

Service review of diabetes

Supporting self care for adults with diabetes

Framework of assessment

Assessment

The primary care trust (PCT) ensures that they are commissioning services to enable adults (aged 17 and over) with diabetes to care for themselves (self care). This will result in good outcomes for adults with diabetes by ensuring that they:

- are looking after their condition
- feel supported to self care through care planning, information and education
- have key tests and measurements carried out

Rationale

Diabetes was identified as a priority area by the Healthcare Commission for a number of reasons, including:

- the large numbers of adults with diabetes – there are over two million adults with diabetes in the UK, which is equivalent to 3% of the population. It is estimated that there are another three-quarters of a million that are not yet diagnosed
- the increasing incidence of diabetes, particularly type 2 diabetes, in all age groups and populations
- the unequal way that diabetes affects the population – there are certain communities that are at higher risk of developing diabetes, such as the South Asian and the African Caribbean populations
- the reduced life expectancy experienced by adults with diabetes – life expectancy is reduced on average by 20 years in those with type 1 diabetes and up to 10 years in those with type 2 diabetes. One in seven deaths can be attributed to diabetes
- the high cost of treating diabetes – the NHS spends around 5% of its budget, around £10 million every day, treating diabetes and its effects
- the substantial evidence about what constitutes good care for adults with diabetes, which is documented in the Diabetes National Service Framework and NICE guidelines. These provide robust frameworks against which to assess the progress being made in delivering services for adults with diabetes

Unit of assessment

We will be assessing all PCTs in existence on March 31st 2007.

Assessor

The service review of diabetes is being carried out by the Healthcare Commission.

Collection of data

The sources of data are:

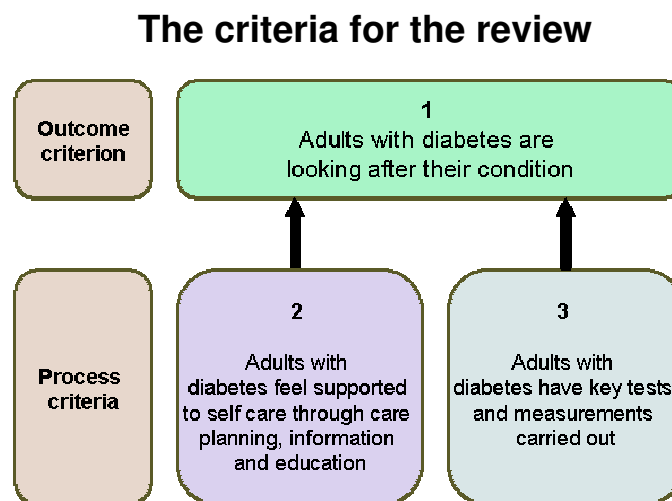
- the Healthcare Commission's national patient survey of adults with diabetes
- the Department of Health's Quality and Outcomes Framework (QOF)
- the Department of Health's Hospital Episode Statistics (HES)

Resource requirements for PCTs

Every PCT will be asked to nominate a lead person to be responsible for signing off the national data and for all queries about the local results. There is no bespoke data collection.

Criteria

We are assessing PCTs against three criteria.



Scoring

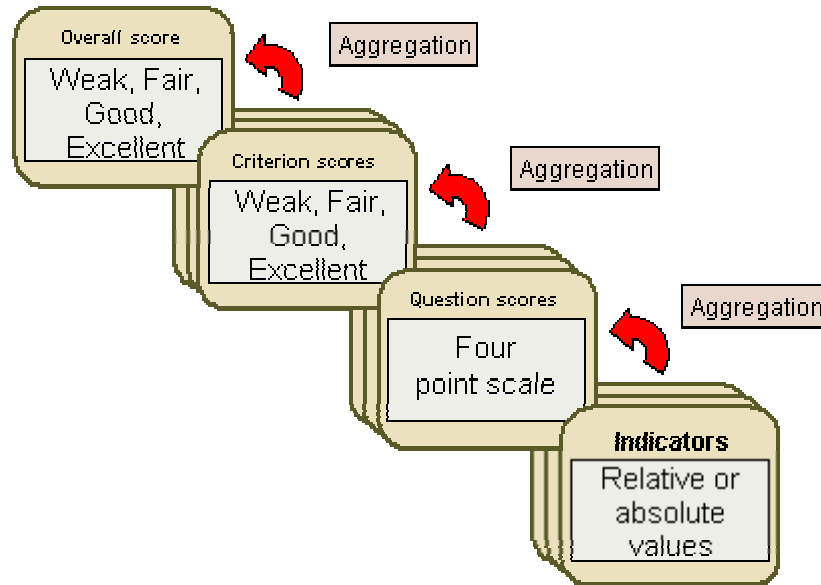
All PCTs will have their performance assessed against each of the three criteria outlined in the criteria, questions and information framework. The overall performance, as well as each criterion, is measured on a scale of one to four:

