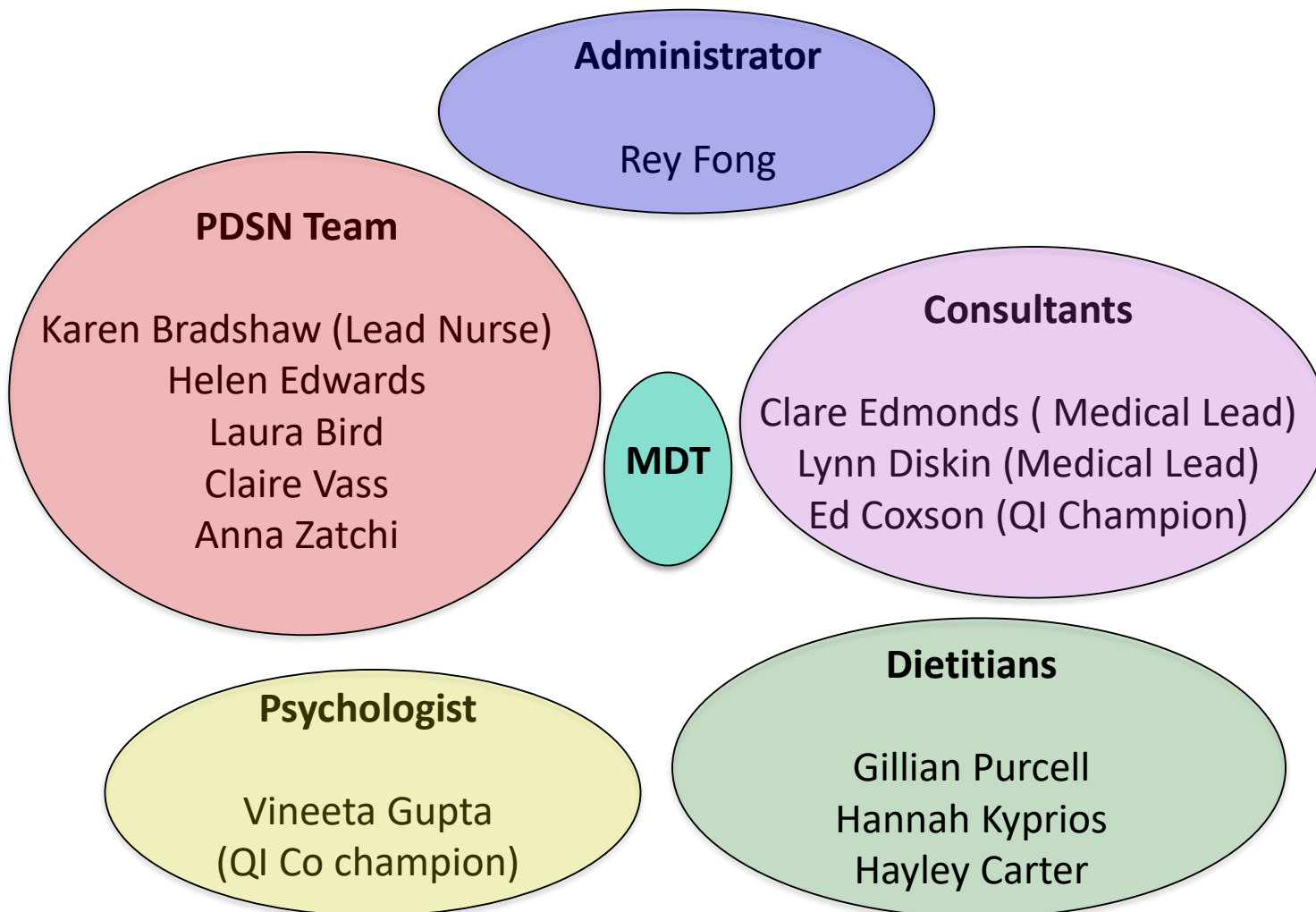


# RUH Bath

## Our QI Journey So Far



# Royal United Hospital Bath NHSFT Paediatric Diabetes Team

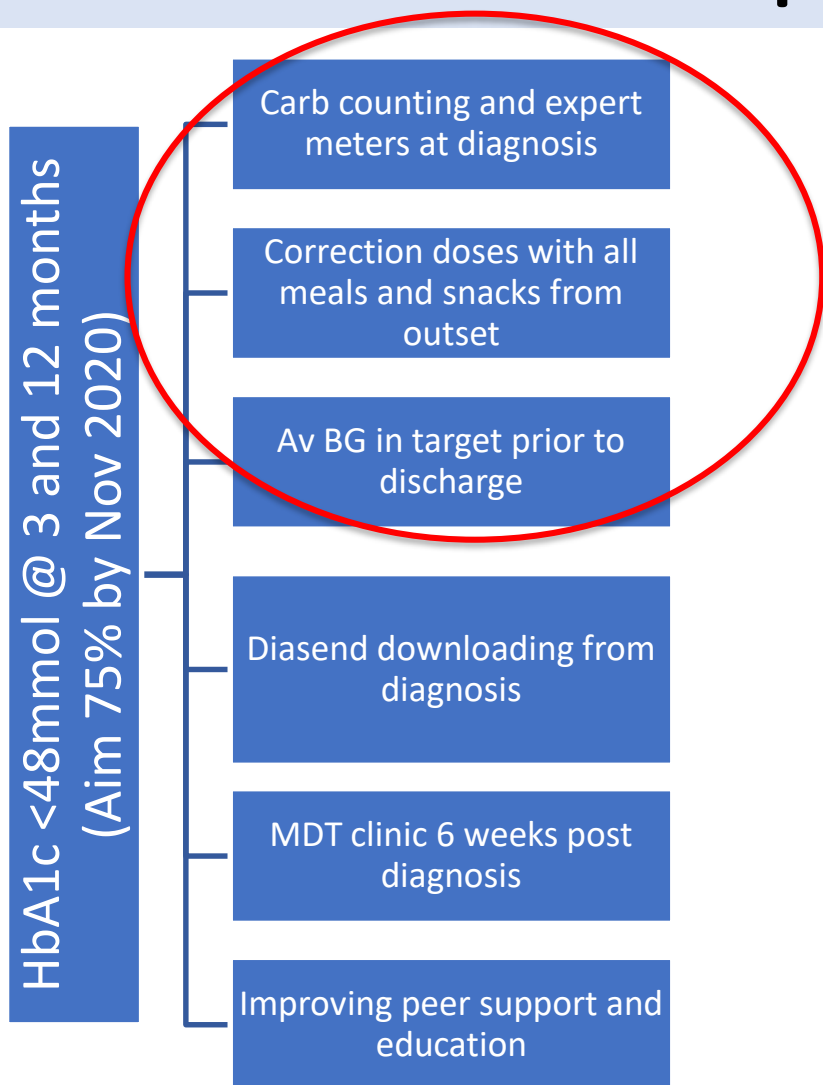


## Paediatric Diabetes Team MISSION STATEMENT

- Everyone Matters** - We work to empower people to have a positive and healthy relationship with diabetes
- Working Together** - For continuous improvement and the best possible outcomes for young people with diabetes
- Making a Difference** - By treating everyone with compassion, respect and fairness, providing an equitable service

