

Oxford AHSN Conference

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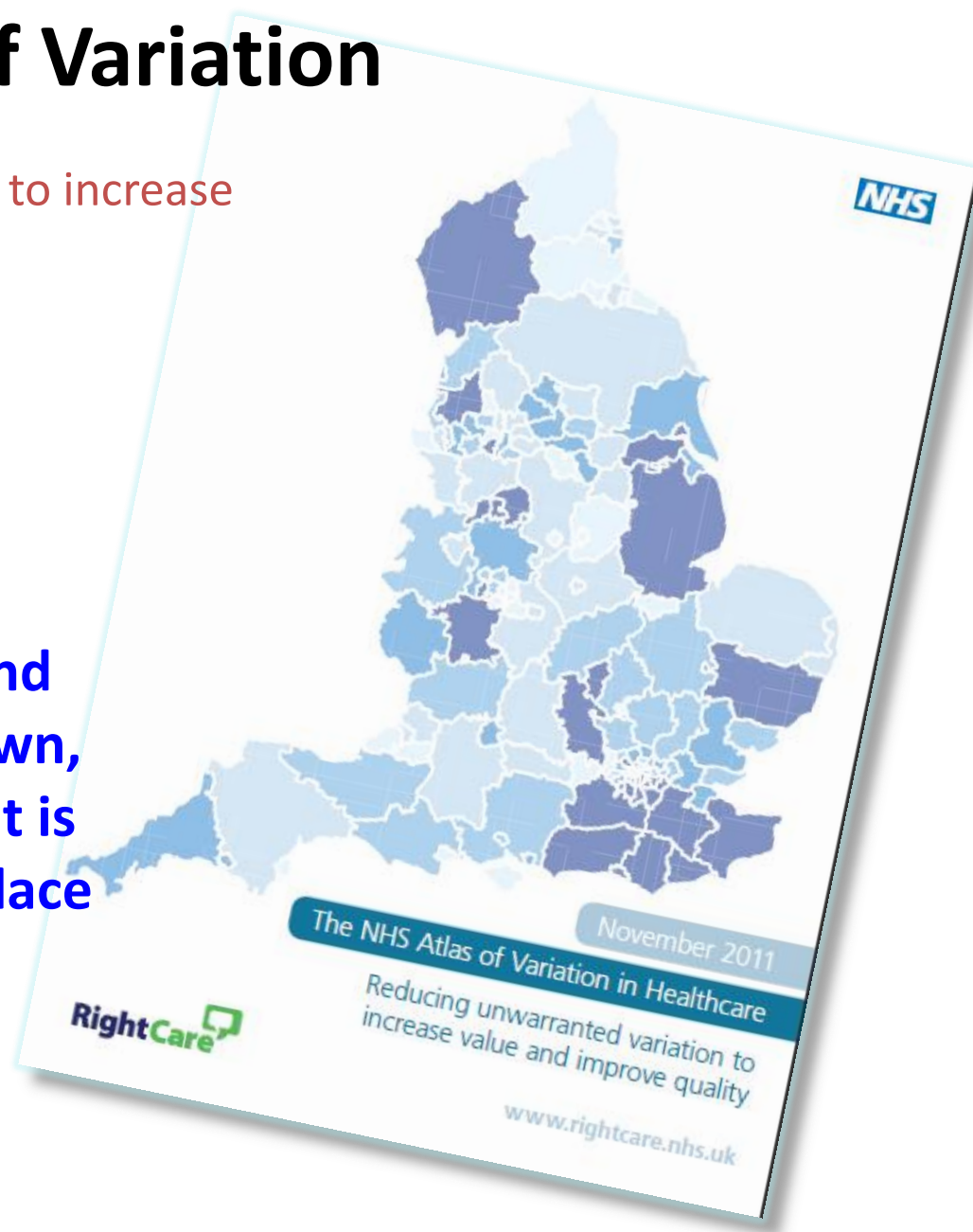
**Berkshire East Diabetes Clinical
Reference Group**

