



The Super Six Diabetes care model:

Integration: the proverbial unicorn, or not?

Dr Partha Kar

Portsmouth Experience 2009



- Catchment ~**630,000**
- Register ~**29,000**
- Very mixed socio-economic group
- Specialty Diabetes Team (SDT) based in Acute Trust
- Portsmouth City PCT, SE Hampshire PCT and 3 CCGs

SE Hampshire:

- 1.6 WTE Nurse
- 1 session/week with GPs with a special interest

Portsmouth:

- No intermediate team

Challenges for locality:



- Wage bill, financial envelope of acute Trust
- What does a chronic disease specialist ACTUALLY do in an acute Trust?
- Continued activity in spite of not being commissioned i.e. outside agreed N/F ratio/ demand management etc
- No control over demand management- no Community team in 1 PCT /CCG; No Consultant input in Hampshire CDT.
- No huge drop in referral patterns, pockets of GP surgeries reluctant to “accept” patients with “higher complexity”.
- Inefficiencies in the traditional pathway as long term follow ups were conducted in secondary care clinics



Re-defining the role of a specialist...

- *Specialist*

- *Educator*

- *Leadership*

- *Accountability*

Specialist diabetes: The Super Six (WITHIN ACUTE TRUST)

1. A) **Patients in hospital** (20% of population pa)

In-patient care

Peri-operative care

B) **MDT services:**

- 2. Antenatal diabetes
- 3. Foot diabetes
- 4. Pumps
- 5. Adolescent/Type 1 Diabetes (poor control)
- 6. Renal (eGFR between 20-40 and less-in joint conjunction with Renal)




Situation locally...

- 52 week cover (Consultants)
- Phone service 5:30 – 7 pm Mon-Fri (based on GP advise)
- nhs.net email (24 hour response time)
- Visits to GP surgeries (service at GP discretion)- 2/ year
- Pre-existing nurse services continues
- *(Intermediary care role, DESMOND, Education programme for HCPs, Involved in planning training for carers to administer insulin in the community)*
- *No case holding*
- Key Performance indicators: short term / long term



Situation locally..

- Patients being discharged- BUT with GP consent AND patient consent
- **Visits:**
 - Virtual clinics (case-based discussions)
 - Audit
 - Educational session on area(s) of diabetes management of surgeries choice
 - Patient review
 - Review of database to discuss patients regards QoF targets

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- Portsmouth PCT / CCG agrees to Community diabetes tender: August 2012
 - Same model of care
 - No post code lottery
 - Contract signed- due to start from June
 - Solent NHS Trust
 - Same format, discharges started
 - 3 providers in region- contracts with all 3, Consultant body integrated link between all organisations

Since November 2011...



- **989** (93%) patients discharged from general diabetes secondary care– with a follow up appointment costing £99. This represents **£97,000** saved p.a.
- 57 patients transferred to “super six” clinics and 15 needed clinic review pending discharge.
- General diabetes referral down from **15/month to 1/month**

Since November 2011...

Telephone calls:


- Nurses: 1326
- Doctors: **101**

Emails:

- Nurses: 437
- Consultants: 139
- Total referrals to specialist care: 8

Response rate within 24 hours: 99.7%

- Number of GP surgery visits completed: 52 (52)
- 2nd visit complete
- 3rd / 4th visits in place

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Patient feedback



- **89%** of patients strongly feel positive benefit of the Community Diabetes Team
- **95%** strongly agreed that the Diabetes Specialist Nurses were professional in their manner and a benefit to the patient and their partner/carer.