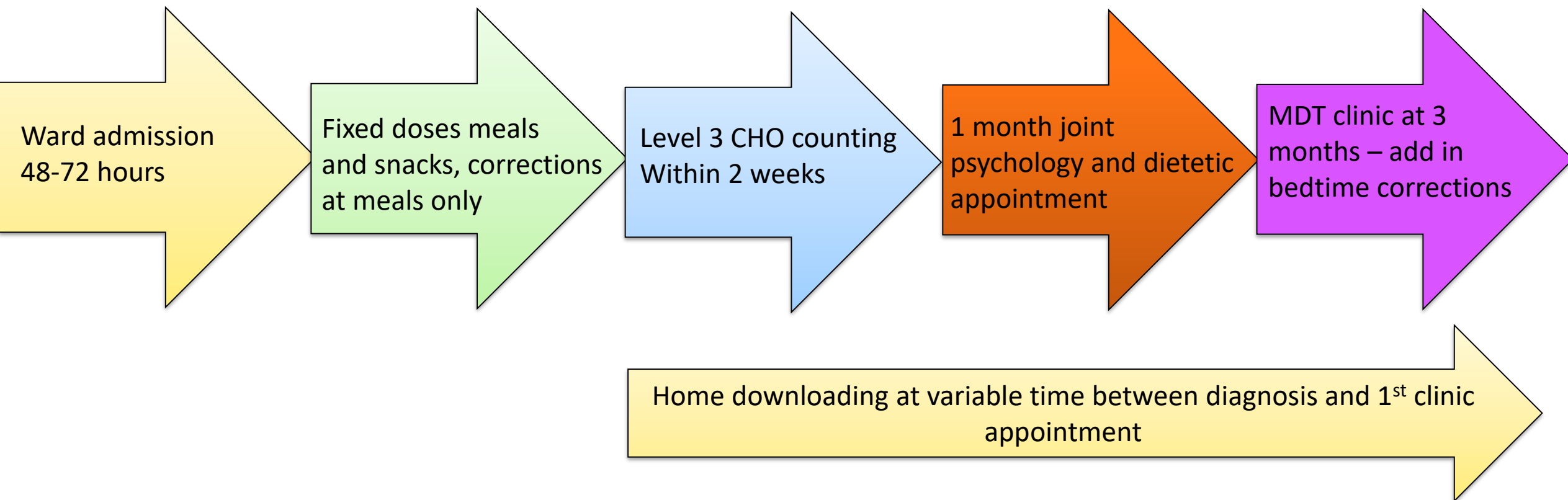


# Our purpose and our areas of work: Improving new patient pathway



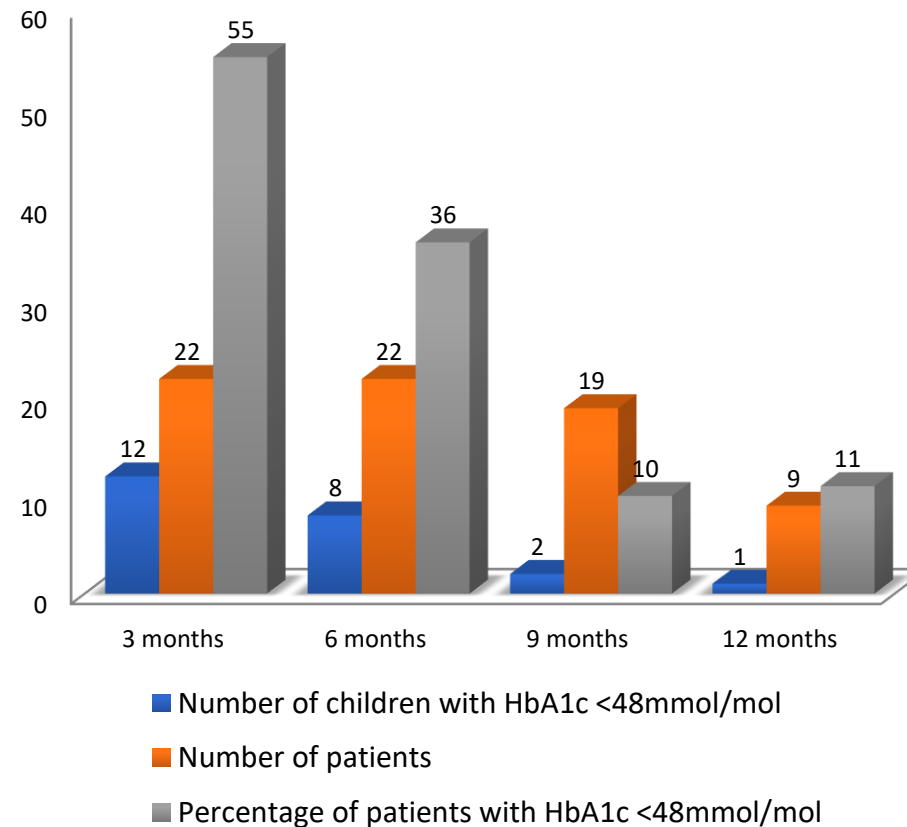
- Idea we have progressed the furthest: Carb counting and expert meters at diagnosis
- Series of adaptations to new patient pathway from Nov 2018 until now
- Outcome measures
  - Average BG at discharge
  - Average BG at D28
  - HbA1c (clinic schedule)
- Process and Balancing measures identified - eg days to carb counting /overnight BG checks

