymptomatic presentation; significance of early lifestyle intervention to prevent progression to Type 2 diabetes.

Delivery and Assessment Guidance

- Delivery: Interactive lectures, physiological diagrams, and case study reviews. Tutors should present contrasting blood chemistry reports and HbA1c charts to help learners differentiate between normal, prediabetic, Type 1, and Type 2 profiles.
- Assessment: Portfolio written assignment comparing the pathophysiology, diagnostic thresholds, and primary management pathways across Type 1, Type 2, and prediabetes.

Suggested Types of Evidence

- Comparative health and pathophysiology report.
- Case study analysis of diagnostic glucose/HbA1c data.

Learning Outcomes 4 – 8: Pathophysiology, Presentation, Diagnosis and Management of LADA, Gestational, Steroid-Induced, Secondary, and MODY (AC 4.1 – 4.10, AC 5.1 – 5.10, AC 6.1 – 6.10, AC 7.1 – 7.10, AC 8.1 – 8.10)

Syllabus Content (Range)

- LADA (AC 4.1 – 4.10): Latent Autoimmune Diabetes in Adults; slow-onset autoimmune diabetes frequently misdiagnosed as Type 2; progressive beta-cell failure requiring eventual insulin therapy; GAD antibody testing.
- Gestational Diabetes (AC 5.1 – 5.10): Pregnancy-induced insulin resistance; Oral Glucose Tolerance Test (OGTT) screening; risk of maternal/fetal complications; post-partum resolution and long-term T2D risk.
- Steroid-Induced Diabetes (AC 6.1 – 6.10): Corticosteroid-induced gluconeogenesis and severe insulin resistance; monitoring glucose patterns during high-dose steroid treatment regimens.
- Secondary Diabetes & MODY (AC 7.1 – 7.10, AC 8.1 – 8.10): Secondary diabetes resulting from pancreatic disease (pancreatitis, cystic fibrosis) or endocrine disorders (Cushing's syndrome); Maturity Onset Diabetes of the Young (MODY) as a monogenic autosomal dominant genetic condition requiring specific genetic diagnosis.

Delivery and Assessment Guidance

- Delivery: Seminar presentations highlighting rarer diabetes etiologies, using clinical flowcharts to map out diagnostic distinctions and specialised management needs.
- Assessment: Portfolio research project categorising non-standard diabetes classifications and detailing their distinct physiological features.

Suggested Types of Evidence

- Written research file / comparative table of diabetes subtypes.
- Short-answer knowledge questions.

Learning Outcomes 9 & 10: Distinguishing Diabetes Forms & Professional Scope / Boundaries (AC 9.1 – 9.10, AC 10.1 – 10.6)

Syllabus Content (Range)

- Distinguishing Forms (AC 9.1 – 9.10): Comparing onset age, rate of progression, metabolic presentation, medication dependencies, and glucose stability across all major forms.
- Non-Clinical vs. Clinical Boundaries (AC 10.1 – 10.6): Defining the wellness practitioner scope (lifestyle guidance, health promotion, general activity support) vs. clinical care (diagnosing, prescribing, adjusting medical dosages, clinical dietetics); identifying red flags and establishing clear GP/diabetes specialist referral pathways.

Delivery and Assessment Guidance

- Delivery: Role-play scenarios and ethical boundary workshops where learners evaluate real-world client scenarios to identify whether a request falls under general wellness support or requires immediate medical referral.
- Assessment: Scenario-based portfolio tasks evaluating scope of practice limits and drafting formal medical referral letters.

Suggested Types of Evidence

- Professional boundaries and scope of practice written evaluation.
- Professional referral letter templates.

Unit 2 - Understanding Exercise and Physical Activity in Diabetes Support

Learning Outcomes	Assessment Criteria
1. Understand exercise and physical activity considerations for individuals with Type 2 Diabetes.	**1.1** Explain the role of physical activity in supporting adults with Type 2 Diabetes. **1.2** Outline how exercise may influence insulin sensitivity in adults with Type 2 Diabetes. **1.3** Outline how exercise may influence blood glucose regulation in adults with Type 2 Diabetes. **1.4** Describe differences between general physical activity and structured exercise in relation to Type 2 Diabetes support. **1.5** Describe the importance of regular physical activity for adults with Type 2 Diabetes.
2. Understand exercise and physical activity considerations for individuals with Type 1 Diabetes in adults.	**2.1** Explain the role of physical activity in supporting adults with Type 1 Diabetes. **2.2** Outline how exercise may affect blood glucose levels in adults with Type 1 Diabetes. **2.3** Explain the importance of blood glucose awareness before physical activity in adults with Type 1 Diabetes. **2.4** Explain the importance of blood glucose awareness during physical activity in adults with Type 1 Diabetes. **2.5** Explain the importance of blood glucose awareness after physical activity in adults with Type 1 Diabetes. **2.6** Describe exercise participation that may be appropriate in relation to unstable blood glucose presentation. **2.7** Explain the importance of individualised exercise support for adults with Type 1 Diabetes.
3. Understand exercise and physical activity considerations for individuals with prediabetes.	**3.1** Describe the role of physical activity in supporting adults with prediabetes. **3.2** Outline how regular physical activity may support metabolic health in adults with prediabetes. **3.3** Describe the contribution of movement to blood glucose regulation in adults with prediabetes. **3.4** Describe the contribution of reduced sedentary behaviour to blood glucose regulation in adults with prediabetes. **3.5** Describe differences between inactive lifestyle patterns and physically active lifestyle patterns. **3.6** Explain the importance of early physical activity support for adults with prediabetes.

