

## **AGENDA ITEM**

### **REPORT TO HEALTH AND WELL BEING BOARD**

**25 JANUARY 2017**

## **UPATE ON DIABETES - PREVENTION AND CARE**

### **SUMMARY**

The Board received a briefing and presentation in June 2016 regarding diabetes care and prevention. This paper proposes the way forward to respond to the Board's discussion and recommendations.

### **RECOMMENDATIONS**

It is recommended that the Board facilitates the establishment of a time-limited task and finish group to take forward the Board's recommendations.

### **DETAIL**

Following the presentation and discussion on diabetes prevention and care that took place in June 2016 the Board identified that it wanted to see improved leadership in primary care for diabetes, reduced variation in clinical care across primary care for diabetes and improved clinical management of patients which included effective support for self-care. Education for patients within the care pathway was seen as key along with a stronger focus on prevention.

In order to progress the Board's recommendations it is proposed that a time-limited task and finish group be established to report back to the Board. The group should identify:

1. How the prevention of diabetes will be improved.
2. How people living with undiagnosed diabetes will be identified and how the number of individuals diagnosed will be increased;
3. How the number of people with newly diagnosed diabetes receiving structured education and support will be increased (4.7% in 2012/13, England average 4%);
4. How General Practices will improve the quality of care for people with diabetes and how Practices will address unwarranted variations in the quantity and quality of care;
5. Capacity and demand within the foot care pathway, including how the need for foot care is identified and responded to;
6. How the proportion of general practices participating in the National Diabetes Audit will be increased (43.9 % participated in 2014/15);

7. How secondary care providers respond to the needs of patients admitted to hospital who have diabetes, ie, how patients are assessed and managed during their hospital stay and discharge.
8. How commissioners across NHS England, CCG and Local Authority will work together to improve the treatment pathway for overweight adults and children.

The task and finish group will also support the development of the diabetes work within the STP.

## **Group Membership**

It is proposed that membership of the task and finish group should include:

Public Health  
HAST CCG  
HASH GP Federation  
North Tees & Hartlepool NHS Trust  
Catalyst

It is anticipated that the group will be in a position to report back to the Board in June 2017.

Public Health will lead the co-ordination of the group.

## **FINANCIAL IMPLICATIONS**

There are no immediate financial implications associated with this report. The Director of Public Health has identified a non-recurrent amount of £100,000 to support progress of the recommendations to be presented to the Board. Commissioning issues identified during the project will be presented to the Commissioning Groups that report to the Board.

## **LEGAL IMPLICATIONS**

None

## **RISK ASSESSMENT**

None

## **CONSULTATION**

None.

<b>Name of Contact Officer:</b>	<b>Sarah Bowman-Abouna</b>
<b>Post Title:</b>	<b>Director of Public Health</b>
<b>Telephone No:</b>	<b>01642 524296</b>
<b>Email address:</b>	<b>sarah.bowman2@stockton.gov.uk</b>