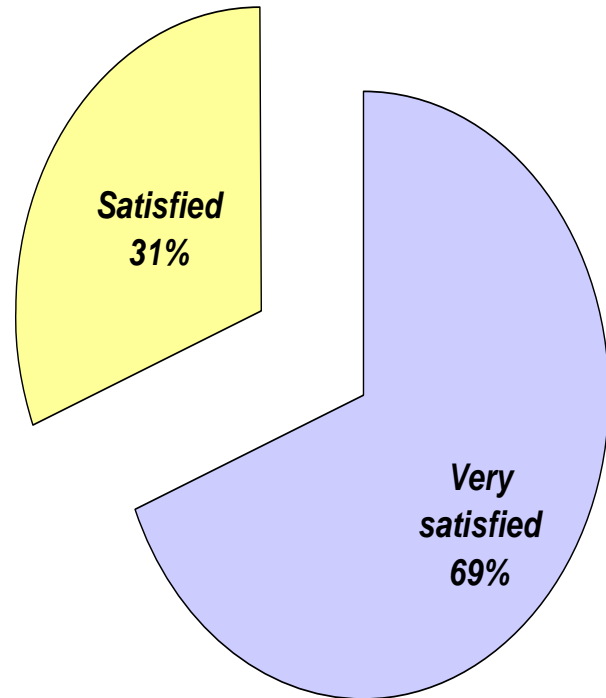
Primary care feedback...

- Would you like service to continue?

91% YES

9% MAYBE (“too early to see the full impact of the service in improving diabetes care”)

- High level of satisfaction from Practice Nurses using service:
- *"Invaluable" / "thank you for very helpful and quick response" / "it's great knowing we have you there" / "It's always very helpful"*



Satisfaction with CDT

Recognition:



- **BMJ Group Awards 2013:**
Short listed Diabetes Team & Clinical Leadership Team of Year
- **HSJ Awards 2012** Short listed : Managing Long term conditions
