







Making diabetes ordinary so our children and young people can be extraordinary

Purpose:

To improve patients/parents experience of clinic attendance Equity across all clinics/sites

Our Journey So Far





Process map





Our Interventions



The one idea we have progressed the furthest with is:

Unified MDT clinic sheet

A series of adaptions included:

Several drafts of a new MDT clinic sheet One person to fill in the sheet in clinic, allowing other team member

to engage with the family

Time scale of work done 6 months

How you have measured that it is improving care Staff feedback via survey monkey.

NPDA data (ongoing progress).

Patient survey due to be sent out in near future (baseline

information collected). How you are sustaining progress

Team meeting updates

Enhanced communication

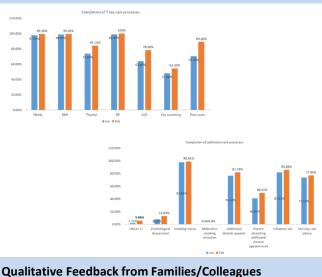
Developing protocols / processes

Trialling in one area with the aim to role out to everyone.

Our Team



Outcome Data









the role of MDT Yes-48 team members

Bright Spots

- Roll out of unified clinic sheet
- Clarity of role within MDT
- Identified the problem with the booking office and working with them to sort out the 4 appointments/year
- Appointment of Psychologists
- Improved communication amongst the MDT team members
- MDT team leaflet/newsletter

Covid Adaptation

- Change in roles
- Drive through HbA1c clinics
- Attend anywhere MDT clinics
- Establishment of Annual review face to face clinics

Before Now



Multiple clinic sheets / Multiple people writing Poor engagement from team members with patients & families



One clinic sheet for all One person writing Better engagement from team members with patients & families More structure to the clinic appointment

Further Actions

- Continue to work with booking centre team to improve the appointment system
- Sought greater involvement of the families in diabetes MDT meetings
- QI process helped to develop a culture of thinking outside the box to improve the patient care