

Norfolk & Norwich

Our QI Journey So Far



The Jenny Lind Children's Hospital Diabetes Team

**Paediatric
Diabetes
Specialist Nurses**
Suzanne Lee
Jo Gibbons
Faye Stubbs
Paul Hill
Louisa Fear

Admin Team
Bobbie Kemp
Caron Leftley
Linda Fish
Tasha Sharrocks
Devon Coidan
Carol Long

**Paediatric Diabetes
Specialist Dietitians**
Lucy Findlay
Nishti Ismail



Doctors
Vipan Datta
Emma Webb
Jo Veltman
Ravi Alanoor

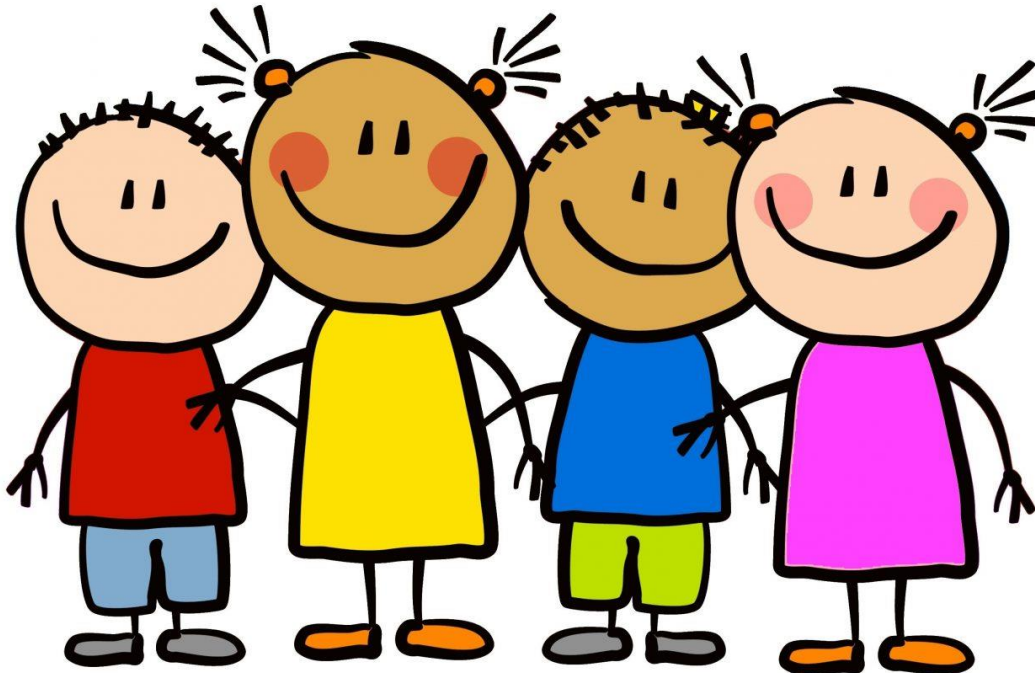
Healthcare Assistants
Sarah Poore
Amy Eagle
Bianca Rudd
Beth Thomson

Psychology
Jo Derisley

Managers
Colin Whatley
Lisa Hunt
Laura Schaffer

Mission Statement

To provide a service which empowers young people and their families to self manage effectively