4. Understand exercise and physical activity considerations for individuals with latent autoimmune diabetes in adults (LADA).	**4.1** Explain the relevance of physical activity for adults with LADA. **4.2** Outline how exercise considerations for LADA may change as insulin deficiency progresses. **4.3** Explain why adults with LADA may require different exercise support from adults with Type 2 Diabetes. **4.4** Describe exercise support needs associated with LADA. **4.5** Describe exercise support needs associated with Type 1 Diabetes. **4.6** Describe exercise support needs associated with Type 2 Diabetes. **4.7** Explain the importance of recognising LADA when considering exercise support needs in adults.
5. Understand exercise and physical activity considerations for individuals with a history of gestational diabetes.	**5.1** Explain the role of physical activity in supporting adults with a history of gestational diabetes. **5.2** Outline how physical activity may support metabolic wellbeing following gestational diabetes. **5.3** Explain the importance of physical activity following pregnancy in adults with a history of gestational diabetes. **5.4** Describe general physical activity support following gestational diabetes. **5.5** Describe individualised physical activity considerations following gestational diabetes. **5.6** Explain the importance of sustained physical activity in adults with a history of gestational diabetes.
6. Understand exercise and physical activity considerations for individuals with steroid-induced diabetes.	**6.1** Explain the relevance of physical activity for adults with steroid-induced diabetes. **6.2** Outline how corticosteroid-related changes in blood glucose may influence physical activity considerations. **6.3** Explain the importance of recognising fluctuating exercise support needs in adults with steroid-induced diabetes. **6.4** Describe exercise support for steroid-induced diabetes. **6.5** Describe exercise support for Type 2 Diabetes. **6.6** Describe the importance of awareness of steroid-induced diabetes when considering physical activity support in adults.
7. Understand exercise and physical activity considerations for individuals with secondary diabetes.	**7.1** Explain the relevance of physical activity for adults with secondary diabetes. **7.2** Outline how underlying health conditions may influence physical activity considerations in secondary diabetes. **7.3** Explain why exercise support may need to reflect diabetes-related needs. **7.4** Explain why exercise support may need to reflect the underlying condition. **7.5** Describe exercise support for secondary diabetes. **7.6** Describe exercise support for primary forms of diabetes. **7.7** Describe the importance of individual presentation when considering physical activity support for adults with secondary diabetes.

8. Understand exercise and physical activity considerations for individuals with maturity onset diabetes of the young (MODY).	**8.1** Explain the relevance of physical activity for individuals with MODY. **8.2** Outline how exercise support for MODY may differ from support for Type 1 Diabetes. **8.3** Outline how exercise support for MODY may differ from support for Type 2 Diabetes. **8.4** Explain the importance of recognising the presentation of MODY when considering physical activity support. **8.5** Describe general exercise support principles for individuals with MODY. **8.6** Describe exercise considerations linked to the presentation of MODY. **8.7** Describe the importance of awareness of MODY in exercise and activity settings.
9. Understand how exercise and physical activity support may differ across forms of diabetes.	**9.1** Outline how exercise support may differ across forms of diabetes in adults. **9.2** Outline how physical activity support may differ across forms of diabetes in adults. **9.3** Explain how differences in insulin function may influence exercise support needs. **9.4** Explain how differences in blood glucose presentation may influence exercise support needs. **9.5** Describe exercise considerations associated with different forms of diabetes. **9.6** Describe support priorities associated with different forms of diabetes. **9.7** Describe the risks of applying general exercise advice across different forms of diabetes. **9.8** Explain the importance of diabetes-specific awareness when providing exercise support.

UNIT 2: Understanding Exercise and Physical Activity in Diabetes Support - Content Amplification (Delivery and Assessment Guidance)

Level: 2 | GLH: 35 | Credits: 5

Learning Outcomes 1 – 9: Exercise Considerations Across All Forms of Diabetes (AC 1.1 – 1.5, 2.1 – 2.7, 3.1 – 3.6, 4.1 – 4.7, 5.1 – 5.6, 6.1 – 6.6, 7.1 – 7.7, 8.1 – 8.7, 9.1 – 9.8)

Syllabus Content (Range)

- Type 2 & Prediabetes Exercise Principles (LO1, LO3): Enhancing GLUT4 translocation independent of insulin; acute vs. chronic insulin sensitivity gains; aerobic vs. resistance training synergies; breaking up sedentary time; early lifestyle intervention benefit.
- Type 1 & LADA Exercise Safety Protocols (LO2, LO4): Blood glucose monitoring before, during, and after exercise; managing hypoglycaemia risks (glycaemic thresholds <4.0 mmol/L); carbohydrate fueling strategies; managing aerobic (blood glucose drop) vs. high-intensity anaerobic / resistance exercise (transient blood glucose spikes due to catecholamines); progression of insulin deficiency in LADA.
- Special Subtype Considerations (LO5, LO6, LO7, LO8, LO9): Post-gestational exercise programming for long-term metabolic health; managing corticosteroid-induced glucose fluctuations during exercise; adapting activity for secondary diabetes and underlying co-morbidities; dangers of applying generic exercise advice across complex diabetes profiles.

Delivery and Assessment Guidance

- Delivery: Practical gym and workshop sessions where learners design and adapt sample exercise sessions for contrasting client diabetes profiles.
- Assessment: Portfolio assignment including a 6-week exercise support plan tailored to a specific diabetes profile, accompanied by a safety and blood glucose monitoring rationale.

