DIABETES IN BROMLEY

Information and Education for Patients

healthwatch Bromley

Contents

Who we are and what we do

Healthwatch Bromley (HWB) is the independent champion for people using local health and social care services. We listen to what people like about services and what they say could be improved. We share their views with those with the power to make change happen. We also signpost enquirers to appropriate, local health and social care services.

Our sole purpose is to help make health and social care better for people by:

- Providing information and advice to the public about choosing and accessing services.
- Obtaining people's views of their needs for, and experience of, local services and making these views known to service commissioners.
- Researching, reporting on, and recommending how those services could or should be improved.
- Promoting and supporting the involvement of people in the monitoring, commissioning and provision of local health and social care services.
- Making the views and experiences of people known to Healthwatch England and helping it to carry out its role as national champion.
- Making recommendations to Healthwatch England to advise the Care Quality Commission to carry out special reviews or investigations into areas of concern.

Introduction/background

A statutory function of HWB is to provide information and signposting to residents on health and social care services. Based on our intelligence we identified diabetes as one area of focus for our work.

As a result, a panel of HWB volunteers and patients conducted a review of the local information provision for people diagnosed with or at risk of diabetes. In addition, we liaised with local partners including commissioners and providers to help gain insight into available information about diabetes care and pathways in the London Borough of Bromley (LBB). This helped to identify gaps in information and as a result HWB, along with One Bromley and SEL CCG partners, set out to create accessible and up to date information for LBB residents.

Aims, objectives and outcomes

The aim of the project was to help the public understand the services available to them and describe local care pathways.

Output

Outputs, a co-production between HWB and local partners:

- A report and leaflets with information on self-care, key services and pathways available in LBB for residents with diabetes.
- Information materials, shared with Primary Care to be distributed to patients.

Outcome
Residents with diabetes feel better informed and enabled, know what care they can access to help them manage their condition, and are confident in the services available.

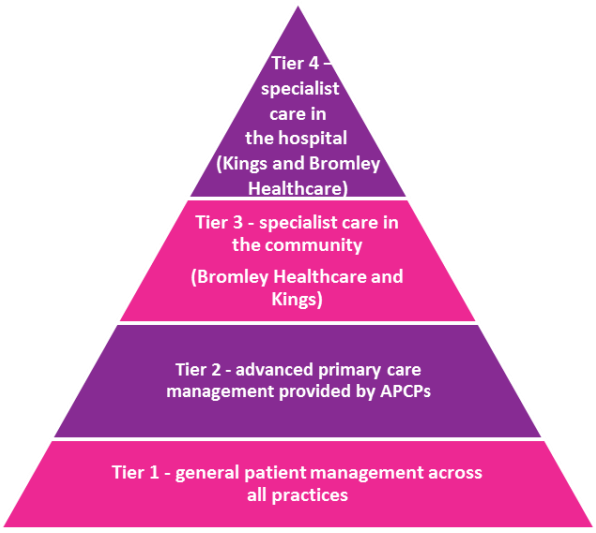
Impact
People with diabetes have better outcomes and improved wellbeing.

Methodology

- Identify current information provision and possible gaps by initial desktop research.
- Work with partners to agree the best approach to provide clear information about local services available for residents with diabetes. Collate the information and create patient facing report/leaflets and materials including a pathway diagram.
- Create a report noting all key services available.
- Provide information about self-care.
- Share the materials with Primary Care and other relevant partners to disseminate to people with diabetes.

Diabetes Services in Bromley

Diabetes care in LBB is focused on a Primary Care driven and consultant led integrated methodology around a tiered system of care. For most patients, first contact with Bromley diabetes care, will be with their General Practitioner or other Primary Care professional. Since 2014 the model of care for diabetes in LBB has been based on community provision of specialist services from Bromley Healthcare who also provide support to Primary Care.



Bromley 'tiered' levels of care

The model of service provision is novel in that there is a well-developed, Tier 2 enhanced primary care system delivered through 'Advanced Primary Care' Practices supported by Bromley Healthcare with Tier 3 care in the standard London model provided in community locations by Bromley Healthcare working with the support of diabetes physicians from King's College Hospital NHS Foundation Trust (KCH). KCH also supports diabetes services in Bromley, with the Outpatient Diabetes Services at KCH, predominantly at Denmark Hill and patient care (Tier 4) at Princess Royal University Hospital (PRUH).