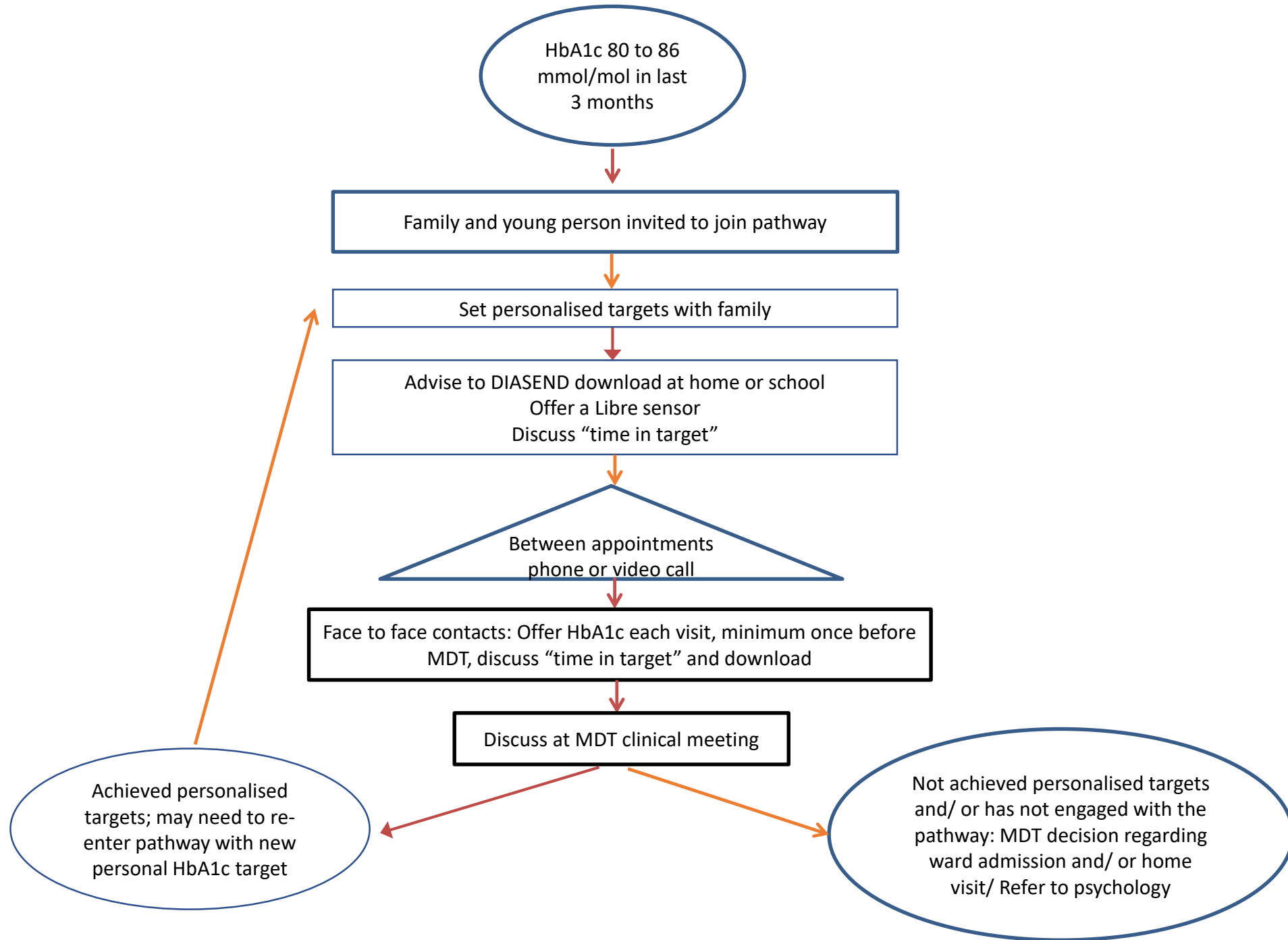


Our Improvement Projects

1. Implement above target HbA1c pathway
2. Review and improve annual review process
3. Increase the percentage of patients able to download from home

High HbA1c Pathway Achievements

- Setting criteria for pathway inclusion
- Agreeing a pathway
- Setting up new/ extra clinics for pathway patients
- Increasing frequency of checking HbA1c and improved recording on spreadsheet
- Identifying suitable patients for pilot
- Reviewing pathway and discussing potential patients in weekly QI Meetings

