



County Durham and Darlington Integrated Diabetes Collaboration

Thank you



3D

DURHAM
DALES
DIABETES.
PROJECT





A local problem

- 3 CCGs
- 3 Acute NHS Trusts
- 7 Localities
- 7 GP Federations
- 81 GP Practices
- 640 000 population
- 41168 people with diabetes





A case for change

- Average health outcomes, poor in some areas
 - Microvascular complications
- Significant variation between and within localities
- Unsustainable services in light of increasing prevalence
- Fragmented services
 - Duplication
 - Gaps
 - Barriers primary vs secondary care



“You’re sick of this? Just try to imagine how we feel.”

County Durham and Darlington - Integrated Diabetes Service

Diabetes Governance
Group members:

CCGs

Acute Trusts

GP Federations

Public Health

Diabetes UK

System Manager

Working Groups with dedicated
time from clinicians:

Prescribing
Rules

Clinical
Protocols

Patient Records

Workforce
Planning

3rd sector
Navigation

Cost Tracking

Unstable Complications

Children / Type 1s / Kidney
disease / Pregnant women /
insulin pumps / Foot
Managed in **Hospital setting**

Changing Therapy

Primary Care (GP/Nurse) led
defined care package

Off Target

Primary Care (GP/Nurse) led
defined care package

On Target

Primary Care (GP/Nurse) led
defined care package

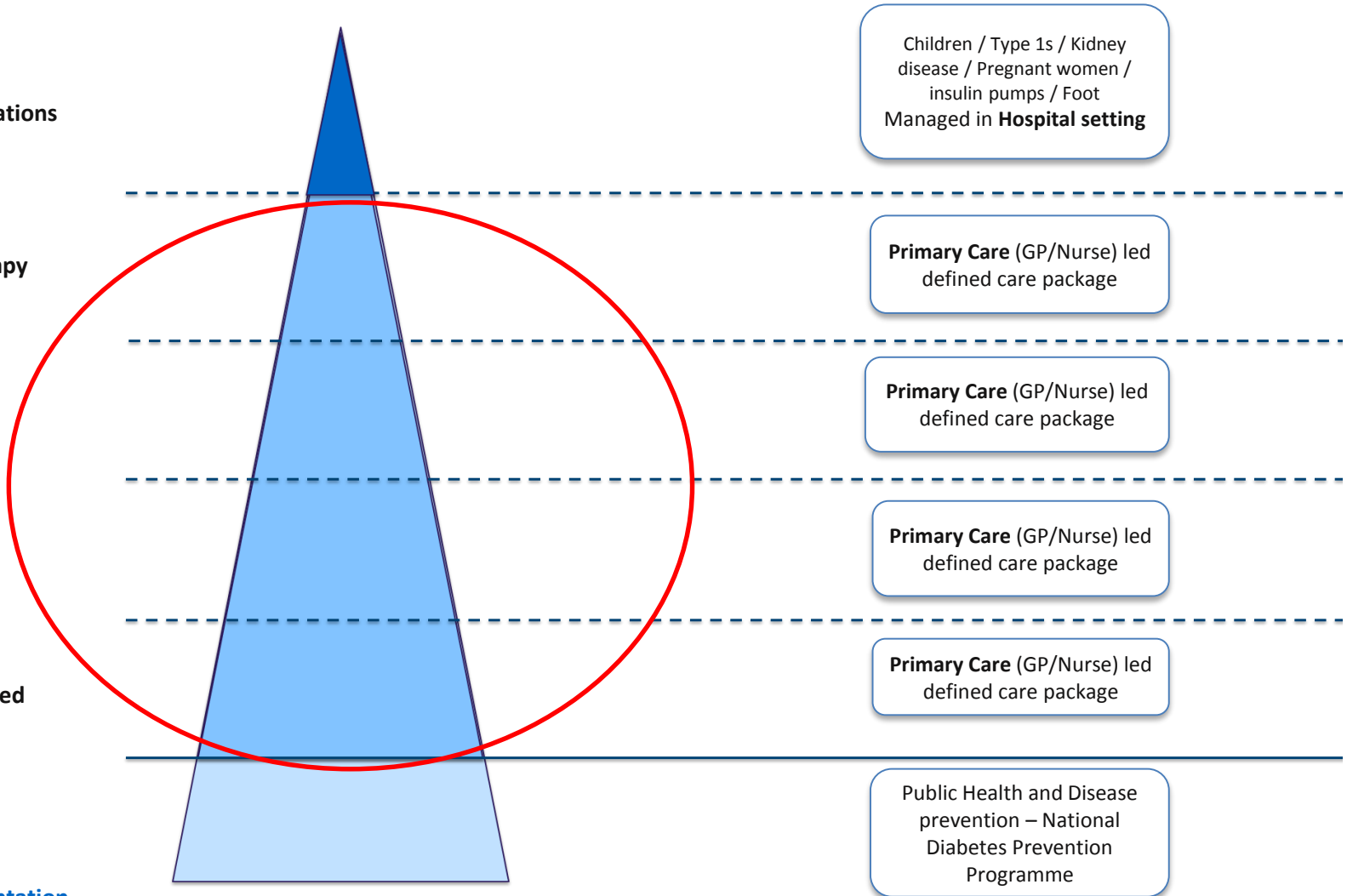
