

NICE QUALITY STANDARDS FOR ADULTS WITH DIABETES

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What are NICE 'Quality Standards'?

- A set of specific, concise statements and associated measures
- Aspirational, but achievable, markers of high-quality, cost-effective patient care
- Cover the treatment and prevention of different diseases and conditions



How are the standards derived?



- From the best available evidence
- Developed by NICE with NHS and social care professionals, their partners and service users
- Address 3 dimensions of quality:
 - clinical effectiveness
 - patient safety
 - patient experience

What else?

- Aim to support the delivery of the best possible outcomes for patients

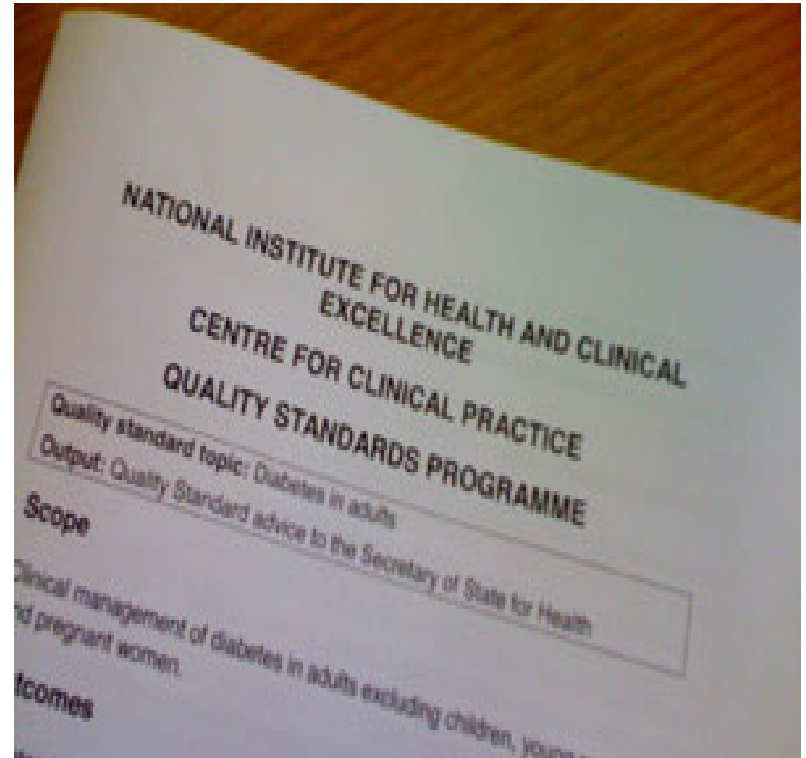
(2010 NHS White Paper *Equity and Excellence - Liberating the NHS.*)

- Will be reflected in the new Commissioning Outcomes Framework (COF)
- Will inform QOF CQUIN



Quality Standard – Diabetes in adults

- 13 statements
- Aimed at whole pathway
- Supporting an integrated approach to provision of services
- Supports the National Service Framework for Diabetes and locally agreed pathways of care



Standard 1

People with diabetes and/or their carers receive a structured education programme that fulfils the nationally agreed criteria from the time of diagnosis, with an **annual review and access to ongoing education**



Standard 2



People with diabetes receive personalised advice on nutrition and physical activity from an **appropriately trained healthcare professional** or as part of a structured educational programme

Standard 3



People with diabetes participate in annual care planning which leads to documented agreed goals and an action plan

Care Planning - Year of Care approach

Making consultations with patients truly collaborative by:

- Informing them of their results in writing
- Using a patient-centred partnership approach (equal contribution HCP + patient) – resulting in agreed goal and action plans
- Informing commissioning of service needs