- **Quality in Care Awards 2012**
Winner: Network Care Initiative
 Best Commissioning Initiative
Short listed: Best cross organisational partnership
- **Care Integration Awards 2012 :** Winner
- **NHS Innovations South East 2011:** Runner up
- **Quality in Care Awards 2011:** Silver award- best team of year
- **Healthcare and Social Awards 2010:** Winner across acute sector

2013



- Catchment ~**670,000**
- Register ~**32,000**
- Very mixed socio-economic group
- Specialty Diabetes Team (SDT) based in Acute Trust (*Super Six*)

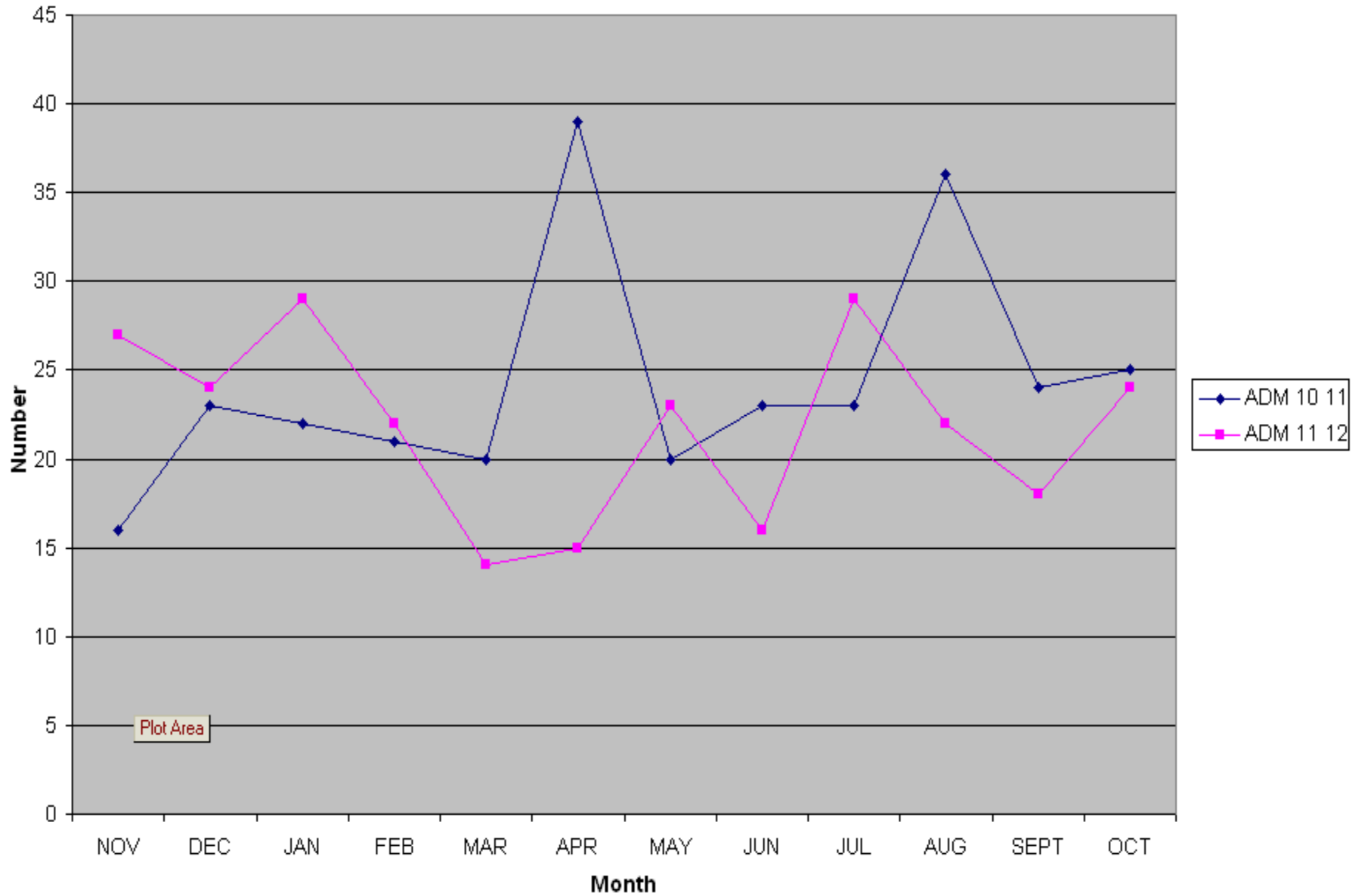
SE Hampshire:

- 2.5 WTE Nurse *

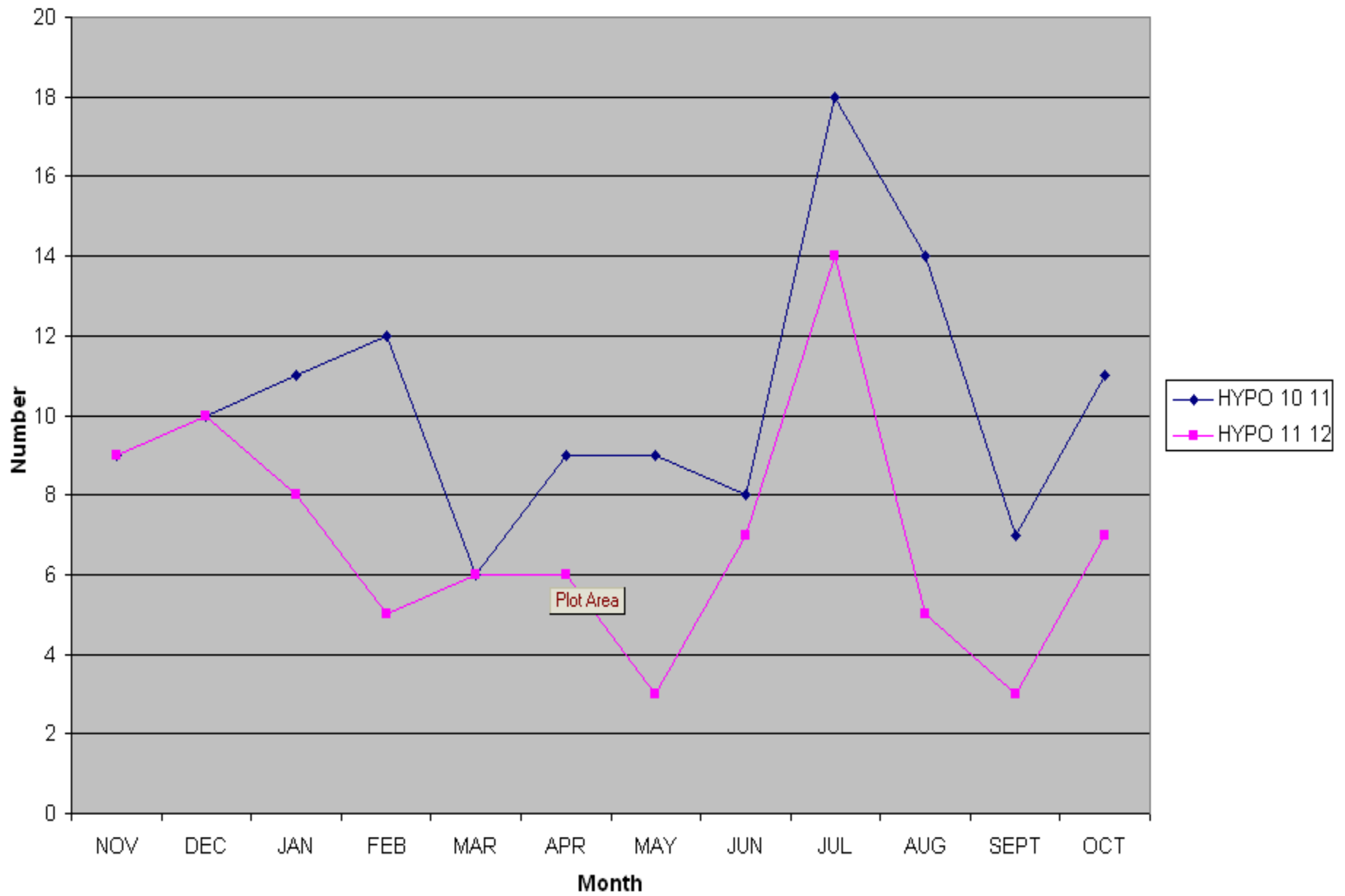
Portsmouth:

- 1 WTE Nurse
- Consultant team within acute and community providers
- **Total GP surgeries: 80**

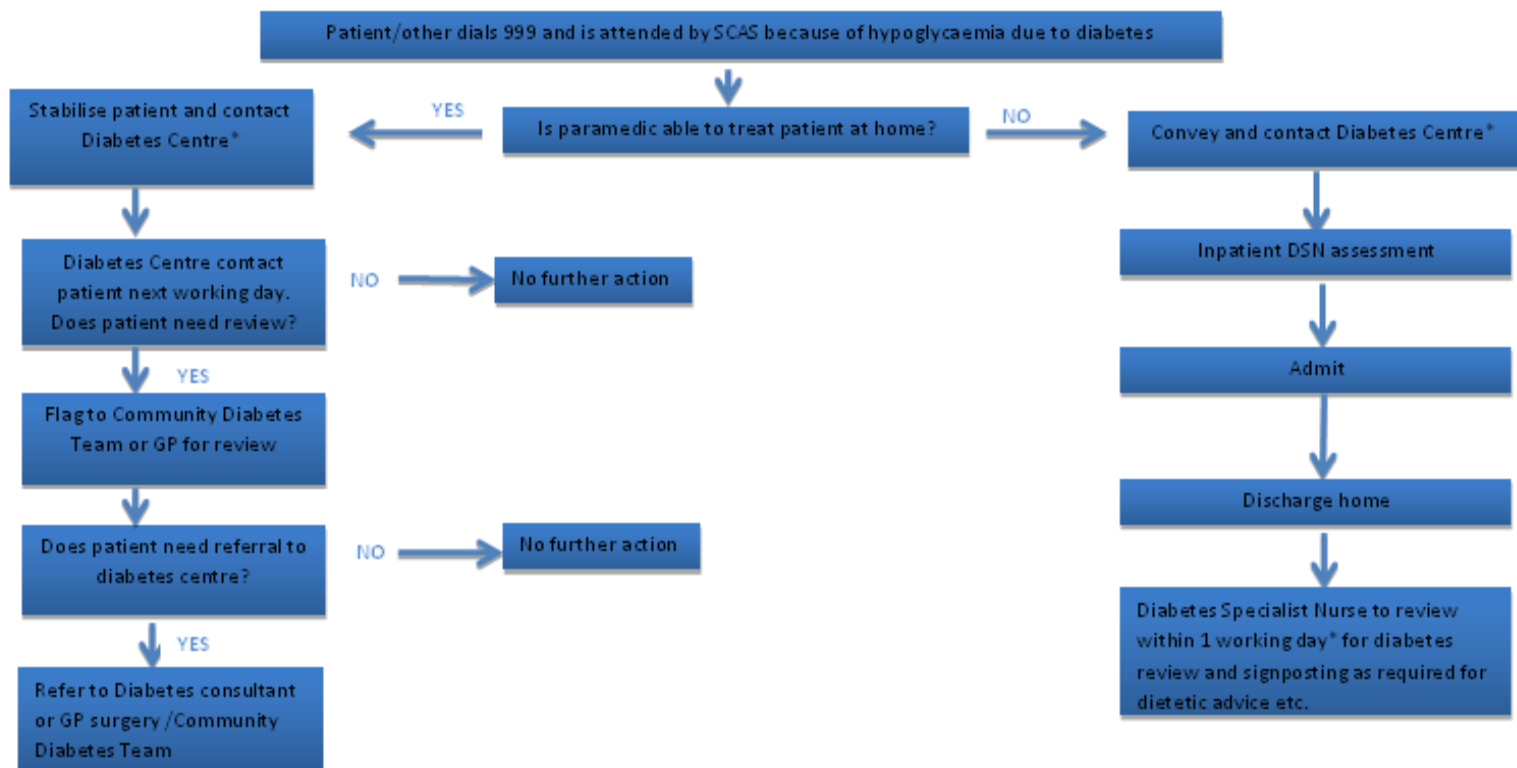
Admission



HYP0 DATA



Emergency Call out Procedure for patients with Diabetes Experiencing Hypoglycaemia



*SCAS to leave message on 24hr phone line (no. to be agreed). This will be picked up by a member of the Community Diabetes team. Message to include:

- Patient Name/ address/ details of call/treatment/ no. attendances/ GP if known/ written summary of call out (inc. outcome to be faxed within 24hrs of ambulance attendance)
- DSN to compile database of all calls including time received (72 hours in event of bank holiday)

Data so far?



Between the period of November 2010 to November 2011 (pre launch of this hypo pathway) there were 124 attendances and 85 admissions

Between the period of November 2011 to November 2012 there were 83 attendances and 63 admissions

33% drop of attendances secondary to severe hypoglycaemia and an associated 20% drop of admissions subsequently.

PROGRAMME OF FREE DIABETES PROFESSIONAL EDUCATION 2013/14

(Refundable Deposit Required)