- one (weak) – performance that does not meet minimum requirements or the reasonable expectations of patients and the public
- two (fair) – performance that meets minimum requirements and the reasonable expectations of patients and the public
- three (good) – performance that goes beyond minimum requirements and the reasonable expectations of patients and the public

- four (excellent) – performance that goes well beyond minimum requirements and the reasonable expectations of patients and the public. A leader in this aspect of performance

The score for each criterion will be decided by the outcomes for each question. The overall performance rating across the whole framework of assessment will be decided by aggregating the scores for the individual criteria.

How is assessment rated?



Standards

By carrying out the service review of diabetes, we will meet our statutory requirement to assess progress by healthcare organisations towards delivering national service frameworks and achieving the core and developmental standards.

The Department of Health's *Standards for Better Health* that are relevant to this theme are:

Patient focus (C16, D9 and D10)

- C16 – healthcare organisations make information available to patients and the public on their services, provide patients with suitable and accessible information on the care and treatment they receive and, where appropriate, inform patients on what to expect during treatment, care and after care
- D9 – patients, service users and, where appropriate, carers receive timely and suitable information, when they need and want it, on treatment, care, services, prevention and health promotion and are: a) encouraged to express their preferences; and b) supported to make choices and share decisions about their own health care
- D10 – patients and service users, particularly those with long term conditions, are helped to contribute to planning of their care and are provided with opportunities and resources to develop competence in self care

Clinical and cost-effectiveness (C5a and D2a, D2b and D2d)

- C5 – healthcare organisations ensure that: a) they conform to NICE technology appraisals and, where it is available, take into account nationally agreed guidance when planning and delivering treatment and care
- D2 – patients receive effective treatment and care that: a) conform to nationally agreed best practice, particularly as defined in national service frameworks, NICE guidance, national plans and agreed national guidance on service delivery; b) take into account their individual requirements and meet their physical, cultural, spiritual and psychological needs and preferences; and d) is delivered by health care professionals who make clinical decisions based on evidence-based practice

The standards from the Diabetes National Service Framework that are relevant to this theme are:

- standard 3 – all children, young adults and adults with diabetes will receive a service which encourages partnership in decision-making, supports them in managing their diabetes and helps them to adopt and maintain a healthy lifestyle. This will be reflected in an agreed and shared care plan in an appropriate format and language.¹ Where appropriate, parents and carers should be fully engaged in this process
- standard 4 – all adults with diabetes will receive high-quality care throughout their lifetime, including support to optimise the control of their blood glucose, blood pressure and other risk factors for developing the complications of diabetes
- standard 7 – the NHS will develop, implement and monitor agreed protocols for rapid and effective treatment of diabetic emergencies by appropriately trained health care professionals. Protocols will include the management of acute complications and procedures to minimise the risk of recurrence
- standard 10 – all young adults and adults with diabetes will receive regular surveillance for the long-term complications of diabetes

The NICE guidelines that are relevant to this theme are:

- the care of adults with type 2 diabetes (2003)
- education for adults with diabetes (2003)
- the care of adults with type 1 diabetes (2004)

¹ The Diabetes Delivery Strategy (2002) states in paragraph 3.21 that "A care plan is at the heart of a partnership approach to care and a central part of effective care management. The process of agreeing a care plan offers adults active involvement in deciding, agreeing and owning how their diabetes will be managed. Whilst the overall goal is a genuine partnership, the person with diabetes must feel that they are comfortable with what is proposed and that they do not have to bear more responsibility than they wish."

