

## GGC Diabetes MCN Type 1 priorities workshop notes

5/2/19

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Notes compiled by Helen Hopkinson

Participants were encouraged to think of a SMART goal with 3 action points achievable within a 12 month time frame

Participants selected 1 of three priority areas to work on:

- Increasing T1 diabetes structured education capacity (Helen Hopkinson)
- Transition (Brian Kennon)
- Improving outcomes in adults with newly diagnosed T1D (Amy Cowan)

### **Increasing structured education capacity**

**Goal:** each DAFNE trained educator delivers 1 extra course per annum by summer 2020

**Action 1:** delegation to Board to include a person with T1D to request Board unfreezes 2 vacant diabetes dietetic posts in Clyde

**Action 2:** trained DAFNE educators schedule 1 additional DAFNE course (above their usual quota) in next 12-18 months and consider a change to current process of course allocation. For example introduce more priority categories like high HbA1c and recurrent DKA in addition to current urgent categories of hypo unawareness and SH episodes.

**Action 3:** scoping exercise of NHS England resource centre and SDG diabetes resource centre to see if there are any developed interventions for “hard to reach” adults who can’t or won’t attend DAFNE

### **Transition**

**Goal:** Implementation of the Health Board’s existing commitment to develop a 0-25 service between paediatric and adult diabetes services

**Action 1:** establish a new MCN subgroup for paediatric and transition diabetes: agree at next MCN steering group?

**Action 2:** ask the Board to clarify its position on supporting the previously agreed plan for transition service development. Timescale of 4-6 weeks (end of March 2019) to clarify the action plan and at 12 months (March 2020) significant progress in delivering that plan.

**Action 3:** ask the Board to clarify the ongoing provision of 'real estate' for paediatric diabetes services with the proposed imminent closure of Yorkhill

**Action 4:** build a case for ongoing psychology support for transition diabetes (currently zero funding for psychology after the age of 16) by June 2019.

### **Improving outcomes in adults newly diagnosed with T1D**

**Goal:** Board-wide, achieve >58% of people with a mean HbA1c at 12 months after diagnosis of <58 mmol/mol in the next 2 years

**Action 1:** scope what is happening with the newly diagnosed at each GGC acute adult site written up for circulation by June 2019 –members of type 1 subgroup

**Action 2:** draw up common themes and agree on a basic set of essential components in the pathway by September 2019

**Action 3:** agree what technological support should be made available from diagnosis eg Freestyle Libre? by September 2019