Suggested Types of Evidence

- 6-week exercise support programme plan.
- Blood glucose exercise safety and monitoring protocol guide.

Unit 3 - Understanding Nutrition and Weight Management in Diabetes Support

Learning Outcomes	Assessment Criteria
1. Understand nutritional support for individuals with Type 2 Diabetes.	**1.1** Explain the role of nutrition in supporting adults with Type 2 Diabetes. **1.2** Outline how dietary habits may influence blood glucose regulation in adults with Type 2 Diabetes. **1.3** Outline how dietary habits may influence metabolic health in adults with Type 2 Diabetes. **1.4** Describe the relationship between weight management and metabolic function in adults with Type 2 Diabetes. **1.5** Describe general healthy eating guidance for adults with Type 2 Diabetes. **1.6** Describe individualised nutritional considerations for adults with Type 2 Diabetes. **1.7** Describe the importance of sustainable dietary change for adults with Type 2 Diabetes.
2. Understand nutritional support for individuals with Type 1 Diabetes in adults.	**2.1** Explain the role of nutrition in supporting adults with Type 1 Diabetes. **2.2** Outline how food intake may influence blood glucose regulation in adults with Type 1 Diabetes. **2.3** Explain the importance of consistency in eating patterns for adults with Type 1 Diabetes. **2.4** Describe nutritional considerations for adults with Type 1 Diabetes. **2.5** Describe nutritional considerations for adults with Type 2 Diabetes. **2.6** Describe the importance of individualised nutritional support for adults with Type 1 Diabetes.
3. Understand nutritional support for individuals with prediabetes.	**3.1** Explain the role of nutrition in supporting adults with prediabetes. **3.2** Outline how healthier dietary patterns may support blood glucose regulation in adults with prediabetes. **3.3** Describe the contribution of weight management to metabolic health in adults with prediabetes. **3.4** Describe dietary patterns that support nutritional improvement. **3.5** Describe dietary patterns that may impair blood glucose regulation. **3.6** Describe the importance of early nutritional support for adults with prediabetes.

4. Understand nutritional support for individuals with latent autoimmune diabetes in adults (LADA).	**4.1** Explain the relevance of nutrition in supporting adults with LADA. **4.2** Outline how nutritional support for adults with LADA may change as insulin deficiency progresses. **4.3** Explain why adults with LADA may require different nutritional support from adults with Type 2 Diabetes. **4.4** Describe nutritional considerations for adults with LADA. **4.5** Describe nutritional considerations for adults with Type 1 Diabetes. **4.6** Describe nutritional considerations for adults with Type 2 Diabetes. **4.7** Describe the importance of recognising LADA when considering nutrition-related support needs in adults.
5. Understand nutritional support for individuals with a history of gestational diabetes.	**5.1** Explain the role of nutrition in supporting adults with a history of gestational diabetes. **5.2** Outline how nutritional habits may support metabolic wellbeing following gestational diabetes. **5.3** Describe the importance of weight management following gestational diabetes. **5.4** Describe the importance of healthy eating following gestational diabetes. **5.5** Describe general healthy eating guidance following gestational diabetes. **5.6** Describe individualised nutritional considerations following gestational diabetes. **5.7** Explain the importance of sustained nutritional support for adults with a history of gestational diabetes.
6. Understand nutritional support for individuals with steroid-induced diabetes.	**6.1** Describe the relevance of nutrition in supporting adults with steroid-induced diabetes. **6.2** Outline how corticosteroid-related changes in blood glucose may influence nutritional considerations. **6.3** Explain the importance of recognising fluctuating dietary support needs in adults with steroid-induced diabetes. **6.4** Describe nutritional support for steroid-induced diabetes. **6.5** Describe nutritional support for Type 2 Diabetes. **6.6** Explain the importance of awareness of steroid-induced diabetes when considering nutrition-related support in adults.
7. Understand nutritional support for individuals with secondary diabetes.	**7.1** Describe the relevance of nutrition in supporting adults with secondary diabetes. **7.2** Outline how underlying health conditions may influence nutritional considerations in secondary diabetes. **7.3** Explain why nutritional support may need to reflect diabetes-related needs. **7.4** Explain why nutritional support may need to reflect the underlying condition. **7.5** Describe nutritional support for secondary diabetes. **7.6** Describe nutritional support for primary forms of diabetes.

	7.7 Explain the importance of individual presentation when considering nutrition-related support for adults with secondary diabetes.
8. Understand nutritional support for individuals with maturity onset diabetes of the young (MODY).	**8.1** Describe the relevance of nutrition in supporting individuals with MODY. **8.2** Outline how nutritional support for MODY may differ from support for Type 1 Diabetes. **8.3** Outline how nutritional support for MODY may differ from support for Type 2 Diabetes. **8.4** Explain the importance of recognising the presentation of MODY when considering nutrition-related support. **8.5** Describe general healthy eating support principles for individuals with MODY. **8.6** Describe nutritional considerations linked to the presentation of MODY. **8.7** Explain the importance of awareness of MODY in nutrition and weight management settings.
9. Understand how nutritional support and weight management may differ across forms of diabetes.	**9.1** Outline how nutritional support may differ across forms of diabetes in adults. **9.2** Outline how weight management support may differ across forms of diabetes in adults. **9.3** Explain how differences in insulin function may influence nutrition-related support needs. **9.4** Explain how differences in blood glucose presentation may influence nutrition-related support needs. **9.5** Describe nutritional considerations associated with different forms of diabetes. **9.6** Describe weight management priorities associated with different forms of diabetes. **9.7** Explain the risks of applying general nutrition advice across different forms of diabetes. **9.8** Explain the importance of diabetes-specific awareness when providing nutrition and weight management support.