<p>Thurs 12 Sept 2013 09.00-12.30 St James' Hospital Wed 15 Jan 2014 09.00-12.30 Queen Alexandra Hospital Fri 11 April 2014 09.00-12.30 Gosport Memorial Hospital Wed 18 June 2014 09.00-12.30 Fareham Community Hospital</p> <p>DIABETES PHARMACOLOGY <i>Venues: Various as above (Half-day course, choice of dates)</i></p>	<p>Tues 15 Oct 2013 09.00-13.00</p> <p>DIABETES FOR NON REGISTERED HEALTHCARE PROFESSIONALS <i>Venue: Queen Alexandra Hospital (Half-day course)</i></p>
<p>Fri 28 June / Fri 5 July 09.00-17.00 Cowplain Family Practice Wed 25 Sept / Wed 2 Oct 09.00-17.00 Brune Med Cen Gosport Wed 16 Oct – IMIT Update 12.30-17.00 Cowplain Family Practice Thurs 21 Nov / Thurs 5 Dec 09.00-17.00 St James' Hospital Tues 11 Mar / Tues 18 Mar 09.00-17.00 Queen Alexandra Hospital 2014</p> <p>IMIT (INJECTABLES) <i>Venues: Various as above (Two-day course, choice of dates)</i> <i>Further details & registration, email Caron Bell at caron.bell@nhs.net</i></p>	<p>Tues 5 Nov 2013 09.00-18.00 Wed 6 Nov 2013 09.00-13.00</p> <p>DIABETES IN HOSPITAL INPATIENTS <i>Venue: St James' Hospital (1 ½ day course -attendance required on both days)</i></p>
<p>Wed 21 Aug 2013 13.30-17.00 Gosport Memorial Hospital Wed 16 Oct 2013 13.30-17.00 St James' Hospital Wed 11 Dec 2013 13.30-17.00 Queen Alexandra Hospital Thurs 13 Mar 2014 13.30-17.00 Fareham Community Hospital</p> <p>DIABETIC FOOT DISEASE <i>Venues: Various as above (Half-day course, choice of dates)</i></p>	<p>Fri 17 Jan 2014 14.00-17.00</p> <p>DIABETES IN PREGNANCY <i>Venue: Queen Alexandra Hospital (Half-day course)</i></p>
<p>Mon 23 Sept 2013 09.00-16.30 Queen Alexandra Hospital Mon 20 Jan 2014 09.00-16.30 St James' Hospital</p> <p>DIABETES CARE FOR THE HOUSEBOUND RESIDENTIAL & CARE HOMES <i>Venues: Various as above (One-day course, choice of dates)</i></p>	<p>Wed 20 Nov 2013 09.00-11.00 Thurs 13 Mar 2014 09.00-11.00</p> <p>ERECTILE DYSFUNCTION AND DIABETES <i>Venue: Queen Alexandra Hospital (2-hour course, choice of dates)</i></p>
<p>Wed 28 Aug 2013 13.00-17.00 Queen Alexandra Hospital Wed 18 Dec 2013 13.00-17.00 Petersfield Community Hosp Wed 26 Feb 2014 13.00-17.00 St James' Hospital Wed 14 May 2014 13.00-17.00 Gosport Memorial Hospital</p> <p>EFFECTIVE MONITORING IN DIABETES</p>	<p>PROGRAMME UPDATED 4 SEPTEMBER 2013</p>

"Portsmouth Sweet Meet"

A conference for people with Type 1 diabetes

Saturday 11th May 2013

9am-1pm Goddard Centre,

St James Hospital, Locksway Road, Portsmouth, PO4 8LD

Visit our
information
stands

Help shape
future service
developments

Hear one
person's
journey with
with Type 1
diabetes

**Refreshments at 9am
Start at 9.30am**

"Speed date" with
the health care team
asking them any
questions about
your diabetes &
care provision

Network with
other people with
Type 1 diabetes

Find
out what's on
the horizon for
treating
Type 1
diabetes

Free of Charge

**To book your place please call
Diabetes Centre, Queen Alexandra Hospital on:
023 92286260**

**Please note this conference is for people with Type 1 diabetes;
aged 17 years and over**

Paediatric Team: consider transition between 16 – 19 yrs

Transition Clinic:

- 1:1 appointments for welcome and introductions
- Provide with Welcome Pack and discuss contents
- Explain group education with parents
- Explain 1:1 appointments and ad-hok availability
- Show topic assessment sheets

Group Education (max 3/12 later):

- Two simultaneous groups
 - ↓
 - YPs
 - ↓
 - Parents
- Completion of post group topic assessment sheet in preparation for forthcoming 1:1 appointment

1:1 Appointment (max 3/12 later):

- Use completed post group topic assessment sheet to guide consultation

Subsequent 1:1 Appointments:

- Reception or clinic nurse to provide YP with pre-clinic topic assessment sheet to complete and guide consultation

So far...

- DNA rates down from 45% to 10-15%
- 7 “frequent-flyers” ...down to 1
- Sessions in Universities on alcohol, sex
- Admission rates- both DKA and hypos down from 2011 to 2012

Building 003
Fort Southwick
James Callaghan Drive
Fareham
Hampshire,
PO17 6AR

20th April 2012

Dear Community Diabetes Team

We are writing to congratulate you all formally following the 6 month community diabetes review meeting held on the 19th April 2012. The community diabetes team has gone from strength to strength since its launch, and the feedback received from both primary care and patients has been excellent.