Newly Diagnosed

Primary Care (GP/Nurse) led
defined care package

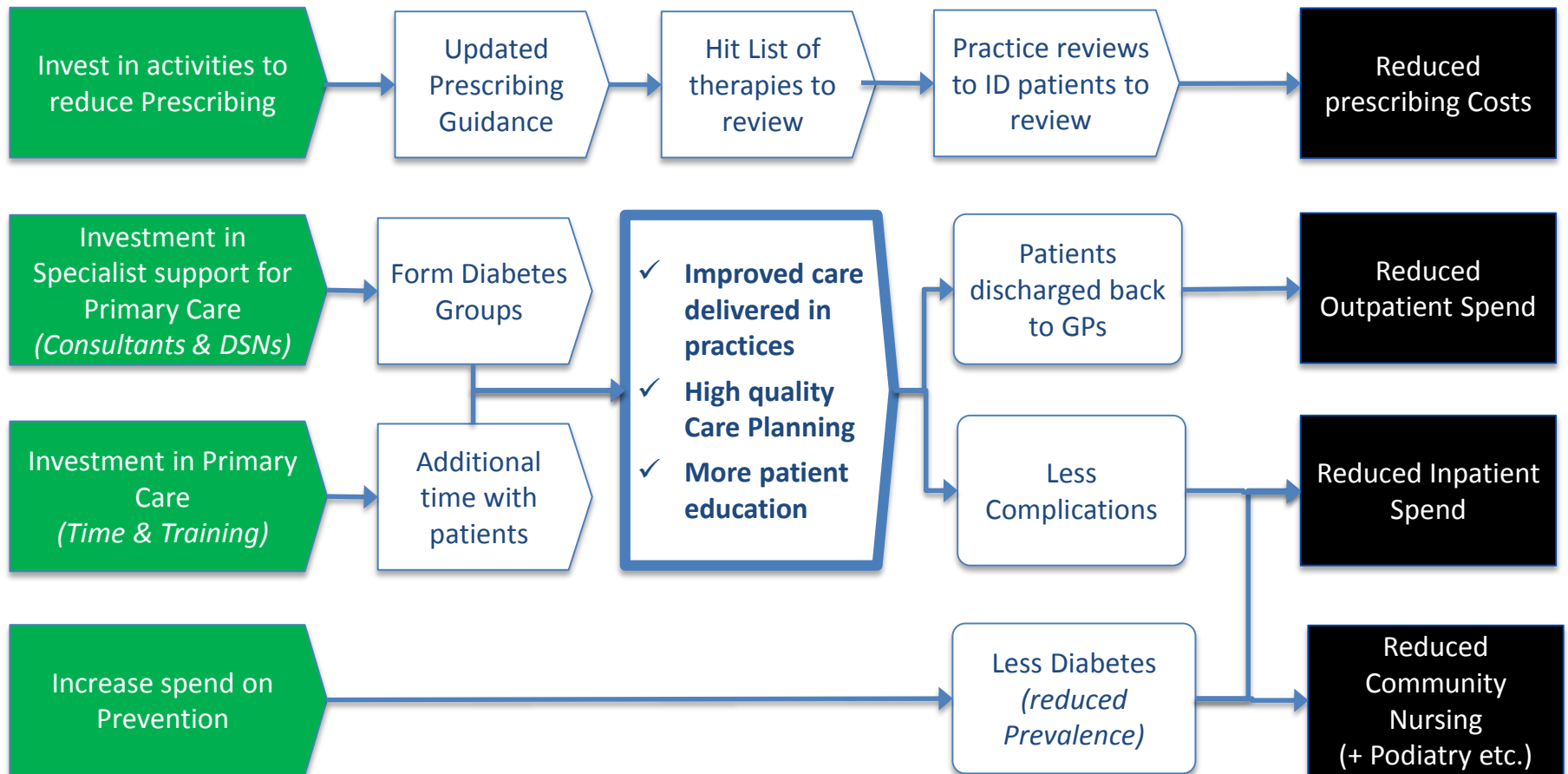
At risk

Public Health and Disease
prevention – National
Diabetes Prevention
Programme

Patient segmentation



Financial Benefit Logic for new model of care





A system-wide solution

- New Governance structure
- Data
- New approaches to contracting
- Commitment to reinvest in diabetes



Outcomes

- Primary care
 - Regular integrated clinics happening in 81 GP practices
 - 203 staff in primary care have accessed formal learning opportunities to enhance their diabetes knowledge and skills
 - 100% practices achieved Care Basic, 91% are Care + or higher, 65% have reached Care ++
- Secondary care
 - 400 fewer patients attending hospital for diabetes OP appointments
 - Hypo admissions reduced from 4.1 to 3.0 per 1000 pts
 - Rates of admissions due to diabetic co-morbidities continue to fall with 459 fewer admissions
- System-wide
 - Decrease in cost per patient and total prescribing.
 - New contracts , new partnerships, breakdown of organisational barriers.

What's QiC done for us?



- Changed contracting within our Trust!
- Raised our profile in the hospital and across the CCGs
- And of course ...In the region
- Spread the message of Alliance contracting around the country – a five year contract!!