# Our workplace Pre QI: Process map of newly diagnosed pathway

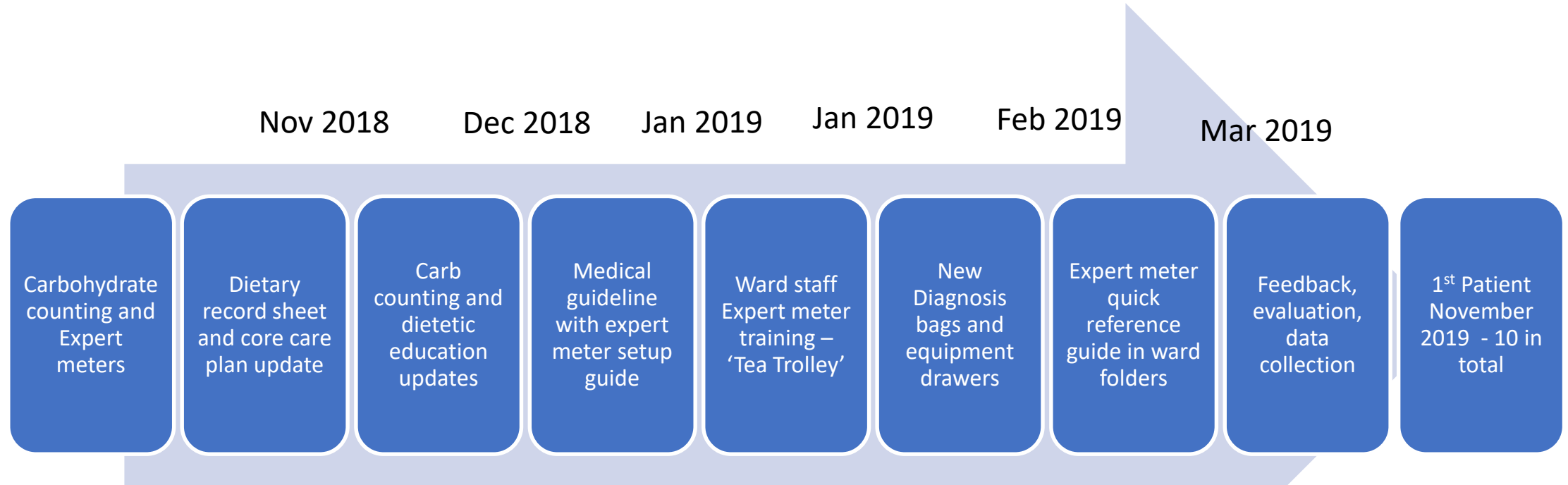


# Our workplace Pre QI - New diagnosis patients HbA1c data (2018)

HbA1c (mmol/mol)	3 month	6 month	9 month	12 month
Mean (SD)	50 (38-62)	56.9 (40-74)	62.5 (48-77)	62.2 (46-79)
Median (IQR)	48 (43-55)	50.5 (46-61)	56 (52-72)	63 (52-69)
Number of patients	22	22	19	9