The NHS Atlases of Variation

Reducing unwarranted variation to increase value and improve quality

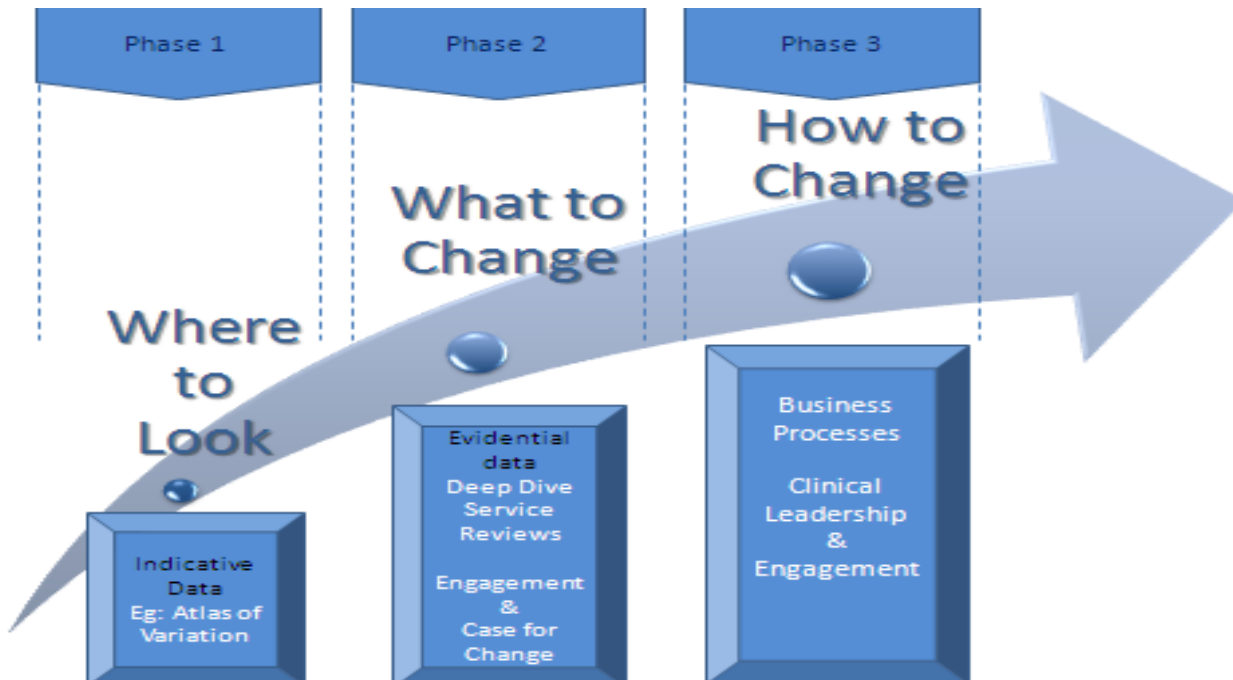
Awareness is the first step towards value –

If the existence of clinical and financial variation is unknown, the debate about whether it is unwarranted cannot take place





NHS RightCare – Diabetes Optimal



Five Key Ingredients:

Clinical Leadership

1. Indicative Data

2. Clinical Engagement

3. Evidential Data

4. Effective processes

Breakthrough

- Need for a real change
- Support from Diabetes UK and patients
- CCG chairs give a mandate (Sep/Oct 2014)
- Hub & Spoke pilot (Consultants, DSNs & GPs)
- Stakeholder engagement (Nov'14 /Mar'15)
- Adopt Right Care Methodology
- WAM CCG /CSCSU-Clinical Governance/
Processes
- LGC (Leadership, Governance & Capacity)
- Key work areas, with task & finish work groups set

Stakeholder engagement (November 2014) and Feedback

- Gap analysis from stakeholders
- Articulate why the change was needed
- What they liked to see or not in redesign?
- Clarification on desired outcome
- CCG led approach-Examples of best practice- Surrey Downs, Berkshire West, Oxford
- Phased implementation

What changes do you feel would most improve the East Berkshire diabetic service?