The pathway for referral into specialist care is through Bromley Healthcare who engage support from KCH in respect of certain advanced elements of the pathway. The exceptions are inpatient care for diabetes, complex multidisciplinary diabetic foot care, pregnancy care and paediatric care up to the age of 19 which are all provided through KCH predominantly the PRUH but also Denmark Hill.

Guy's and St Thomas' NHS Foundation Trust is commissioned to provide diabetic eye screening services in local sites across South East London, including at Beckenham Beacon and Orpington Hospital.

Tier 1 – Primary Care and Tier 2 – Advanced Primary Care Practice.

Primary Care provides support and follow up after initial diagnosis for patients at risk of developing diabetes (sometimes referred to as pre-diabetes or non-diabetic hyperglycaemia) as well those with type 2 diabetes and for some with stable type 1 diabetes. This care might be solely at Primary Care level or as shared care with the specialist community team, or acute Trust.

Primary Care will also undertake annual assessment and screening for complications of diabetes as well as managing blood glucose (including initiating insulin and other injectable medicines), blood pressure monitoring and treatment and cholesterol control, monitoring emotional health and signposting to appropriate support, and importantly vaccination against infectious diseases such as influenza. Primary Care is often the first port of call for acute illness, such as infections and new complications such as nerve damage. Primary Care offers a range of different ways of consulting including face-to-face, telephone, video, text and email.

Tier 3 – Specialist Care in the Community

Specialist Care in the Community is provided by Bromley Healthcare and is a consultant supported service in partnership with KCH. Bromley Healthcare Diabetes Team offers clinical advice, education (e.g. Walking Away from Diabetes, DESMOND, DAFNE) and support for patients diagnosed with diabetes. The team consists of specialist nurses, dietitians and consultants, and works closely with the podiatry service. The specialist nurses provide support to the Primary Care teams and advise on and discuss patient management to enable the advanced care practitioners to deliver care at local GP practices. The specialist community care team also provides diabetes care to nursing homes.

For those needing support living with a long-term health condition, Bromley Health Care also provides Improved Access to Psychological Therapies and support for patients with needle phobia.

Tier 4 – Specialist Care

The provision of specialist diabetes services is coordinated between Bromley Healthcare and KCH.

Bromley Healthcare provides

- Adult type 1 diabetes clinics, including structured diabetes education (dose adjustment for normal eating, DAFNE), flash glucose monitoring (Freestyle libre) and insulin pump therapy.
- Complex type 2 diabetes clinics (e.g. complex diabetes treatment regimens, declining renal function).
- Pre-pregnancy diabetes clinics.
- Young persons' clinic.

KCH provides services at Princess Royal University Hospital (PRUH) and KCH Denmark Hill

- Antenatal and obstetric care for women with pre-existing diabetes or gestational diabetes* (PRUH). If a woman is diagnosed with Gestational Diabetes during her pregnancy, then antenatal diabetes care takes place under PRUH (outpatient clinics at Orpington Hospital). Care will be managed by a multidisciplinary team including a Consultant Diabetologist, Consultant Obstetrician, Diabetes Specialist Nurse, Specialist Diabetes Dietitian and Specialist Diabetes Midwife.
- Complication management, including:
    - diabetic kidney disease (nephrology at PRUH/KCH Denmark Hill).
    - diabetic eye disease (ophthalmology at Orpington Hospital/Queen Mary's Hospital Sidcup, KCH Denmark Hill).
    - diabetic foot disease including foot ulcers, peripheral vascular disease and peripheral neuropathy (multidisciplinary diabetic vascular and orthopaedic clinics, with orthotic services at PRUH, KCH Denmark Hill).
    - autonomic neuropathy / gastroparesis (diabetes/gastroenterology at KCH Denmark Hill).
- Paediatric and transition diabetes clinics (PRUH).
- Services for people with problematic hypoglycaemia (Denmark Hill), including structured diabetes education (DAFNE), diabetes technology, Hypoglycaemia Awareness Restoration Programme (HARP) and islet transplantation, for which Denmark Hill is one of only six centres in the UK for adults with type 1 diabetes and recurrent problematic hypoglycaemia.
- Diabetes Psychiatry and Psychology service for diabetes specific mental health issues (e.g. fear of hypoglycaemia, high diabetes distress, type 1 diabetes and eating disorders).
- Lipid clinics (provided by specialists in metabolic medicine and clinical biochemistry, PRUH, KCH Denmark Hill)