UNIT 3: Understanding Nutrition and Weight Management in Diabetes Support - Content Amplification (Delivery and Assessment Guidance)

Level: 2 | GLH: 38 | Credits: 5

Learning Outcomes 1 – 9: Nutritional Support & Weight Management Across Diabetes Profiles (AC 1.1 – 1.7, 2.1 – 2.6, 3.1 – 3.6, 4.1 – 4.7, 5.1 – 5.7, 6.1 – 6.6, 7.1 – 7.7, 8.1 – 8.7, 9.1 – 9.8)

Syllabus Content (Range)

- Type 2 & Prediabetes Nutrition (LO1, LO3): Role of energy balance, modest weight loss (5–10%), and visceral fat reduction in improving glycemic control and potential T2D remission; dietary fiber, glycemic index (GI) and glycemic load (GL); sustainable, person-centred dietary patterns (e.g. Mediterranean, low-carbohydrate, plate method).
- Type 1 & LADA Nutritional Awareness (LO2, LO4): Carbohydrate awareness and consistency in non-clinical settings; understanding insulin-to-carbohydrate ratios in clinical context while supporting healthy dietary habits; adapting nutrition as LADA progresses toward insulin dependence.
- Special Conditions & Risks of Generic Advice (LO5, LO6, LO7, LO8, LO9): Post-gestational weight management; managing corticosteroid-associated appetite changes and hyper-glycemia; individualising nutrition for secondary diabetes; risks of applying restrictive or inappropriate generic diets to individuals with complex metabolic needs.

Delivery and Assessment Guidance

- Delivery: Interactive nutrition workshops evaluating food diaries, analysing carbohydrate quality, and calculating baseline energy requirements for wellness clients.
- Assessment: Portfolio case study developing a non-prescriptive, healthy eating and weight management guidance framework for a client with diabetes or prediabetes.

Suggested Types of Evidence

- Case study evaluation with healthy eating & lifestyle recommendations.
- Written assignment on dietary habits, glycemic control, and weight management.

Unit 4 - Understanding Workplace, Daily Living and Person-Centred Support in Diabetes

Learning Outcomes	Assessment Criteria
1. Understand workplace, daily living and person-centred support for individuals with Type 2 Diabetes.	**1.1** Describe how Type 2 Diabetes may affect daily living in adults. **1.2** Describe how Type 2 Diabetes may affect workplace participation in adults. **1.3** Outline the impact of Type 2 Diabetes on routine in adult settings. **1.4** Outline the impact of Type 2 Diabetes on energy levels in adult settings. **1.5** Outline the impact of Type 2 Diabetes on self-management in adult settings. **1.6** Explain the importance of person-centred support when working with adults with Type 2 Diabetes. **1.7** Describe general support needs for adults with Type 2 Diabetes. **1.8** Describe individualised support needs for adults with Type 2 Diabetes. **1.9** Explain the importance of supportive strategies in promoting wellbeing for adults with Type 2 Diabetes. **1.10** Explain the importance of supportive strategies in promoting independence for adults with Type 2 Diabetes.
2. Understand workplace, daily living and person-centred support for individuals with Type 1 Diabetes in adults.	**2.1** Describe how Type 1 Diabetes may affect daily living in adults. **2.2** Describe how Type 1 Diabetes may affect workplace participation in adults. **2.3** Outline the impact of insulin dependence on routine in adults with Type 1 Diabetes. **2.4** Outline the impact of blood glucose variation on self-management in adults with Type 1 Diabetes. **2.5** Explain the importance of person-centred support when working with adults with Type 1 Diabetes. **2.6** Describe general support needs for adults with Type 1 Diabetes. **2.7** Describe individualised support needs for adults with Type 1 Diabetes. **2.8** Explain the importance of supportive strategies in promoting safety for adults with Type 1 Diabetes. **2.9** Explain the importance of supportive strategies in promoting wellbeing for adults with Type 1 Diabetes. **2.10** Explain the importance of supportive strategies in promoting independence for adults with Type 1 Diabetes.

3. Understand workplace, daily living and person-centred support for individuals with prediabetes.	**3.1** Describe how prediabetes may influence daily living in adults. **3.2** Describe how prediabetes may influence health-related decision-making in adults. **3.3** Outline the importance of supportive environments in helping adults with prediabetes adopt healthier routines. **3.4** Explain the role of person-centred support in promoting lifestyle-related self-management in adults with prediabetes. **3.5** Describe general health encouragement for adults with prediabetes. **3.6** Describe tailored support needs for adults with prediabetes. **3.7** Explain the importance of workplace support in helping adults with prediabetes maintain healthier routines. **3.8** Explain the importance of daily living support in helping adults with prediabetes maintain healthier routines.
4. Understand workplace, daily living and person-centred support for individuals with latent autoimmune diabetes in adults (LADA).	**4.1** Describe how LADA may affect daily living in adults. **4.2** Describe how LADA may affect workplace participation in adults. **4.3** Outline how the progression of LADA may influence support needs over time. **4.4** Explain the importance of person-centred support when working with adults with LADA. **4.5** Describe support needs associated with LADA. **4.6** Describe support needs associated with Type 2 Diabetes. **4.7** Explain the importance of recognising how LADA may influence support needs in everyday settings.
5. Understand workplace, daily living and person-centred support for individuals with a history of gestational diabetes.	**5.1** Describe how a history of gestational diabetes may influence long-term health awareness in adults. **5.2** Describe how a history of gestational diabetes may influence daily living in adults. **5.3** Outline the importance of supportive environments in helping adults with a history of gestational diabetes maintain healthier routines. **5.4** Explain the role of person-centred support in promoting wellbeing following gestational diabetes. **5.5** Describe general wellbeing support following gestational diabetes. **5.6** Describe individualised support following gestational diabetes. **5.7** Explain the importance of workplace support in helping adults maintain healthier routines following gestational diabetes. **5.8** Explain the importance of daily living support in helping adults maintain healthier routines following gestational diabetes.