#	Responses
1	Anything that promotes population awareness of diabetes, the need for good management and the services available.
2	a commissioned integrated service
3	Care planning approach so patients more involved in decision making about their care
4	Governance, Patient involvement, robust implementation and follow through
5	Education of professionals ALL
6	Clear leadership, clear objectives
7	Identify patients with increased risk for risk assessment
8	clearly defined for services, coherent training across providers and sectors, patient involvement in decision making
9	I don't know enough about current services to say but from anecdotal evidence patients do not feel they receive sufficient support & education
10	Shared Goal and Vision with adequate funding. Federated approach
11	Understanding patient needs

NHS Right Care - Value Opportunities

Value Opportunities

Quality/outcomes

Cancer & Tumours
Circulation Problems (CVD)
Endocrine, Nutritional and Metabolic Problems
Mental Health Problems
Respiratory System Problems

NHS Bracknell and Ascot
CCG

Acute and prescribing spend

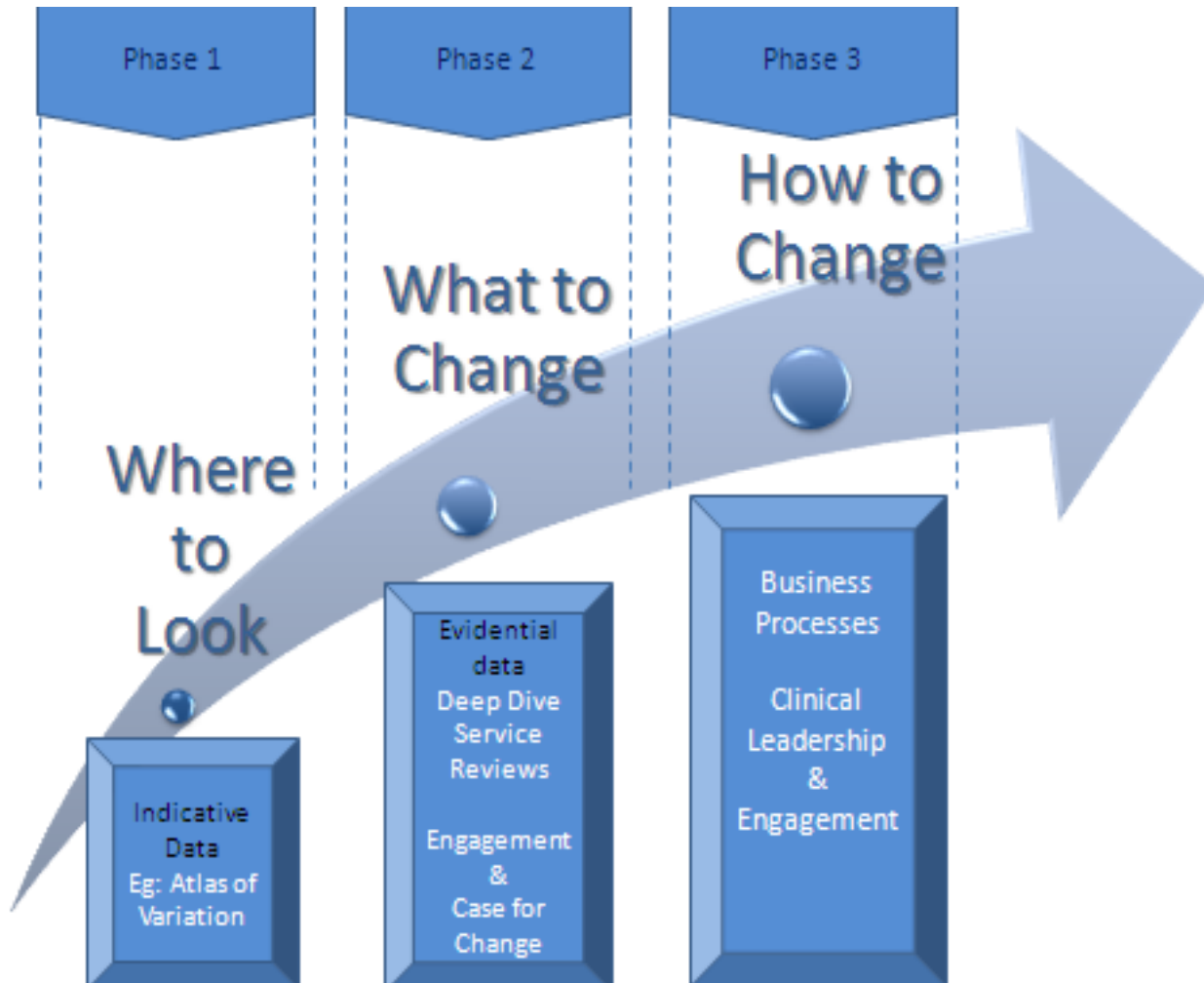
Endocrine, Nutritional and Metabolic Problems
Trauma & Injuries