Patient Education

Type 2 Diabetes

The service offers DESMOND (Diabetes Education and Self-Management for Ongoing and Newly Diagnosed) sessions for people with newly diagnosed Type 2 diabetes. These sessions are provided to enable patients to learn more about their condition, find out how to manage their condition and share their experience with others. Patients can be referred by their GP or can self-refer to diabetes education via Diabetes Book and Learn at diabetesbooking.co.uk

Type 1 Diabetes

The team provides the educational DAFNE programme which aims to help adults with type 1 diabetes lead as normal a life as possible, whilst also maintaining blood glucose levels within healthy targets, to reduce the risk of long-term diabetes related complications. There are both standard and virtual programmes.

Diabetes education - courses and programmes to support people with diabetes and at risk of developing diabetes

A wide range of courses is available, designed for people with different types of diabetes and at different stages of their diabetes journey. The major concern about these courses and programmes is that so very few patients diagnosed with diabetes attend.

For patients with Type 1 diabetes

DAFNE - Dose Adjustment for Normal Eating

The DAFNE course is for adults (over 17) with type 1 diabetes and is a comprehensive and often life-changing experience. It is far more than a carbohydrate counting programme, although learning and refining the skills necessary to count the carbohydrate in each meal and to inject the right dose of insulin are an important part of the course.

On a face-to-face course, participants attend for five days, Monday to Friday, or one day per week for five weeks, with a follow-up session around eight weeks after the course. There are sessions on managing insulin around exercise, illness, and social activities including drinking alcohol.

The face-to-face structured teaching programme is delivered to groups of six to eight participants under the supervision of DAFNE-trained educators (specially trained NHS diabetes specialist nurses and dietitians).

The Remote DAFNE course has been created for people with type 1 diabetes who feel that a face-to-face DAFNE course is not for them and in response to changes due to Covid 19 social distancing. Participants can learn the DAFNE way of managing type 1 diabetes from home. The course takes five weeks to complete, with online learning from home each week and group video support calls with up to three other participants and a trained Remote DAFNE educator.

The DAFNE course is about learning from experience, trying new things under supervision, and benefiting from the support of other people on the course.

The DAFNE team can provide letters for employers explaining why a person should be given paid time off work (as a health-related absence) because of the likely benefits of attendance. DAFNE allows participants to fit diabetes into their lifestyle, rather than changing their lifestyle to fit in with diabetes.

Further information can be found at **https://dafne.nhs.uk/**

BERTIE

Beta Cell Education Resources for Training in Insulin and Eating is a structured diabetes education course that teaches people with Type 1 diabetes how to manage insulin doses compared to carbohydrate intake. Patients learn how to recognise and **count carbohydrates** and work out insulin doses and how this affects blood glucose levels. It was created by the Bournemouth Diabetes and Endocrine Centre but is available across the UK.

Further information can be found at **https://www.bertieonline.org.uk/home**

Digibete

Children and young people with Type 1 diabetes and their families can use the **DigiBete App and website** for a wide range of awareness, education, training and support resources.

MyType1Diabetes

Adults with Type 1 diabetes can access the service directly by visiting **myType1diabetes.nhs.uk**, which includes videos and eLearning courses, to help people understand more about Type 1 diabetes and increase their confidence in how to manage it.

New T1 resources website

The **T1resourses.uk** website was launched in September 2020, providing a one-stop-shop for reviewed and rated resources for people affected by Type 1 diabetes. Resources include video clips, guides, online forums, blogs and e-booklets. It was developed following a research study 'Barriers to Uptake of Diabetes Education' (BUDiE) led by Dr Sophie Harris, Consultant Diabetologist, KCH.
The study asked how 1,600 adults with Type 1 diabetes felt health professionals could help them to better manage their condition, and what would make a self-management course more appealing. It found that fewer than 10% of people with Type 1 diabetes know someone else with Type 1 diabetes.