6. Understand workplace, daily living and person-centred support for individuals with steroid-induced diabetes.	**6.1** Describe how steroid-induced diabetes may affect daily living in adults. **6.2** Describe how steroid-induced diabetes may affect self-management in adults. **6.3** Outline how fluctuating blood glucose patterns linked to corticosteroid use may influence support needs. **6.4** Explain the importance of person-centred support when working with adults with steroid-induced diabetes. **6.5** Describe support needs associated with steroid-induced diabetes. **6.6** Describe support needs associated with Type 2 Diabetes. **6.7** Explain the importance of recognising how steroid-induced diabetes may influence workplace support needs. **6.8** Explain the importance of recognising how steroid-induced diabetes may influence daily living support needs.
7. Understand workplace, daily living and person-centred support for individuals with secondary diabetes.	**7.1** Describe how secondary diabetes may affect daily living in adults. **7.2** Describe how secondary diabetes may affect self-management in adults. **7.3** Outline how underlying health conditions may influence support needs in adults with secondary diabetes. **7.4** Explain the importance of person-centred support when working with adults with secondary diabetes. **7.5** Describe support needs associated with secondary diabetes. **7.6** Describe support needs associated with primary forms of diabetes. **7.7** Explain the importance of individual presentation when supporting adults with secondary diabetes in workplace contexts. **7.8** Explain the importance of individual presentation when supporting adults with secondary diabetes in daily living contexts.
8. Understand workplace, daily living and person-centred support for individuals with maturity onset diabetes of the young (MODY).	**8.1** Describe how MODY may affect daily living in adults. **8.2** Describe how MODY may affect self-management in adults. **8.3** Outline how the presentation of MODY may influence support needs in adult settings. **8.4** Explain the importance of person-centred support when working with adults with MODY. **8.5** Describe support needs associated with MODY. **8.6** Describe support needs associated with Type 1 Diabetes. **8.7** Describe support needs associated with Type 2 Diabetes. **8.8** Explain the importance of awareness of MODY when considering workplace support needs. **8.9** Explain the importance of awareness of MODY when considering daily living support needs.

9. Understand how support needs may differ across forms of diabetes in everyday adult settings.	**9.1** Outline how workplace support needs may differ across forms of diabetes in adults. **9.2** Outline how daily living support needs may differ across forms of diabetes in adults. **9.3** Outline how person-centred support needs may differ across forms of diabetes in adults. **9.4** Explain how differences in progression may influence support priorities. **9.5** Explain how differences in self-management demands may influence support priorities. **9.6** Explain how differences in blood glucose presentation may influence support priorities. **9.7** Describe workplace considerations associated with different forms of diabetes. **9.8** Describe daily living considerations associated with different forms of diabetes. **9.9** Explain the risks of applying general support approaches across different forms of diabetes. **9.10** Explain the importance of diabetes-specific awareness in promoting effective support in adult settings.

UNIT 4: Understanding Workplace, Daily Living and Person-Centred Support in Diabetes - Content Amplification (Delivery and Assessment Guidance)

Level: 2 | GLH: 28 | Credits: 4

Learning Outcomes 1 – 9: Daily Living, Workplace Adaptation & Person-Centred Care (AC 1.1 – 1.10, 2.1 – 2.10, 3.1 – 3.8, 4.1 – 4.7, 5.1 – 5.8, 6.1 – 6.8, 7.1 – 7.8, 8.1 – 8.9, 9.1 – 9.10)

Syllabus Content (Range)

- Impact on Daily Living & Workplace (LO1, LO2, LO6, LO7): Fatigue, routine disruptions, shift work challenges, blood glucose monitoring schedules, insulin storage and workplace accommodations (reasonable adjustments under Equality legislation).
- Person-Centred Support Strategies (LO3, LO4, LO5, LO8, LO9): Promoting autonomy, psychological wellbeing, and self-management; addressing diabetes distress and burnout; tailoring communication and support environments to individual life demands across Type 1, Type 2, prediabetes, LADA, and rare subtypes.

Delivery and Assessment Guidance

- Delivery: Group discussions and scenario analysis focusing on workplace adjustments, daily barrier identification, and empathetic communication techniques.
- Assessment: Portfolio project producing a workplace and daily living person-centred support guide for an adult managing diabetes.

Suggested Types of Evidence

- Person-centred support guide / workplace adjustment plan.
- Reflective account / scenario analysis responses.