Spend and Quality/Outcomes

Endocrine, Nutritional and Metabolic Problems

1 key objective + 3 key phases + 5 key ingredients =
COMMISSIONING FOR VALUE

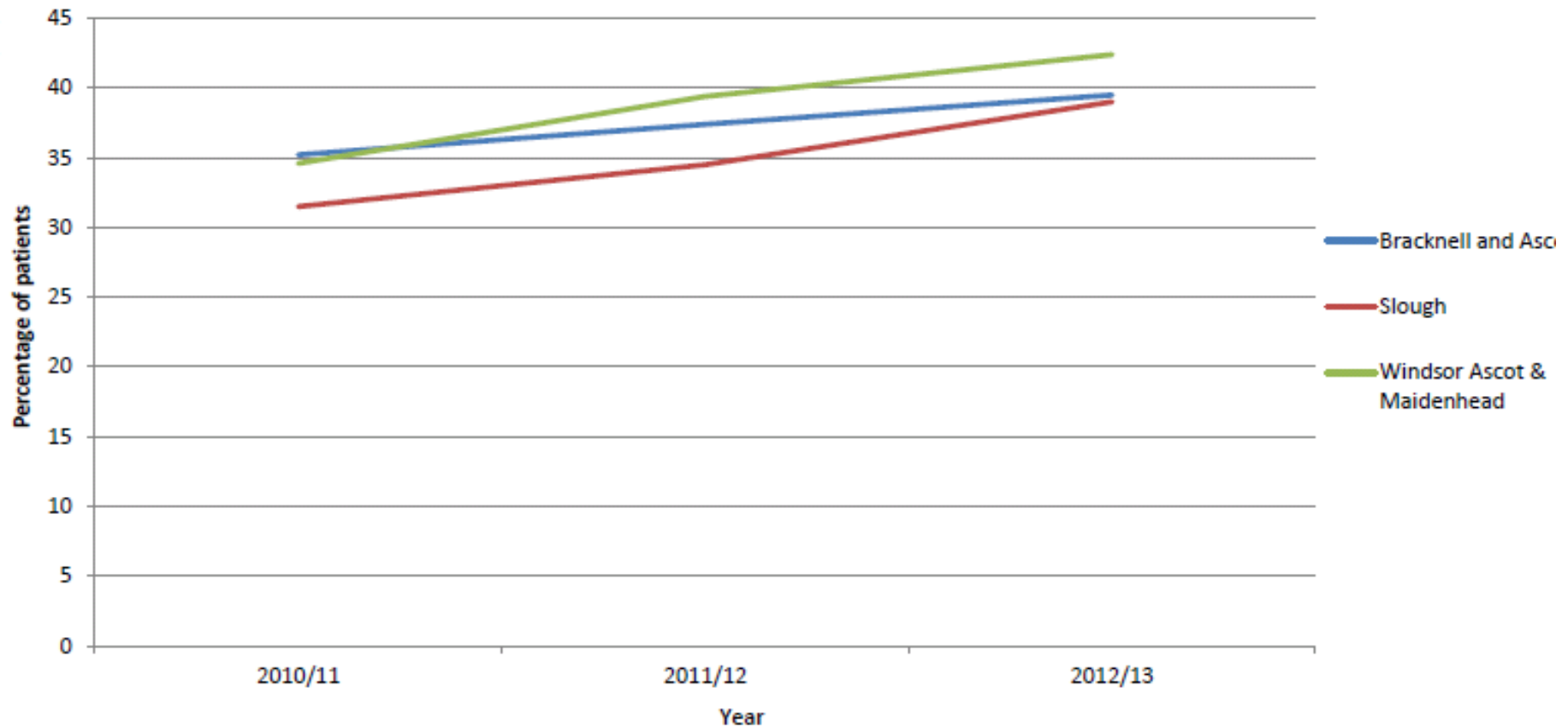
OBJECTIVE - Maximise Value (individual and population)