Overview of the criteria, questions and information framework

Criteria	Questions	Number of scored indicators	Source of data
1 Adults with diabetes are looking after their condition	1.1 Are the key measurements for adults with diabetes at recommended levels and are emergency admission rates low?	Four	QOF and HES
	1.2 Do adults with diabetes feel that they are achieving their lifestyle targets?	Two	Survey of patients
	1.3 Do adults with diabetes feel knowledgeable about their diabetes?	Two	Survey of patients
2 Adults with diabetes feel supported to self care through care planning, information and education	2.1 Do adults with diabetes report that they have regular check-ups, feel involved and know what to do next?	Four	Survey of patients
	2.2 Do adults with diabetes report that they have received enough information, education and training to self care?	Six	Survey of patients and QOF
3 Adults with diabetes have key tests and measurements carried out	3.1 Do clinicians carry out key tests and measurements?	Nine	QOF
	3.2 Do adults with diabetes report that key tests and measurements are carried out?	Seven	Survey of patients
	3.3 Do adults with diabetes report that ALL key tests and measurements are carried out?	One	Survey of patients

Criteria, questions and information framework

Standards	Criteria 1	Questions	Information	Notes
NSF standards 3, 4, and 7 C16 D9 and D10 D2 a, b and d	Adults with diabetes are looking after their condition	1.1 Are the key measurements for adults with diabetes at recommended levels and are emergency admission rates low?	<p>1. The percentage of adults with diabetes whose last tested HbA1c level was 7.4 or less (DM6)</p> <p>2. The percentage of adults with diabetes whose last blood pressure reading was 145/85 or less (DM12)</p> <p>3. The percentage of adults with diabetes whose last tested cholesterol level was 5 or less (DM17)</p> <p>4. Emergency admission rates for diabetic ketoacidosis and coma</p>	i.
		1.2 Do adults with diabetes feel that they are achieving their lifestyle targets?	<p>1. The percentage of adults with diabetes who feel that they are good at eating the right foods and that they know enough about what they should eat and that they were 'almost always' given personal advice about the kinds of food to eat</p> <p>2. The percentage of adults with diabetes who feel that they are good at being physically active and that they know enough about the role of physical activity and that they were 'almost always' given personal advice about their levels of physical activity</p>	ii.
		1.3 Do adults with diabetes feel knowledgeable about their diabetes?	<p>1. The percentage of adults with diabetes who know their HBA1c value</p> <p>2. The percentage of adults with diabetes who know enough about when to take their medication and how much medication to take</p>	iii.

Standards	Criteria 2	Questions	Information	Notes
NSF standards 3 and 4 NICE HTA Education C5a and C16 D9 and D10 D2a, D2b and D2d	Adults with diabetes feel supported to self care through care planning, information and education	2.1 Do adults with diabetes report that they have regular check-ups, feel involved and know what to do next?	1. The percentage of adults with diabetes diagnosed for more than a year, who report that they have had at least one diabetes check-up in the last 12 months 2. The percentage of adults with diabetes who have had a check-up who think that they 'almost always' discuss ideas about the best way to manage their diabetes at their check-up 3. The percentage of adults with diabetes who have had a check-up who think that they 'almost always' discuss their goals in caring for their diabetes at their check-up 4. The percentage of adults with diabetes who have had a check-up who think that they 'almost always' agree a plan to manage their condition over the next 12 months at their check-up	iv.
		2.2 Do adults with diabetes report that they have received enough information, education and training to self care?	1. The percentage of adults with diabetes who feel that they received the right amount of verbal and written information when they were first diagnosed 2. The percentage of adults with diabetes who were offered an education or training course 3. The percentage of adults with diabetes who have attended a course 4. The percentage of adults with diabetes who have not attended a course, but would like to 5. The percentage of adults with diabetes who are offered a course and would like to attend, but have not participated because it was not suitable 6. The percentage of adults who smoke and have a record that smoking cessation advice has been offered	v.

Standards	Criteria 3	Questions	Information	Notes
<p>NSF standard 10</p> <p>NICE type 1</p> <p>D10 and D2a and C5a</p>	<p>Adults with diabetes have key tests and measurements carried out</p>	<p>3.1 Do clinicians carry out key tests and measurements?</p>	<ol style="list-style-type: none"> 1. The percentage of adults with diabetes who have a record of HbA1c in the last 15 months 2. The percentage of adults with diabetes who have a record of blood pressure in the last 15 months 3. The percentage of adults with diabetes who have a record of total cholesterol in the last 15 months 4. The percentage of adults with diabetes who have a record of BMI in the last 15 months 5. The percentage of adults with diabetes who have a record of micro-albuminuria testing in the last 15 months 6. The percentage of adults with diabetes who have a record of serum creatinine testing in the last 15 months 7. The percentage of adults with diabetes who have a record of presence or absence of peripheral pulses in the last 15 months 8. The percentage of adults with diabetes who have a record of neuropathy testing in the last 15 months 9. The percentage of adults with diabetes who have a record of retinal screening in the last 15 months 	<p>vi.</p>