# Our improvement journey- the steps we took



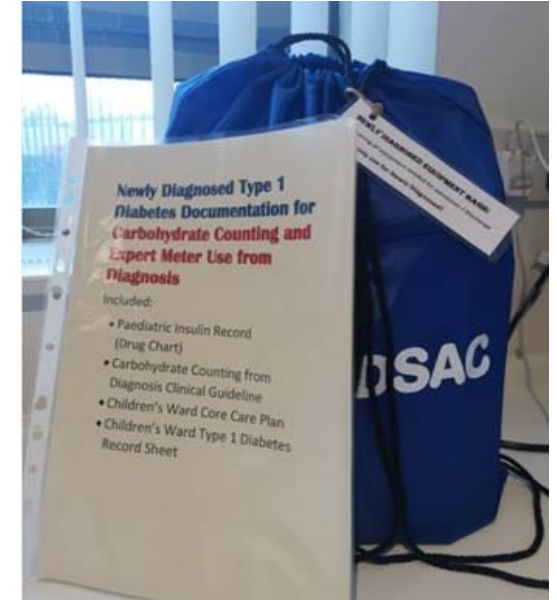
# Our workplace post QI



Infectious enthusiasm  
post QI weekend – Nov  
2019



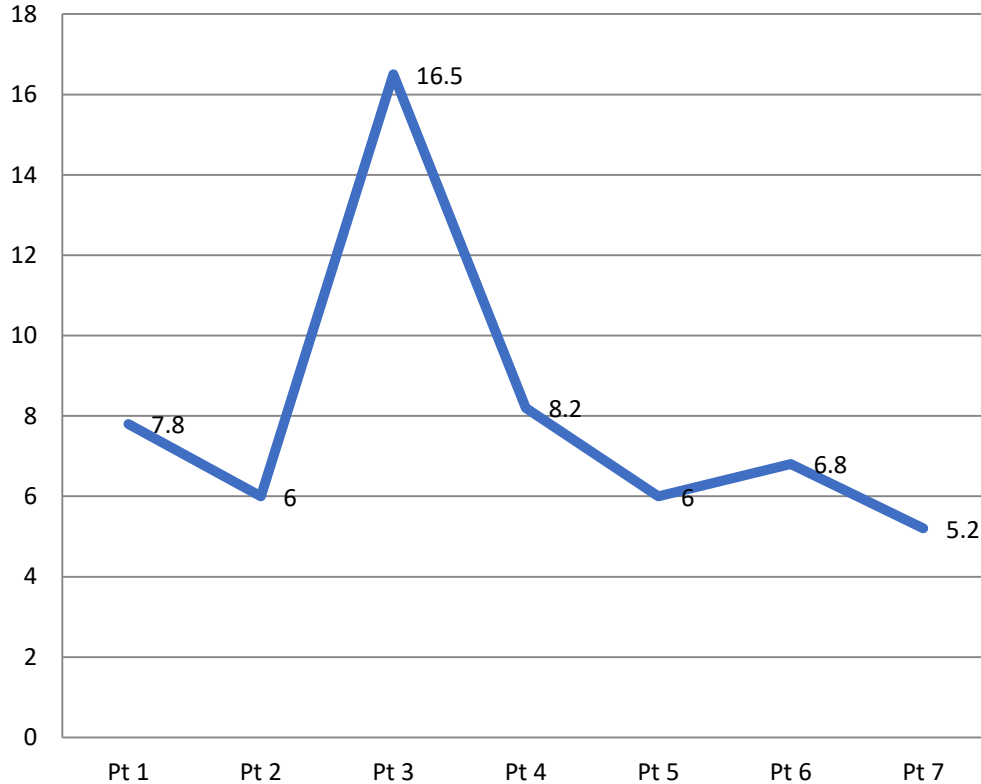
Makeover for inpatient ward diabetes  
drawers Dec 2019



