

Case study name: Making a difference to people with diabetes through medicines optimisation

Start and end dates of work covered by case study: 1 December 2014 – present

Overview summary

8.1% of the West Midlands' adult population has diabetes, higher than the English average, with the figure predicted to rise. Diabetes has huge implications for quality of life and life expectancy, with costs to the NHS and to the economy.

The WMAHSN worked alongside Health Education West Midlands, Eli Lilly, Novo Nordisk and Daiichi Sankyo to develop the making a difference to people with diabetes through medicines optimisation programme. This aims to make a difference by bringing together a community of like-minded people to share and spread ideas that positively improve the lives of people with diabetes.

The WMAHSN arranged the inaugural workshop where attendees learned new ways of thinking about how to make a tangible difference and planned how to work together to engage 500 people to deliver 1,000 differences to people with diabetes.

Through the art of possibility thinking the group came up with more than 170 ideas, large and small, ranging from national directives to local initiatives to very personal changes. The results of just one of the ideas – increasing ACR screening - showed an increase in ACR screens done, in patients coded for microalbuminuria and across all eight National Diabetes Audit care processes for diabetes patients.

Challenge identified and actions taken

There are an estimated 360,450 people in the West Midlands with diabetes, when adjustments are made for age, sex, ethnic group and deprivation. This is 8.1% of the adult population, higher than the average prevalence for diabetes for England of 7.4%. By 2030, levels of diabetes in the West Midlands are expected to rise to 488,711 people or 10% of the adult population, compared with 8.8% for England as a whole. However, 80% of all cases of Type 2 diabetes are preventable.

Diabetes has a huge impact on life expectancy, with Type 1 diabetes reducing an individual's life expectancy by at least 20 years and Type 2 diabetes by up to 10 years. Both patients and the NHS bear the brunt of this disease, with an estimated cost of £10 billion for treating

diabetes. The indirect costs of diabetes (such as increased mortality and morbidity, work loss and the need for informal care) are currently estimated to be £13.9 billion per year, rising to £22.9 billion in 2035/6. Deaths from diabetes in 2010/11 are estimated to have resulted in over 325,000 lost working years.

The programme aims to make a difference by bringing together a community of like-minded people to share and spread ideas to improve the lives of people in the West Midlands with diabetes. The programme was developed and driven by WMAHSN, Health Education England, along with the benefit of joint working with Daiichi Sankyo UK Ltd, Eli Lilly and Company Ltd and Novo Nordisk Ltd.

The programme launched in December 2014, when the first cohort of people gathered to undertake the inaugural two day workshop. Attendees learned new ways of thinking about how to make a difference and planned how to work together to engage 500 people to make 1,000 differences to people with diabetes.

Seventeen trailblazers came to the first ever event, bringing passion and an open mind, ideas and a desire to make a difference. In a very short time, the group had come up with more than 170 ideas, large and small, which have the potential to make a real change to the lives of people with diabetes. These ideas ranged from national directives such as a tax on sugar, to local initiatives such as healthy food boxes, support networks and exercise classes, to very personal changes – “help my mother-in-law reduce her weight and therefore the need for medication”.

Participants are supported with a comprehensive support package provided by the WMAHSN, comprising:

- Access to a virtual community of difference makers
- Online resources
- Regular and local support
- Webinars
- Library of resources
- High quality support materials
- Networking opportunities
- Toolkit/resource pack/reference material
- Achievable challenges.

Impacts / outcomes

- While the aim of identifying 500 difference makers to make 1000 differences was not achieved, the programme showed a rich experience of how a few people can make changes that impact on the lives of many thousands of people with diabetes
- More than 170 ideas were generated at the first meeting to improve healthcare outcomes for people with diabetes
- This programme has given people time to think and a framework to help them think differently and implement real changes that make a difference
- Worcestershire Royal Hospital Acute Medical Unit redesigned the inpatient pathway so that all high risk patients are seen proactively. In the nine months following this were 0 diabetes errors, compared with 10 in the previous nine months