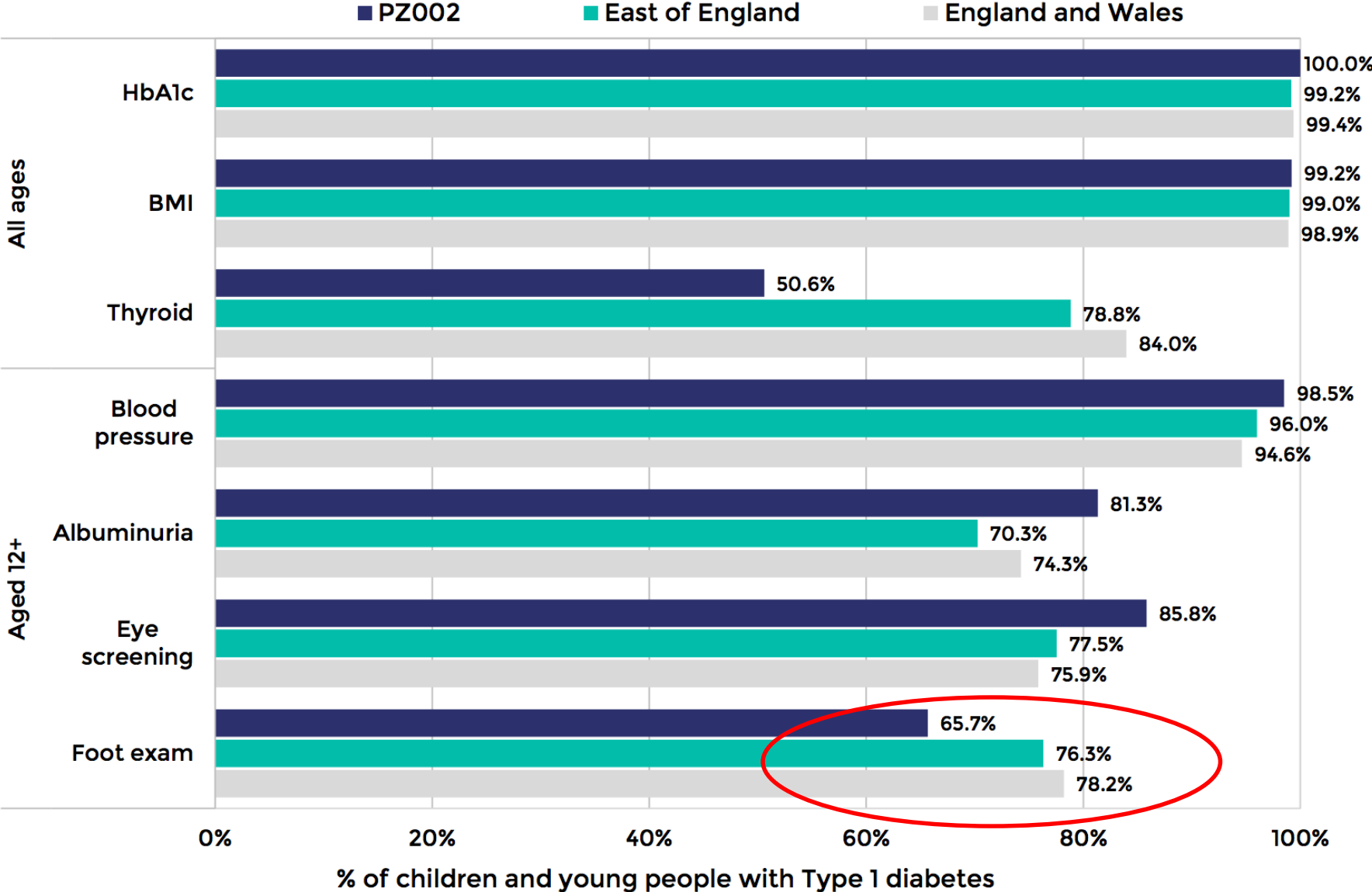


HbA1c Pathway

Challenges

- Large team , making whole team communication difficult
- Setting inclusion criteria
- How to identify and select patients from eligible group
- Limitations on clinic day/ time options and impact on patient attendance
- QI clinics currently not MDT- (referral to dietetics and psychology)
- Review pilot due at week 8, to assess and plan way forward
- Inpatient admissions: will there be bed availability and staff resources

Figure 8: Percentage of children and young people with Type 1 diabetes who received each of the seven key health checks



Annual Review processes

Plan

Format reviewed to aim to maximise number of patients receiving care process .

Quarterly topic

- April to June; foot examination, Smoking, psychology assessment
- July to Sept ;annual review bloods
- Oct to Dec ; additional health checks
- Jan to March ; review and “ catch up”

Achievements

- Nurses (and doctors) to learn how to do the foot exam
- Agreed recording system (Diabeta 3)

Challenges

- Getting used to new format / some decisions still need team agreement
- Need to agree content of annual review appt
- Face to face training for nurses still to take place
- Unable to extract data form online system
- Dietitian require room availability to have *Annual Review appointment (as apposed to just an offer as currently poor uptake)*
- Admin time to support reviewing effectiveness of new system/To improve the % of processes achieved

Downloading

Achievements

- Information and equipment given at diagnosis
- VIP Paperwork customised for team use
- Letter to schools drafted to promote their support with downloading

Challenges

- Time pressure on team to support set up
- Not all families have computer access
- Multiple devices with different systems
- Some families' have objected to data sharing due to potential data security issues
- Too early to assess impact and no discussion , as yet , about what success will look like .

The Way Forward !

1. Continue with weekly meetings.
2. Improve communication and aim to meet the challenge of involving all members of a large team and having all voices heard
3. Evaluate / audit progress/ reassess plan if needed
4. Consider small group working
5. Don't give up

| | Mean | Median |
|--------|-------------|---------------|
| Dec-18 | 64.2 | 61.5 |
| Jan-19 | 63.5 | 61 |
| Feb-19 | 63.5 | 61 |
| Mar-19 | 58.9 | 60 |
| Apr-19 | 59.5 | 60 |