Make change easy to  
implement – New  
diagnosis bags – Dec  
2019

# The Impact so far – Average BG and HbA1c data

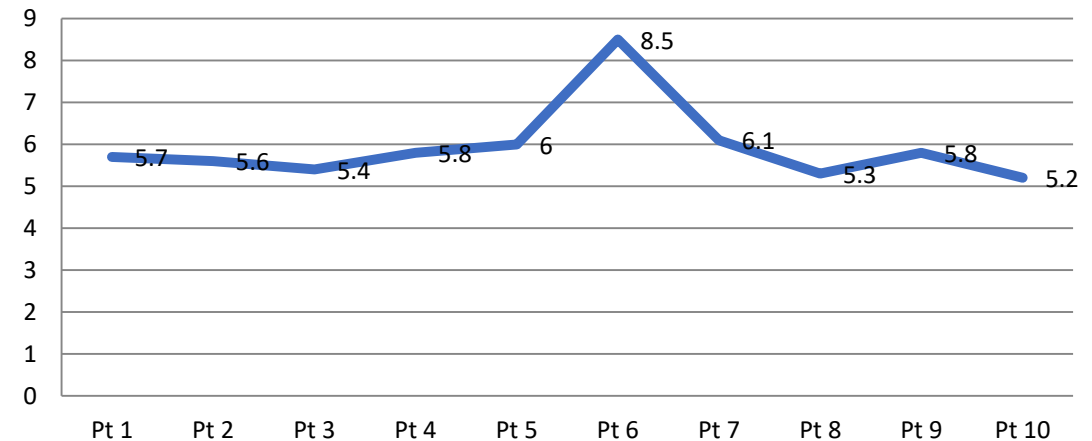
Pre QI Av BG D28



Mean Av BG = 8.0mmol, Median Av BG 6.8 mmol

	Pt 1	Pt 2	Pt 3	Pt 4	Pt 5
HbA1c @ 3 months	38	48	45	51	52

Post QI D28 Av BG



Mean Av BG = 5.9mmol, Median Av BG 5.7mmol



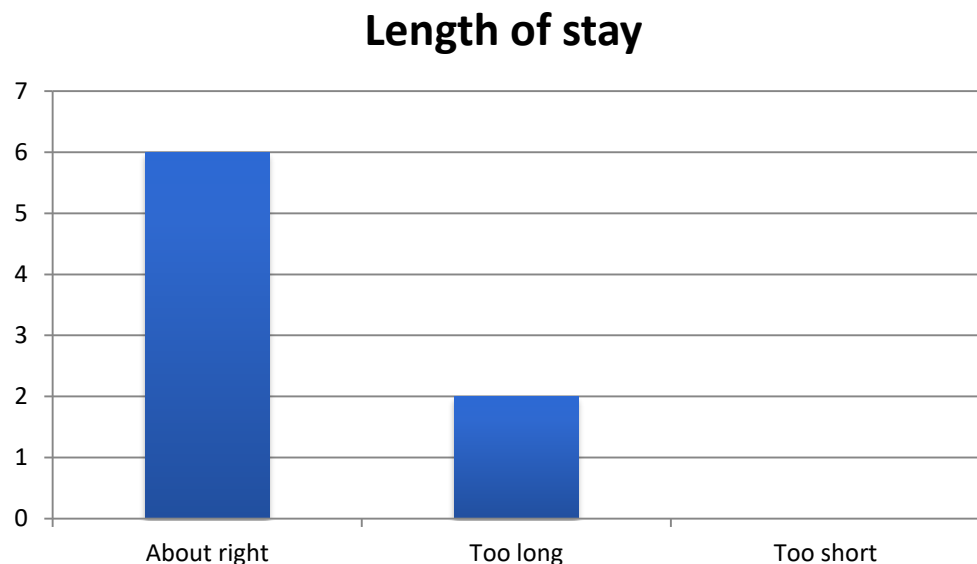
# Data – Measure as much as you can!

	Average BG at discharge	Days to CHO counting	Length of stay - working days not in DKA	Download before discharge	Hypoglycaemic episodes during admission	Overnight checks D28-30	Percentage hypo (D28)
Pt 1	7.3	3	3*	Y	1	N	14%
Pt 2	8.5	0	6*	Y	0	N	25%
Pt 3	8	2	2*	N	0	Y	31%
Pt 4	8.1	0	4	Y	0	N	16%
Pt 5	8.8	0	2	Y	0	N	10%
Pt 6	8.2	2	7*	Y	0	N	10%
Pt 7	5.5	1	4*	Y	3	Y	2%
Pt 8		0	5	Y	0	N	20%
Pt 9		0		Y	0	N	14%
Pt 10	8.2	0	5	Y	0	N	16%

\* DKA on admission

# Patient and service user feedback

- 7/10 new patients completed feedback questionnaire at discharge or first MDT clinic