- In a Walsall general practice, albumin-creatinine ratio screening was performed on 613 people with diabetes in 2015, compared with 469 in 2014 (an increase of 31%)
- Dr Andrew Askey, Walsall GP and participant, has presented at various regional events talking about his positive journey and how it's possible for anyone to make changes in order to make a difference to someone with diabetes
- In Staffordshire and Stoke-on-Trent, people with diabetic foot problems received prescriptions directly from podiatry. This increased efficiency, prevented at least one hospital admission and resulted in positive patient and carer feedback
- In Nuneaton, a pharmacy-based HbA1c testing and advice service covered 18 patients. All reported changes to lifestyle and diet, 11 reported improved adherence to medication and there was a range of HbA1c reduction from 3 to 14 mmol/mol
- In Walsall, a monthly support group for older men with diabetes has reported that they have learnt more about their condition and feel better informed about their medication
- WMAHSN will be working with some of the project owners to help them scale up their efforts across the West Midlands region
- There were unanticipated results on a personal level for some of the participants including promotion and involvement in regional and national quality initiatives
- Lucy Chatwin, Business Manager with WMAHSN, along with Sat Kotecha, the West Midlands' Pharmacy Local Professional Network Chair, delivered a session on "Make a difference with diabetes" to an audience of more than 100 people at the national Pharmacy Show in October 2015.

Supporting quote for stakeholder / programme lead

Survey respondent: "WMAHSN is really good at promoting these great things, and the medicines optimisation programme has this drive behind it that engages people".

Subsequent to the second WMAHSN arranged event held in May, Dr Andrew Askey stated: "The main difference I had focused on was the ACR screening, as I see that as being a fairly easy win: it's not a difficult thing to do and has multiple gains from one simple intervention. What I think is of more significance is showing improvement in the eight care processes and treatment targets, especially with cholesterol. This adds up to 753 differences made in my practice so far this year, and that doesn't count the many who have had changes in medication and improved BP and HbA1c control. The learning from this programme can easily be applied to other practices, especially EMIS practices as so many of the searches, reports, protocols and prompts can be shared, with much wider benefits and impacts.

"A further personal gain from the programme was increased confidence that I can make a difference, and I am sure this is at least in part behind my successful appointment as one of four local clinical leads appointed to the RCGP Quality Improvement in the care of people with diabetes project in June this year, working closely with six local practices to help them improve care for their patients and contributing to National Guidelines which the RCGP plans to launch towards the end of 2016. I think if this opportunity had come first, I think I would have let it pass by instead of jumping at it, and although it has taken time and energy, I am really pleased to see some of the local practices really flourishing in a new way. I would hope that the programme may be continued and developed."

Jenny Price, Head of Innovation at Health Education England: “We are looking for people who want to think differently and make a difference for people with diabetes, and share and spread ideas in a growing group. The benefits of being involved include personal development, both inside and outside of work, increased personal productivity and improved effectiveness. The programme allows groups taking part to renew their enthusiasm, unlock their potential and together, celebrate successes and the differences they can make for diabetes patients.”

Equality and diversity aspects of the project/working in partnership with patients and public

Initially the programme attracted health professionals to drive the programme forwards but at each event we have managed to encourage patient and public leads with an interest in diabetes to shape the programme moving forwards and to develop ideas with health and lifestyle professionals. Co-creation is an essential part to making a difference and will underpin the sustainability of the changes.

Which national clinical or policy priorities does this example address?

From NHS Five Year Forward View:

- Incentivising and supporting healthier behaviour
- Targeted prevention
- NHS support to help people get and stay in employment
- Empowering patients.

Plans for the future

The WMAHSN has managed to secure additional funding to allow the programme to continue for another 12-18 months and to provide additional coaching support to others wishing to make a difference and to expand the cohort of difference makers.

Tips for adoption

- This programme has been successful based on the enthusiasm and energy of the people that self-selected themselves to be part of this journey. The vision of making 1,000 differences with 500 changes makers meant that we had a target, and soon people realised that we could go above and beyond this and show real tangible differences
- We found that people just needed the confidence and support of people who were just as passionate in making changes in order to deliver true life changing improvements to the way that they went about their day-to-day jobs
- Providing regular support and coaching was beneficial in ensuring that people managed to protect their time to think and implement the changes. Bringing the group of change makers together regularly is useful in sparking new initiatives or learning about what has been achieved.

Contact for further information

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