We would like to take this opportunity to thank you all for accepting the challenge of working together as an integrated team to improve the quality of care provided to patients with diabetes across South East Hampshire. As you know part of the success of team has been measured against the number of discharges from Portsmouth Hospitals NHS Trust, and we are pleased to announce all your hard work and effort has ensured the target has been met.

Both Barbara Rushton (Clinical Commissioning lead for South Eastern Hampshire) and Koyih Tan (Clinical Commissioning Lead for Fareham and Gosport) would like to take this opportunity to personally thank you for all the hard work and effort you have put in to make this team a success, and both proudly promote your service within their respective commissioning areas.

We look forward to working with you in the future.

Yours sincerely,



Innes Richens
Executive Director



Dr Barbara Rushton
GP Clinical Commissioner
East Hants



Dr Koyih Tan
GP Clinical Commissioner
Fareham and Gosport

Community Diabetes Team (South East)
Practice Engagement Update – March 2013

2.0 Next Steps

Action	Deadline	Lead
Review updated information submitted by diabetic community team	11/3/13	Sarah Malcolm (SM)
Validate 10/11 and 11/12 data to ensure all diabetic activity captured	15/3/13	Ted Mollart (TM)
Obtain accurate data on 12/13 activity for both OPD referrals and emergency admissions	15/3/13	TM
Extrapolate data to confirm that the practices identified have seen a reduction in both OPD referrals and emergency admissions	15/3/13	TM
Promote the community diabetic service to all practices via weekly tips and at clinical cabinet	29/3/13	SM
Personal letter to be sent from Barbara Rushton/Andy Douglas to lead GP in the relevant practices that have yet to respond to the invitation	29/3/13	SM
Commissioners to contact practice managers directly who have accepted the offer of a team visit but who have as yet been unable to co-ordinate dates to raise the importance	15/3/13	SM
Commissioners to meet with Partha Karr	12/3/13	SM
Identify with the community team if there is a similar problem for Fareham and Gosport CCG that needs further investigation	15/3/13	SM

Sarah Malcolm
Senior Commissioning Manager
Planned Care, Cancer, Long Term Conditions
06/03/13

1. Background

1.1 On 31st January 2013 the Southern Health community diabetes team wrote to Barbara Rushton highlighting a number of practices in South East Hampshire who have, to date, not fully engaged with the community diabetes team. The practices identified are as follows:


- o The Staunton Surgery
- o The Village Practice
- o Havant Surgery
- o The Bosmere Practice
- o Stakes Lodge Surgery
- o Rowlands Castle Surgery
- o The Elms Practice, Hayling Island

1.2 In order to fully investigate this issue the commissioning team have contacted the community diabetes admin team. The updated position is detailed below:



Surgery	Current State	Next Steps
Staunton Surgery	Practice responded but Consultant was unavailable on dates	Suggest Dr Goulder contacts Lead GP directly
Village Practice	Dr Goulder contacted practice – no response received	Analysis being undertaken to assess whether practice are already compliant or require additional support from community diabetes team
Havant Surgery	Contacted practice four times	Practice was in transition with practice manager post. Suggest Dr Goulder contacts Lead GP directly
Bosmere Practice	Date booked and confirmed	Situation will be reviewed with provider to confirm outcome of visit.
Stakes Lodge	Date booked and confirmed	Situation will be reviewed with provider to confirm outcome of visit.
Rowlands Castle	Date booked and confirmed	Situation will be reviewed with provider to confirm outcome of visit.
The Elms Practice	Date now in diary just waiting for consultant to confirm	Situation will be reviewed with provider to confirm outcome of visit.

1.3 The commission team has also requested additional data to confirm the current status of the practices in relation to referrals into the system and a meeting has been arranged with Partha Karr to discuss engagement.



"We don't get a chance to do that many things, and every one should be really excellent. Because this is our life.

Life is brief, and then you die, you know?

And we've all chosen to do this with our lives. So it better be damn good. It better be worth it."