Standards	Criteria 3	Questions	Information	Notes
		3.2 Do adults with diabetes report that key tests and measurements are carried out?	<p>1. The percentage of adults with diabetes who have a record of HbA1c in the last 15 months</p> <p>2. The percentage of adults with diabetes reporting that they had a urine test for protein in the last 12 months</p> <p>3. The percentage of adults with diabetes reporting that they had their blood pressure taken in the last 12 months</p> <p>4. The percentage of adults with diabetes reporting that they had a cholesterol test in the last 12 months</p> <p>5. The percentage of adults with diabetes reporting that they had had a photo taken of the back of their eyes in the last 12 months</p> <p>6. The percentage of adults with diabetes reporting that they had had their bare feet examined in the last 12 months</p> <p>7. The percentage of adults with diabetes reporting that they had been weighed by a doctor or a nurse in the last 12 months</p>	vii.
		3.3 Do adults with diabetes report that ALL key tests and measurements are carried out?	1. The percentage of adults with diabetes reporting that they had all of the following: HbA1c, urine test for protein, blood pressure, cholesterol, photo taken of the back of their eyes, bare feet examined and weight measured by a doctor or nurse, in the last 12 months	viii.

Notes

The following notes describe the data items in more detail along with their sources.

In order to understand the codes used in the survey of patients, a copy of the questionnaire will be necessary and can be downloaded from:

<http://www.healthcarecommission.org.uk/nationalfindings/surveys/patientsurveys/diabetesurvey/informationforpcts&approvedsurveycontractors.cfm>

When a code is referred to, it is the code of the respondent's answer to each question. For example:

Q6. *Do you have type 1 or type 2 diabetes?*

- code 1 is type 1
- code 2 is type 2
- code 3 is don't know

i. Measurements at recommended levels

Source of data: QOF 2005/2006

- QOF DM6: The % of adults with diabetes in whom the last HbA1c is 7.4 or less in the last 15 months
- The level of intra PCT variation of QOF DM6: The % of adults with diabetes in whom the last HbA1c is 7.4 or less in the last 15 months
- QOF DM12: The % of adults with diabetes in whom the last blood pressure is 145/85 or less
- The level of intra PCT variation of QOF DM12: The % of adults with diabetes in whom the last blood pressure is 145/85 or less
- QOF DM17: The % of adults with diabetes whose last measured total cholesterol within previous 15 months is 5 or less
- The level of intra PCT variation of QOF DM17: The % of adults with diabetes whose last measured total cholesterol within previous 15 months is 5 or less

Source of data: HES

- HES: Emergency admission rates for diabetic ketoacidosis and hypoglycaemic coma, for the PCT's population

ii. Achieving lifestyle targets

Source of data: survey of patients

- survey of patients: Q37 How good are you at eating the right foods to help you manage your diabetes? (codes 1 and 2) and Q36 Do you know enough about what you should eat to help you manage your diabetes? (codes 1 and 2) and Q12d Were you given personal advice about

the kinds of food to eat? (code 3)

- survey of patients: Q39 How good are you at being physically active to help manage your diabetes? (codes 1 and 2) and Q38 Do you know enough about the role of physical activity in managing your diabetes? (codes 1 and 2) and Q12e Were you given personal advice about your levels of physical activity? (code 3)
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iii. Knowledge

Source of data: survey of patients

- survey of patients: Q15 Do you know your HbA1c value? (code 1)
 - survey of patients: Q32 Do you know enough about when to take your medication? (code 1) and Q33 Do you know enough about how much medication to take? (code 1)
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iv. Check ups

Source of data: survey of patients

- survey of patients: Q10 In the last 12 months how many times have you had a diabetes check-up? (codes 2, 3 and 4)
 - survey of patients: Q12a Did you discuss your ideas about the best way to manage your diabetes? (code 3)
 - survey of patients: Q12c Did you discuss your goals in caring for your diabetes? (code 3)
 - survey of patients: Q12g Did you agree a plan to manage your diabetes over the next 12 months? (code 3)
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v. Information, education and training

