

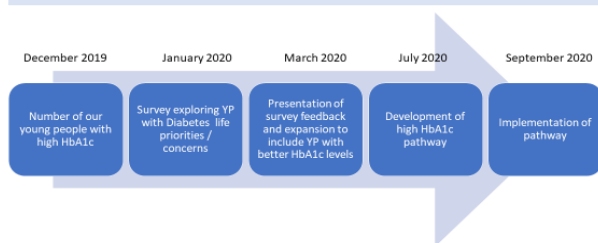
Improving our service for young people living with a high HbA1c (>70mmol/mol)



PDSN's Julie Bond, Michelle Smith, Amy Beech
Consultants: Dr Camelia Vaina, Dr Tamsyn Nicole
Paediatric Dietitians: David Hopkins, Kathryn Ferguson

Purpose: To explore barriers to achieving compliance with treatment that would result in a reduction in HbA1c. To implement a care plan with the aim to achieve reduction in HbA1c of 10mmol/L over a 3month period

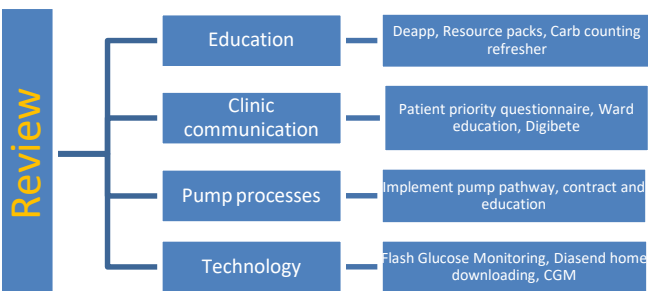
Our improvement journey- the steps we took



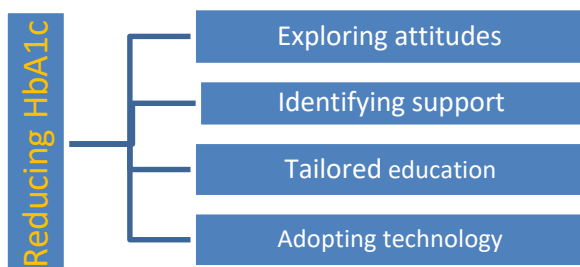
Qualitative Feedback / Bright spots

- Positive feedback on the team from patient survey
- Willingness to make changes: 70% respondents
- Better insight into motivational factors and barriers to change
- Patient priority questionnaire to clarify what they want to talk about in clinic.

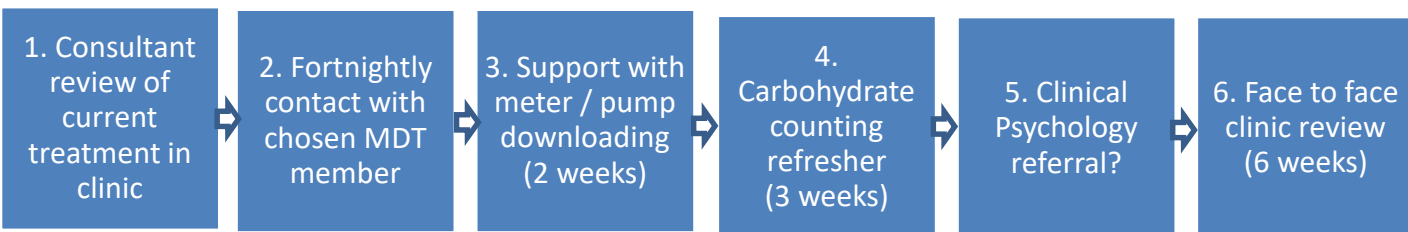
Fishbone analysis



Driver Diagram



High HbA1c pathway



Our Interventions

- Review of clinic organisation:**
 - YP questionnaire: 2 things they want to discuss
 - Identifying YP priorities prior to clinic review
 - Keeping to time: New clinic start time 8.45am
- Development of a High HbA1c pathway:**
 - Discussion with Consultant
 - Identify possible barriers to compliance
 - 2 way expectations and support

Further Actions

- Implementation of High HbA1c pathway**
 - New ways of working as a team – opportunities for further patient education within the MDT clinic
 - Further development of Dietitian's resources for education
 - Technology implementation group (pump + online resources)