Unit 5 - Understanding Professional Practice, Boundaries and Referral in Diabetes Support

Learning Outcomes	Assessment Criteria
1. Understand professional practice, boundaries and referral when supporting individuals with Type 2 Diabetes.	**1.1** Describe the role of the practitioner when supporting adults with Type 2 Diabetes in non-clinical settings. **1.2** Outline the importance of working within scope of practice when supporting adults with Type 2 Diabetes. **1.3** Describe situations in which referral may be required when supporting adults with Type 2 Diabetes. **1.4** Describe situations in which signposting may be required when supporting adults with Type 2 Diabetes. **1.5** Describe appropriate lifestyle support in relation to Type 2 Diabetes. **1.6** Describe clinical advice in relation to Type 2 Diabetes. **1.7** Explain the importance of professional accountability when supporting adults with Type 2 Diabetes. **1.8** Explain the importance of record-keeping when supporting adults with Type 2 Diabetes. **1.9** Explain the importance of appropriate escalation when supporting adults with Type 2 Diabetes.
2. Understand professional practice, boundaries and referral when supporting individuals with Type 1 Diabetes in adults.	**2.1** Describe the role of the practitioner when supporting adults with Type 1 Diabetes in non-clinical settings. **2.2** Outline the importance of working within scope of practice when supporting adults with Type 1 Diabetes. **2.3** Describe situations in which referral may be required when supporting adults with Type 1 Diabetes. **2.4** Describe situations in which signposting may be required when supporting adults with Type 1 Diabetes. **2.5** Describe appropriate lifestyle support in relation to Type 1 Diabetes. **2.6** Describe clinical advice in relation to Type 1 Diabetes. **2.7** Explain the importance of professional accountability when supporting adults with Type 1 Diabetes. **2.8** Explain the importance of record-keeping when supporting adults with Type 1 Diabetes. **2.9** Explain the importance of appropriate escalation when supporting adults with Type 1 Diabetes.
3. Understand professional practice, boundaries and referral when supporting individuals with prediabetes.	**3.1** Describe the role of the practitioner when supporting adults with prediabetes in non-clinical settings. **3.2** Outline the importance of working within scope of practice when supporting adults with prediabetes. **3.3** Describe situations in which referral may be required when supporting adults with prediabetes. **3.4** Describe situations in which signposting may be required when supporting adults with prediabetes. **3.5** Describe prevention-focused support in relation to prediabetes. **3.6** Describe clinical advice in relation to prediabetes.

	3.7 Explain the importance of professional accountability when supporting adults with prediabetes. **3.8** Explain the importance of record-keeping when supporting adults with prediabetes. **3.9** Explain the importance of appropriate escalation when supporting adults with prediabetes.
4. Understand professional practice, boundaries and referral when supporting individuals with latent autoimmune diabetes in adults (LADA).	**4.1** Describe the role of the practitioner when supporting adults with LADA in non-clinical settings. **4.2** Outline the importance of working within scope of practice when supporting adults with LADA. **4.3** Describe situations in which referral may be required when supporting adults with LADA. **4.4** Describe situations in which signposting may be required when supporting adults with LADA. **4.5** Describe appropriate lifestyle support in relation to LADA. **4.6** Describe clinical advice in relation to LADA. **4.7** Explain the importance of professional accountability when supporting adults with LADA. **4.8** Explain the importance of record-keeping when supporting adults with LADA. **4.9** Explain the importance of appropriate escalation when supporting adults with LADA.
5. Understand professional practice, boundaries and referral when supporting individuals with a history of gestational diabetes.	**5.1** Describe the role of the practitioner when supporting adults with a history of gestational diabetes in non-clinical settings. **5.2** Outline the importance of working within scope of practice when supporting adults with a history of gestational diabetes. **5.3** Describe situations in which referral may be required when supporting adults with a history of gestational diabetes. **5.4** Describe situations in which signposting may be required when supporting adults with a history of gestational diabetes. **5.5** Describe appropriate lifestyle support following gestational diabetes. **5.6** Describe clinical advice following gestational diabetes. **5.7** Explain the importance of professional accountability when supporting adults with a history of gestational diabetes. **5.8** Explain the importance of record-keeping when supporting adults with a history of gestational diabetes. **5.9** Explain the importance of appropriate escalation when supporting adults with a history of gestational diabetes.

6. Understand professional practice, boundaries and referral when supporting individuals with steroid-induced diabetes.	**6.1** Describe the role of the practitioner when supporting adults with steroid-induced diabetes in non-clinical settings. **6.2** Outline the importance of working within scope of practice when supporting adults with steroid-induced diabetes. **6.3** Describe situations in which referral may be required when supporting adults with steroid-induced diabetes. **6.4** Describe situations in which signposting may be required when supporting adults with steroid-induced diabetes. **6.5** Describe appropriate lifestyle support in relation to steroid-induced diabetes. **6.6** Describe clinical advice in relation to steroid-induced diabetes. **6.7** Explain the importance of professional accountability when supporting adults with steroid-induced diabetes. **6.8** Explain the importance of record-keeping when supporting adults with steroid-induced diabetes. **6.9** Explain the importance of appropriate escalation when supporting adults with steroid-induced diabetes.
7. Understand professional practice, boundaries and referral when supporting individuals with secondary diabetes.	**7.1** Describe the role of the practitioner when supporting adults with secondary diabetes in non-clinical settings. **7.2** Outline the importance of working within scope of practice when supporting adults with secondary diabetes. **7.3** Describe situations in which referral may be required when supporting adults with secondary diabetes. **7.4** Describe situations in which signposting may be required when supporting adults with secondary diabetes. **7.5** Describe appropriate lifestyle support in relation to secondary diabetes. **7.6** Describe clinical advice in relation to secondary diabetes. **7.7** Explain the importance of professional accountability when supporting adults with secondary diabetes. **7.8** Explain the importance of record-keeping when supporting adults with secondary diabetes. **7.9** Explain the importance of appropriate escalation when supporting adults with secondary diabetes.
8. Understand professional practice, boundaries and referral when supporting individuals with maturity onset diabetes of the young (MODY).	**8.1** Describe the role of the practitioner when supporting adults with MODY in non-clinical settings. **8.2** Outline the importance of working within scope of practice when supporting adults with MODY. **8.3** Describe situations in which referral may be required when supporting adults with MODY. **8.4** Describe situations in which signposting may be required when supporting adults with MODY. **8.5** Describe appropriate lifestyle support in relation to MODY. **8.6** Describe clinical advice in relation to MODY. **8.7** Explain the importance of professional accountability when supporting adults with MODY. **8.8** Explain the importance of record-keeping when supporting adults with MODY.