Source of data: survey of patients

- survey of patients: Q2 How would you describe the amount of verbal information you received when you were first diagnosed (code 3) and Q3 How would you describe the amount of written information you received when you were first diagnosed (code 3)
 - survey of patients: Q47 Have you ever been offered the opportunity to attend an education or training course about how to help you manage your diabetes? (code 1) and Q42 Have you ever participated in an education and training course on how to help you manage your diabetes? (code 1)
 - survey of patients: Q42 Have you ever participated in an education or training course on how to help you manage your diabetes? (code 1)
 - survey of patients: Q46 Have you ever wanted to attend an education or training course about how to help you manage your diabetes? (code 1)
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- survey of patients: Q46 Have you ever wanted to attend an education or training course about how to help you manage your diabetes? (code 1) and Q48 Why weren't you able to participate in the course?:
 - 1 location inconvenient
 - 2 time/day inconvenient
 - 3 unsuitable for cultural needs
 - 4 disability not catered for
 - 5 no male/female only courses
 - 6 don't like group training

Source of data: QOF 2005/2006

- QOF DM 4. The percentage of adults with diabetes who smoke and whose notes contain a record that smoking cessation advice has been offered in the last 15 months
- The level of intra PCT variation of QOF DM4: The percentage of adults with diabetes who smoke and whose notes contain a record that smoking cessation advice has been offered in the last 15 months

vi. Clinicians – key tests and measurements

Source of data: QOF 2005/2006

- QOF DM 5: The percentage of adults with diabetes who have a record of HBA1c or equivalent in the last 15 months.
- The level of intra PCT variation of QOF DM 5: The percentage of adults with diabetes who have a record of HBA1c or equivalent in the last 15 months.
- QOF DM11: The percentage of adults with diabetes who have a record of blood pressure in the last 15 months
- The level of intra PCT variation of QOF DM11: The percentage of adults with diabetes who have a record of blood pressure in the last 15 months
- QOF DM 16: The percentage of adults with diabetes who have a record of total cholesterol in the previous 15 months
- The level of intra PCT variation of QOF DM 16: The percentage of adults with diabetes who have a record of total cholesterol in the previous 15 months
- QOF DM 2: The percentage of adults with diabetes whose notes record BMI in the previous 15 months
- The level of intra PCT variation of QOF DM 2: The percentage of adults with diabetes whose notes record BMI in the previous 15 months
- QOF DM 13: The percentage of adults with diabetes who have a record of micro-albuminaria testing in the previous 15 months
- The level of intra PCT variation of QOF DM 13: The percentage of adults with diabetes who have a record of micro-albuminaria testing in the previous 15 months

- QOF DM 14: The percentage of adults with diabetes who have a record of serum creatinine testing in the previous 15 months
 - The level of intra PCT variation of QOF DM 14: The percentage of adults with diabetes who have a record of serum creatinine testing in the previous 15 months
 - QOF DM 9: The percentage of adults with diabetes with a record of presence or absence of peripheral pulses in the previous 15 months
 - The level of intra PCT variation of QOF DM 9: The percentage of adults with diabetes with a record of presence or absence of peripheral pulses in the previous 15 months
 - QOF DM 10: The percentage of adults with diabetes with a record of neuropathy testing in the previous 15 months
 - The level of intra PCT variation of QOF DM 10: The percentage of adults with diabetes with a record of neuropathy testing in the previous 15 months
 - QOF DM 8: The percentage of adults with diabetes who have a record of retinal screening in the previous 15 months
 - The level of intra PCT variation of QOF DM 8: The percentage of adults with diabetes who have a record of retinal screening in the previous 15 months
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vii. Adults with diabetes – key tests

Source of data: survey of patients

- survey of patients: Q14 In the last 12 months did you have a special blood test to look at your long-term or 'average' blood glucose level? This test is called HbA1c, and is taken by a doctor or nurse (code 1)
 - survey of patients: Q19 What was the purpose of the urine test? (code 1)
 - survey of patients: Q21 In the last 12 months, has a doctor or nurse taken your blood pressure? (code 1)
 - survey of patients: Q23 In the last 12 months has a doctor or nurse carried out a cholesterol test? (code 1)
 - survey of patients: Q25 In the last 12 months did you have an eye test where a photograph of the back of your eyes was taken? (code 1)
 - survey of patients: Q26 In the last 12 months have you had your bare feet examined? (code 1)
 - survey of patients: Q28 In the last 12 months, have you been weighed by a doctor or nurse? (code 1)
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viii. Adults with diabetes – all key tests

Source of data: survey of patients

- survey of patients: Q14, 19, 21, 23, 25, 26 and 28, percentage answering yes to all
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