The ABCD diabetes technology network has provided a number of resources for people living with type 1 diabetes, including reviews of the different diabetes technology available in the UK, how patients with type 1 diabetes can get the most out of using glucose sensors including interpreting glucose sensor data, how to optimise the doses and the way insulin is used to reduce peaks and troughs in glucose levels, how to exercise safely, and the effect of carbohydrate, fat and protein in food on glucose levels

Further information can be found at **https://abcd.care/dtn/educational-resources-people-living-diabetes**

For patients with Type 2 diabetes

DESMOND - Diabetes Education and Self Management for Ongoing and Newly Diagnosed

DESMOND is a self-management diabetes education programme, to learn more about the condition and how to manage it.

Since the pandemic, this course has been transitioned into **MyDesmond**, an online, digital version. DESMOND will be offered face to face by Bromley Healthcare.

DESMOND is delivered as three different courses:

- For newly diagnosed.
- Foundation (for people with established diabetes).
- DESMOND BME –in Gujarati, Punjabi, Urdu and Bengali.

Further information can be found at **https://www.desmond.nhs.uk/**

Second Nature – a paid for course

This is a 12-week lifestyle programme focusing on weight loss. Participants have access to a personal nutritional expert and health coach. They are sent a wearable fitness tracker, a set of wireless weighing scales, a nutritional handbook and a recipe book in the post but the programme is delivered online.

Further information can be found at **https://www.secondnature.io/**

For people at risk of developing Type 2 diabetes

NHS Diabetes Prevention Programme (DPP) 'A Healthier You'

The NHS DPP is a joint commitment from NHS England, Public Health England, and Diabetes UK, designed to stop or delay the onset of diabetes through advice and support on healthier eating and physical exercise. LBB has joined with the other South London boroughs to be a first wave site for this programme, which is rolling out nationally across four years.

People found to be at high risk of diabetes by their GP or at NHS Health Check will be offered the option of joining the programme. This will involve attendance at a minimum of 13 sessions over a period of at least nine months. The programme supports people to get to a healthier weight and become more active, to prevent the development of diabetes.

Nationally, the programme has had approximately half a million referrals, people identified as at high risk of developing Type 2 diabetes e.g. those with hyperglycaemia or pre-diabetes. The long term aims of the DPP are to reduce the incidence of Type 2 diabetes, complications associated with diabetes (e.g. heart, stroke, kidney, eye and foot problems) and health inequalities associated with diabetes over the longer term. An initial increase in incidence may be apparent as more undiagnosed cases are uncovered.

Individuals going through the programme will reduce their risk of a range of conditions related to being overweight/obese, having poor nutrition and/or a sedentary lifestyle. Participants must be aged 18 - 79, not be pregnant and have had a blood test indicating 'non-diabetic hyperglycaemia' (NDH) within the last 12 months.

Further information can be found at **https://www.england.nhs.uk/wp-content/uploads/2016/08/dpp-faq.pdf**

In response to the COVID-19 pandemic, the Healthier You NHS Diabetes Prevention Programme has expanded access by aligning with plans to reduce inequalities relating to the development of Type 2 diabetes. Efforts will be directed at promoting uptake of

Healthier You by people from black and South Asian ethnic backgrounds, who tend to be at higher risk of Type 2 diabetes at younger ages.

The DPP digital stream offers similar support, assistance, and guidance but through the use of digital interventions such as:

- Wearable technologies that monitor levels of exercise.
- Apps which allow users to access health coaches.
- Online peer support groups.
- The ability to set and monitor goals electronically.

This is only available currently in eight pilot areas not including South East London, but is expected to be rolled out in other areas soon. There is a digital offer that the Healthier You Team could refer on if someone referred to NDPP is unable or unwilling to participate in the group sessions.

Walking Away from Diabetes

This is a one-off, self-management course (lasting 3.5 hours) which offers participants the opportunity to explore their personal risk and to identify the changes they need to remain healthy.

An evidence-based programme which focuses on increasing physical activity and reducing saturated fat in the diet, it is delivered by two healthcare professionals trained as Walking Away from Diabetes educators.

Further information can be found at **https://www.bromleyhealthcare.org.uk/explore-our-services/diabetes/**

Book and Learn

This is the online NHS South London Diabetes Education Booking Service, through which online courses can be accessed remotely. Patients can refer themselves. It offers flexibility and encourages patients to self-manage their condition, where a variety of courses is available.