	8.9 Explain the importance of appropriate escalation when supporting adults with MODY.
9. Understand how professional practice, boundaries and referral may differ across forms of diabetes.	**9.1** Outline how professional practice requirements may differ across forms of diabetes in adult support settings. **9.2** Explain how differences in presentation may influence referral decisions. **9.3** Explain how differences in support needs may influence referral decisions. **9.4** Explain how differences in presentation may influence signposting decisions. **9.5** Explain how differences in support needs may influence signposting decisions. **9.6** Describe scope-of-practice considerations associated with different forms of diabetes. **9.7** Explain the risks of applying general support approaches across different forms of diabetes. **9.8** Explain the importance of diabetes-specific awareness in maintaining safe professional practice. **9.9** Explain the importance of diabetes-specific awareness in maintaining ethical professional practice. **9.10** Explain the importance of diabetes-specific awareness in maintaining effective professional practice.

UNIT 5: Understanding Professional Practice, Boundaries and Referral in Diabetes Support - Content Amplification (Delivery and Assessment Guidance)

Level: 2 | GLH: 28 | Credits: 4

Learning Outcomes 1 – 9: Professional Practice, Scope of Practice & Referral Pathways (AC 1.1 – 1.9, 2.1 – 2.9, 3.1 – 3.9, 4.1 – 4.9, 5.1 – 5.9, 6.1 – 6.9, 7.1 – 7.9, 8.1 – 8.9, 9.1 – 9.10)

Syllabus Content (Range)

- Scope of Practice & Non-Clinical Practice (LO1 – LO8): Differentiating non-clinical wellness support from clinical diagnosis, medical treatment, or prescription; professional accountability, record-keeping, GDPR compliance, and client consent.
- Referral, Signposting & Escalation (LO1 – LO9): Identifying clinical emergency red flags (severe hypoglycemia, suspected DKA, hyperosmolar hyperglycaemic state / HHS, foot ulcers, acute visual changes); formal referral protocols to Multidisciplinary Teams (GPs, Diabetes Specialist Nurses, Registered Dietitians, Podiatrists).

Delivery and Assessment Guidance

- Delivery: Clinical safety seminars analysing real-world emergency scenarios, escalation pathways, and professional record-keeping standards.
- Assessment: Portfolio assignment detailing professional boundaries, signposting pathways, and completing mock referral documentation.

Suggested Types of Evidence

- Written report on scope of practice and legal/ethical responsibilities.
- Completed professional escalation and referral case study documentation.

Unit 6 - Understanding Risk, Progression and Long-Term Health Implications of Diabetes

Learning Outcomes	Assessment Criteria
1. Understand the risk, progression and long-term health implications of Type 2 Diabetes.	**1.1** Describe the key risk factors associated with the development of Type 2 Diabetes in adults. **1.2** Describe the key risk factors associated with the progression of Type 2 Diabetes in adults. **1.3** Outline how Type 2 Diabetes may affect metabolic function over time. **1.4** Outline how Type 2 Diabetes may affect blood glucose control over time. **1.5** Describe the longer-term health implications associated with Type 2 Diabetes in adults. **1.6** Describe early metabolic concerns associated with Type 2 Diabetes. **1.7** Describe longer-term health implications associated with Type 2 Diabetes. **1.8** Explain the importance of early intervention in reducing long-term health impact in adults with Type 2 Diabetes.
2. Understand the risk, progression and long-term health implications of Type 1 Diabetes in adults.	**2.1** Describe the key risks associated with long-term management of Type 1 Diabetes in adults. **2.2** Outline how unstable blood glucose regulation may affect long-term health in adults with Type 1 Diabetes. **2.3** Describe the longer-term health implications associated with Type 1 Diabetes in adults. **2.4** Describe acute concerns associated with Type 1 Diabetes. **2.5** Describe longer-term implications associated with Type 1 Diabetes. **2.6** Explain the importance of consistent management in reducing long-term health impact in adults with Type 1 Diabetes.
3. Understand the risk, progression and long-term health implications of prediabetes.	**3.1** Describe the key risks associated with prediabetes in adults. **3.2** Outline how prediabetes may progress towards Type 2 Diabetes. **3.3** Describe the longer-term health implications associated with unmanaged prediabetes. **3.4** Describe prediabetes as an early blood glucose regulation concern. **3.5** Describe Type 2 Diabetes as a long-term condition. **3.6** Explain the importance of early intervention in reducing progression in adults with prediabetes. **3.7** Explain the importance of early intervention in reducing long-term health impact in adults with prediabetes.