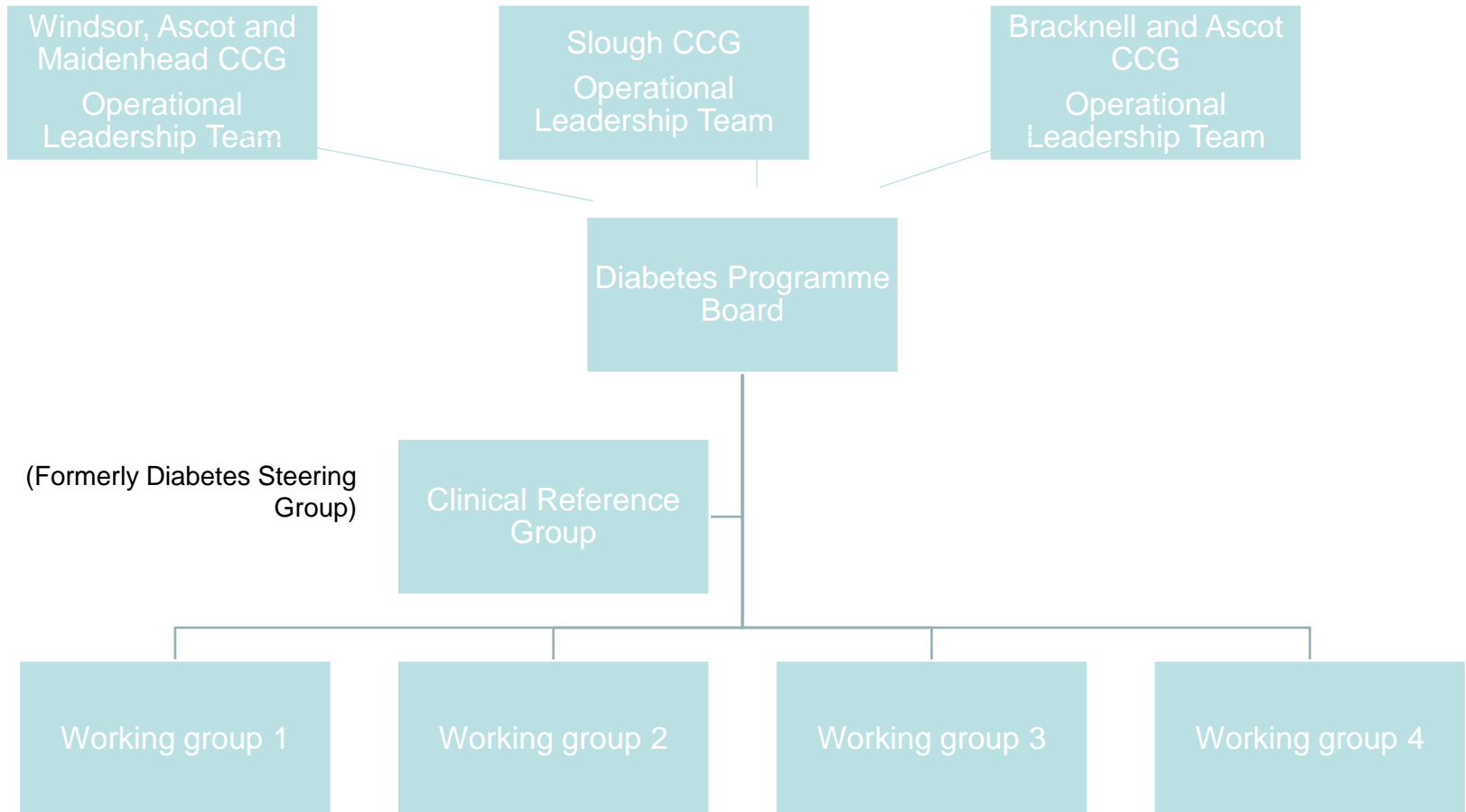
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Achievement rates for all diabetes patients achieving the HbA1c <58mmol/mol, cholesterol<5mmol/L and the BP target



Proposed Governance Structure



Acknowledgements

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