Further information can be found at **https://www.diabetesbooking.co.uk/**

X-PERT

Diabetes Digital Programme is run by Diabetes UK and covers Type 1 and Type 2 diabetes, and diabetes prevention, with three possible courses to cater for people with different types of diabetes as well as those at risk.

It aims to give patients the knowledge and power to control their diabetes. It runs through six weekly sessions, each session lasting two and a half hours and includes follow up sessions after the course has been completed. Courses are run by trained diabetes educators, who are either diabetic themselves or work as diabetes specialists. Anyone diagnosed with diabetes can undertake the X-PERT diabetes and insulin courses.

Patients can bring their partners or carers, who are encouraged to join in. The X-PERT Prevention of Diabetes is open to anyone deemed at higher risk of diabetes.

Further information can be found at **https://www.diabetes.co.uk/education/x-pert.html**

Healthwatch Bromley diabetes information leaflets

TYPE 1 DIABETES CARE IN BROMLEY

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What to do if you or anyone you know has been diagnosed with Type 1 diabetes

1 MONITOR YOUR BLOOD GLUCOSE LEVELS

Your healthcare professional will check your general health, provide blood glucose meter and other accompanying equipment and explain how and when to check your blood glucose levels. Further guidance is also available on Diabetes UK

2 TAKE YOUR INSULIN

Insulin is a hormone made in the pancreas. It helps your body use glucose (sugar) for energy. Everyone with Type 1 diabetes needs to take insulin to control their blood glucose. You will be given an insulin pen or pump.

3 ATTEND A DAFNE COURSE

DAFNE is a five day, structured education programme for adults with Type 1 diabetes, and teaches you to take the right insulin doses to be able to eat normally. It is run by Bromley Healthcare; ask your GP to refer you to this course.

4 MAKE LIFESTYLE CHANGES

Regular exercise, calorie and carbohydrate intake counting, eating a healthy and balanced diet can help improve your blood glucose levels. You can get further help from Diabetes UK

5 GET ANNUAL EYE SCREENING

People with diabetes can develop serious eye problems. You must have annual eye health checks as part of your care plan. Note when a check is due and contact your GP if you don't get an invitation.

6 LOOK AFTER YOUR FEET

If you have Type 1 diabetes, you should see a podiatrist regularly. Podiatrists are specifically trained to assess the nerve damage in your feet, identify your specific foot health risks, and help you come up with a treatment and prevention plan.

7 UNDERSTAND AND FOLLOW YOUR CARE PLAN

Everyone with Type 1 diabetes should have a care plan. If you don't have one, ask your GP! The care plan and the structured education programme will help you make the right choices.

USEFUL RESOURCES

For more information visit:

- NHS website for those newly diagnosed with Type 1 diabetes
- T1 Resources for Type 1 diabetes
- Bromley Healthcare
- Diabetes UK

This leaflet is a part of Healthwatch Bromley's research project on Diabetes. Always consult your GP about your health concerns as the information shared here is for guidance only.
Please email info@healthwatchbromley.co.uk in case of any queries.
Healthwatch Bromley reports are available to read here.

TYPE 2 DIABETES CARE IN BROMLEY

healthwatch Bromley

What to do if you or anyone you know has been diagnosed with Type 2 diabetes

Type 2 diabetes is a common condition that causes the level of sugar (glucose) in the blood to become too high. You can help manage type 2 diabetes through healthy eating, regular exercise and achieving a healthy body weight.

1 KNOW YOUR DIABETES

Your GP, practice nurse or specialist nurse will explain your condition in detail and advise on diet and exercise, to help you understand your treatment and control your blood glucose.

2 TAKE YOUR MEDICATION

After conducting blood tests, your GP will prescribe the most suitable medication to keep your blood glucose levels normal. Most people will take tablets but some need insulin injections.

3 GO ON A COURSE

You should be invited to attend a DESMOND course organised by Bromley Healthcare. This is a structured education programme designed to improve understanding of diabetes, help manage diabetes related changes and share experiences with others. There are several structured education courses – ask your GP or nurse about the best one for you

4 LIFESTYLE CHANGES

Regular exercise, calorie and carbohydrate intake counting, eating a healthy and balanced diet can help improve your blood glucose levels. You can get further help from Diabetes UK. If you smoke, STOP!