4. Understand the risk, progression and long-term health implications of latent autoimmune diabetes in adults (LADA).	**4.1** Describe the key risks associated with LADA in adults. **4.2** Outline how LADA may progress over time in relation to declining insulin production. **4.3** Describe the longer-term health implications associated with LADA in adults. **4.4** Describe the progression pattern associated with LADA. **4.5** Describe the progression pattern associated with Type 1 Diabetes. **4.6** Describe the progression pattern associated with Type 2 Diabetes. **4.7** Explain the importance of recognising progression in LADA in relation to longer-term health impact.
5. Understand the long-term implications of a history of gestational diabetes.	**5.1** Explain the longer-term health risks associated with a history of gestational diabetes. **5.2** Outline how gestational diabetes may increase future risk of Type 2 Diabetes in adults. **5.3** Explain the importance of ongoing health awareness following gestational diabetes. **5.4** Describe the short-term nature of gestational diabetes. **5.5** Describe the longer-term health implications associated with gestational diabetes. **5.6** Explain the importance of sustained health monitoring following gestational diabetes. **5.7** Explain the importance of early intervention in reducing future long-term health impact in adults with a history of gestational diabetes.
6. Understand the risk and long-term health implications of steroid-induced diabetes.	**6.1** Describe the key risks associated with steroid-induced diabetes in adults. **6.2** Outline how corticosteroid use may contribute to blood glucose disruption in steroid-induced diabetes. **6.3** Describe the potential longer-term health implications associated with steroid-induced diabetes in adults. **6.4** Describe the risk pattern associated with steroid-induced diabetes. **6.5** Describe the risk pattern associated with Type 2 Diabetes. **6.6** Explain the importance of awareness of steroid-induced diabetes in reducing long-term health impact.
7. Understand the risk and long-term health implications of secondary diabetes.	**7.1** Describe the key risks associated with secondary diabetes in adults. **7.2** Outline how underlying medical conditions may contribute to the development of secondary diabetes. **7.3** Outline how underlying medical conditions may contribute to the longer-term implications of secondary diabetes. **7.4** Describe the health implications associated with secondary diabetes in adults. **7.5** Describe the risk pattern associated with secondary diabetes. **7.6** Describe the risk pattern associated with primary forms of diabetes.

	7.7 Explain the importance of recognising secondary diabetes in reducing long-term health impact through ongoing management.
8. Understand the risk and long-term health implications of maturity onset diabetes of the young (MODY).	**8.1** Describe the key risks associated with MODY. **8.2** Outline how MODY may influence long-term health depending on presentation. **8.3** Outline how MODY may influence long-term health depending on management needs. **8.4** Describe the longer-term health implications associated with MODY. **8.5** Describe the risk pattern associated with MODY. **8.6** Describe the risk pattern associated with Type 1 Diabetes. **8.7** Describe the risk pattern associated with Type 2 Diabetes. **8.8** Explain the importance of awareness of MODY in recognising long-term health implications.
9. Understand how risk, progression and long-term health implications may differ across forms of diabetes.	**9.1** Outline how risk may differ across forms of diabetes in adults. **9.2** Outline how progression may differ across forms of diabetes in adults. **9.3** Outline how long-term health implications may differ across forms of diabetes in adults. **9.4** Explain how differences in causation may influence longer-term outcomes. **9.5** Explain how differences in insulin function may influence longer-term outcomes. **9.6** Explain how differences in blood glucose stability may influence longer-term outcomes. **9.7** Describe progression patterns associated with different forms of diabetes. **9.8** Describe long-term health priorities associated with different forms of diabetes. **9.9** Explain the risks of applying general assumptions across different forms of diabetes. **9.10** Explain the importance of diabetes-specific awareness in supporting earlier intervention. **9.11** Explain the importance of diabetes-specific awareness in supporting improved long-term outcomes.

UNIT 6: Understanding Risk, Progression and Long-Term Health Implications of Diabetes - Content Amplification (Delivery and Assessment Guidance)

Level: 2 | GLH: 30 | Credits: 5

Learning Outcomes 1 – 9: Long-Term Complications, Risk Mitigation & Progression Dynamics (AC 1.1 – 1.8, 2.1 – 2.6, 3.1 – 3.7, 4.1 – 4.7, 5.1 – 5.7, 6.1 – 6.6, 7.1 – 7.7, 8.1 – 8.8, 9.1 – 9.11)

Syllabus Content (Range)

- Pathology of Microvascular & Macrovascular Complications (LO1 – LO8): Microvascular damage (retinopathy, nephropathy, neuropathy / diabetic foot risk); macrovascular damage (cardiovascular disease, stroke, peripheral arterial disease); metabolic progression from prediabetes to microvascular complications.
- Early Intervention & Disease Management (LO3, LO5, LO9): Impact of early glycemic control and sustained lifestyle modification on reducing long-term organ damage; understanding progression patterns across different diabetes classifications; dangers of unmanaged blood glucose variability.

Delivery and Assessment Guidance

- Delivery: Lectures supported by visual anatomical models and clinical research evidence illustrating microvascular/macrovascular degenerative pathways.
- Assessment: Portfolio research assignment evaluating the vascular complications of diabetes and the role of early lifestyle intervention in mitigating long-term risk.

Suggested Types of Evidence

- Long-term health implications research assignment.
- Case study evaluation on early intervention strategies.