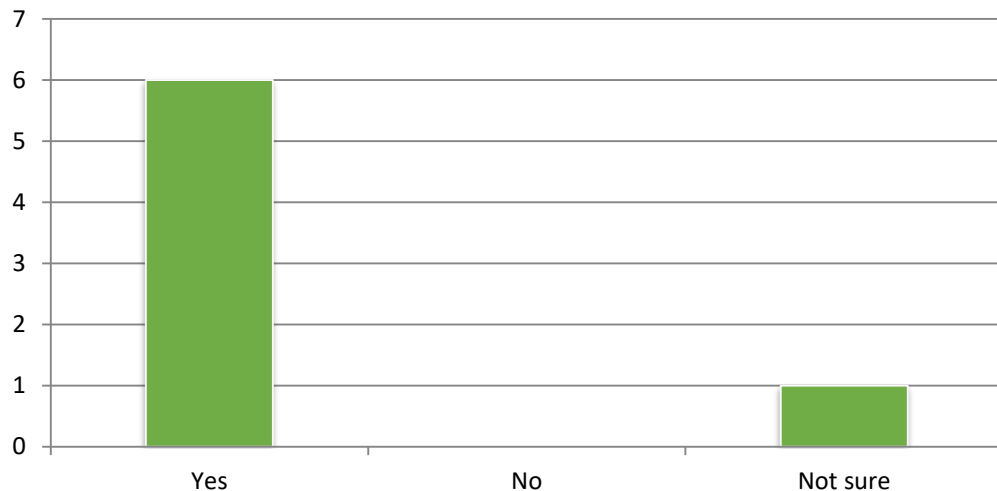
*“We felt it was long enough for us take in all the information”*

*“Was very long for a young child”*

# Patient and service user feedback

- 7/10 new patients completed feedback questionnaire at discharge or first MDT clinic

Consistent advice during admission?



*“Lovely friendly nurses and doctors who put us at ease”*

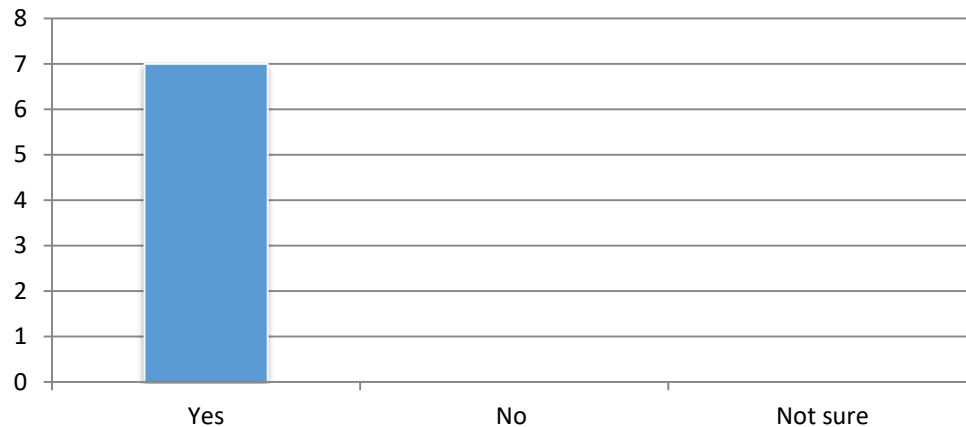
*“The advice was good overall but not always the same between nurses”*

*“Even better if everyone had same training –night staff were unaware of new procedures”*

# Patient and service user feedback

- 7/10 new patients completed feedback questionnaire at discharge or first MDT clinic

Confident to manage diabetes at home?



*“Education programme was thorough and lots of support”*

*“The folder was useful for reference and great to have contact numbers when needed*

*“Weighing food would be great too”*

# Ward staff feedback

*“ we can go for long periods of time without seeing diabetic patients”*

*“ we are all feeling much more confident now”*

*“at times we have felt criticized by the diabetes team”*

*“it would be useful to have regular meetings between the band 7’s”*

# What have we learnt and how are we building that learning into our daily work

- Enthusiasm is key
- But not always a substitute for planning!
- Impact on stakeholders
  - Make adopting change as easy
  - Don't assume everyone knows
- Learning from dark spots
- Actively seek feedback – good and bad!
- We can't all agree on everything – value of tests of change
- Share bright spots to maintain momentum
  - Ward staff
  - Adult diabetes team
  - Newsletters

# What have we learnt and how are we building that learning into our daily work

As a team, during this project, we've been much better at 'doing' instead of discussing around and around!



# One barrier that is bugging us

- Admissions spanning weekends and use of home leave
- Challenge of discharge on a Friday and available support
- Maintaining momentum throughout 1<sup>st</sup> year



4 hours 7 minutes  
>£2000 raised!