Information gathering



Information sharing



The Consultation



The agreed & shared care plan

Care Planning Consultation

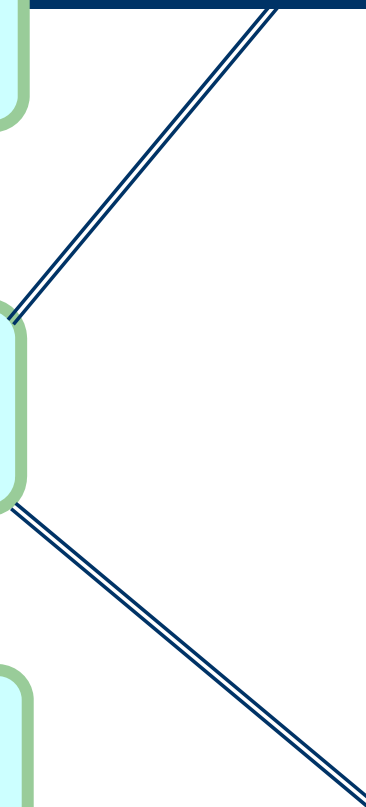
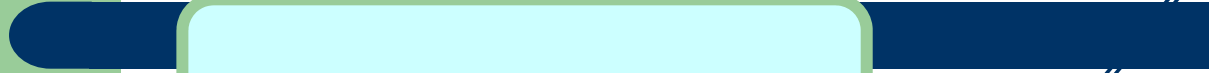
Gather and share stories

Explore and discuss

Goal setting

Action planning

Review



Standard 4

People with diabetes agree with their healthcare professional a documents personalised HbA1c target, usually between 48 and 58 mmol/mol (6.5 and 7.5%) and receive an ongoing review of treatment to minimise hypoglycaemia



Standard 5



People with diabetes agree with their healthcare professional to start, review and stop medications to lower blood glucose, blood pressure and blood lipids in accordance with NICE guidelines

Standard 6

Trained healthcare professionals **initiate and manage therapy** with insulin within a structured programme that includes dose titration by the person with diabetes



Standard 9



People with diabetes are assessed for psychological problems which are then managed appropriately

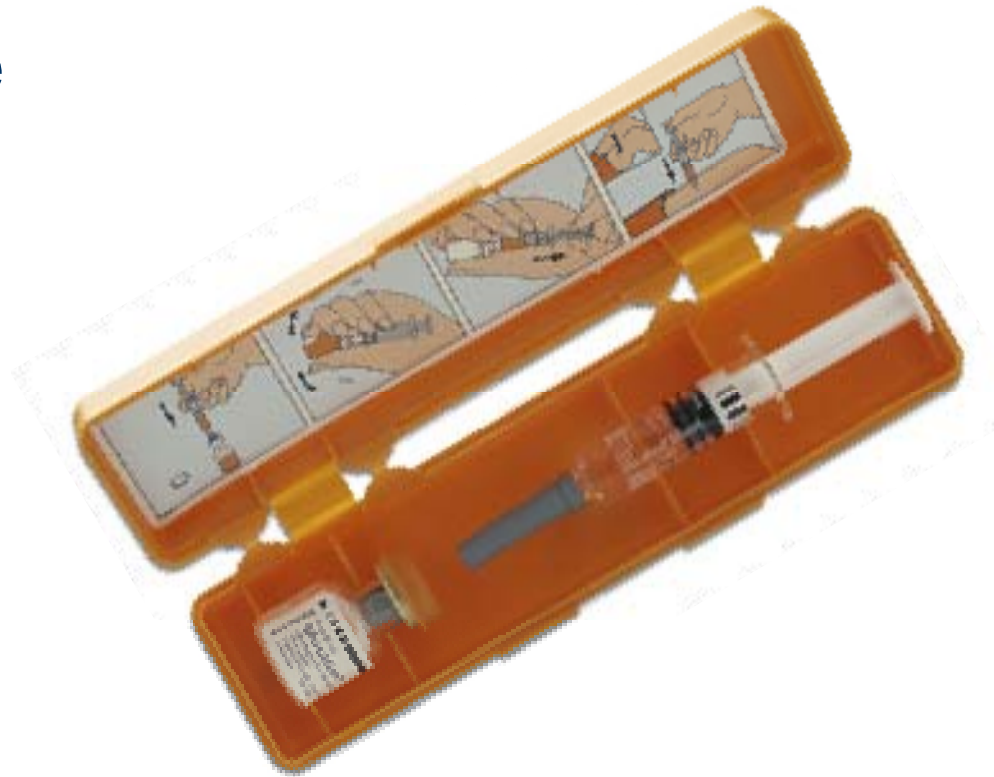
Standard 10

People with diabetes with or at risk of foot ulceration receive regular review by a foot protection team in accordance with NICE guidance, and those with a foot problem requiring urgent medical attention are referred to and treated by a multidisciplinary foot care team within 24 hours



Standard 13

People with diabetes who have experienced hypoglycaemia requiring medical attention are referred to a specialist diabetes team



Bullet Points for New Clinical Solutions



- Care Planning is the golden thread
- Agree HbA1c targets
- Consider psychological problems
- Don't forget pregnancy!