5 GET ANNUAL EYE SCREENING

People with diabetes can develop serious eye problems. You must have annual eye health checks as part of your care plan. Note when a check is due and contact your GP if you don't get an invitation.

6 LOOK AFTER YOUR FEET

If you have Type 2 diabetes, you should see a podiatrist regularly. Podiatrists are specifically trained to assess the nerve damage in your feet, identify your specific foot health risks, and help you come up with a treatment and prevention plan.

7 TAKE CARE OF YOUR MENTAL HEALTH

You may sometimes feel discouraged, worried, frustrated, or tired of dealing with daily diabetes care. Speak to your GP and seek help if diabetes impacts your mental health.

8 GET REGULAR TESTS AND CHECKS

Manage your diabetes with regular checks. Your blood glucose, blood pressure, cholesterol, kidney function (urinary albumin and serum creatinine), weight, eyes and feet must be checked regularly.

9 CARE PLAN

Everyone with Type 2 diabetes should have a care plan. If you have not been given one, you can ask your GP.

For more information visit:

NHS website information on Type 2 diabetes
Bromley Healthcare
Diabetes UK
Diabetes UK leaflet for those newly diagnosed with Type 2 diabetes (free)
This resource is available in multiple languages
Diabetes UK leaflet on maintaining healthy feet (free)

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Please email info@healthwatchbromley.co.uk in case of any queries.
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Conclusion

Diabetes remains an area of great importance for LBB, across organisations within the One Bromley Local Care Partnership, with a focus on review and improvement of diabetes care, investment and innovation. Regular meetings occur across Bromley focused entirely on diabetes, where colleagues work collaboratively to share best practice, resolve issues and gain feedback of lived experience of diabetes care. Post pandemic, LBB is committed to continue work on this important priority.

Bromley Healthcare is focused on supporting GP practices, assisting with increasing their diabetic provision and is currently recruiting a dedicated nurse to share best practice and education across Primary Care staff.

KCH has significantly expanded its diabetes resource including the recruitment of several dedicated specialist consultants and continues to work closely with partners to ensure that discharge times are as efficient as possible.

LBB Public Health Team is dedicated to prediabetes and weight management care. They are currently exploring ways of improving referral rates into prediabetes education and working closely with Primary Care and system colleagues on improvement areas.

Primary Care have several innovative e-diabetes projects, with one Primary Care Network (PCN) piloting a dedicated project on diabetes care for housebound patients. This work is proving very successful, with best practice and learning to be shared across the borough.

The One Bromley Borough team is working to improve analytics to help target and address inequalities in outcomes across the borough and is planning to invest in more diabetes care innovations for the rest of 2022-23 and onwards.

Further reading

NHS Health A-Z Diabetes
https://www.nhs.uk/conditions/diabetes/

Public Health England Local Authority Health Profile 2019 Bromley (London) https://fingertips.phe.org.uk/static-reports/health-profiles/2019/E09000006.html?area-name=Bromley

Bromley Healthcare (podiatry care)
https://www.bromleyhealthcare.org.uk/explore-our-services/podiatry/

The England Public Health Diabetes Profile – Bromley

https://fingertips.phe.org.uk/profile/diabetes-ft/data#page/0/gid/1938133138/pat/44/ati/154/are/E38000023/iid/241/age/187/sex/4/cid/4/tbm/1

Websites giving information about diabetes education are listed in the sections on courses.

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Glossary of Terms

B(A)ME	Black, (Asian) and Minority Ethnic
DAFNE	Dose Adjustment for Normal Eating
DECS	Diabetic Eye Screening Programme
DESMOND	Diabetes Education and Self-Management for Ongoing and Newly Diagnosed
GIRFT	Getting It Right First Time
HQIP	Healthcare Quality Improvement Partnership
JSNA	Joint Strategic Needs Assessment
NCAPOP	National Clinical Audit and Patient Outcomes Programme
NDA	National Diabetes Audit
NDH	Non-diabetic hyperglycemia
NDPP	NHS Diabetes Prevention Programme
NICE	National Institute for Health and Care Excellence
PHE	Public Health England
SELCCG	South East London Clinical Commissioning Group

"In England, there are currently 3.4 million people with Type II Diabetes and 400,000 people with Type I Diabetes. This figure continues to grow each year."

Diabetes.org.uk

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Telephone: 020 388 60752
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