



## Bright idea

# Transforming care for young people with Type 1 diabetes in Hillingdon

The Hillingdon Hospital NHS Foundation Trust has transformed care for young people with Type 1 diabetes by integrating multidisciplinary (MDT) clinics and psychological therapy groups into local secondary schools – making care more accessible and reducing the need for lengthy periods away from school. Since the launch in April 2013, attendance has increased from 70% to 98% and the average time spent away from class per appointment has reduced from five hours to 30 minutes.

## The case for change

Type 1 diabetes can make school life more difficult. Hillingdon has around 100 young people with Type 1 diabetes under 16 years and the did-not-attend (DNA) rates for clinics at the hospital peaked at 30% in 2012. DNAs were mainly due to the stigma

often experienced by young people attending hospital appointments where ‘associations with having an illness are made’. Other factors included parking issues and the pressures of catching up with missed classes.

## The model of care



### Quick facts

**Staffing:** Paediatric diabetes consultant, paediatric diabetes specialist nurse, paediatric specialist dietician, paediatric diabetes psychologist

**Clinics:** Morning clinics held quarterly in four secondary schools

**Number of appointments per clinic:** 6 to 10

**Appointment duration:** 30 to 45 minutes

**Cost:** Funded within existing budget for paediatric diabetes/Paediatric Diabetes Best Practice Tariff

The Trust identified the four schools with the highest prevalence of Type 1 diabetes and worked with head teachers to setup the MDT clinics. Treatment and support provided by the paediatric team includes:

### Diabetes treatment and support

- ‘Coaching for health’ style consultations
- Biomedical monitoring
- Medication prescribing
- Technology support eg insulin pumps and glucose meters
- Additional support for poor glycaemic control.

### Dietetic and psychological support

- Food and nutrition education
- Behaviour change techniques to support diet management
- School meal monitoring (informing advice for eating at school)
- Psychological therapy groups.

### School staff education and support

- Diabetes awareness training (held regularly after MDT clinics)
- Support to prevent recurrence of incidents eg hypos in PE classes.

## Focus point

### Psychological therapy groups

Psychological therapy groups are provided in schools to encourage young people to talk about and share their experiences. The groups (run separately to the MDT clinics) include six to eight sessions with the psychologist and typically involve a combination of cognitive behavioural therapy, motivational interviewing and externalising in a narrative therapy.

Clinic space (normally a classroom) is booked in advance with school welfare officers and appointment letters sent to parents. Parents are encouraged to attend MDT clinics and young people leave classes only when required, reducing appointment waiting times.

Appointments last up to 45 minutes and young people will normally be seen by the consultant, specialist nurse and dietician. The MDT clinic is equipped with

the following: virtual private network (VPN) enabled laptop (for access to electronic patient records and test results), portable HbA1c testing machine, portable aneroid gauge, height/weight measurement scales, glucagon, pump kit, consumables and sharps bin.

After MDT clinics, a record of care is sent to parents and individual healthcare plans (IHPs) are updated and fed back to school welfare officers and nurses.

## Focus point

### Individual Healthcare Plan (IHP)

An IHP details exactly what care a young person needs in school, when they need it and who is going to give it. This should be developed with input from the young person, their parent(s)/carer(s), their healthcare professional(s) and school staff. For more information about what should be included in an IHP and to access a sample plan, go to <http://www.diabetes.org.uk/Guide-to-diabetes/Schools/IHP-a-childs-individual-healthcare-plan/>



The school run - On the way to an MDT

## Outcomes

- Increase in MDT clinic attendance from 70% to 98% (of 92 appointments in 2013/2014).
- Reduction in average time spent away from class per appointment from five hours to 30 minutes.
- Decrease in diabetes-related incidents reported by school staff.
- Increase in patient satisfaction – 97% of young people and their parents would recommend the MDT clinics to family and friends.

**“There is nothing we do for young people with Type 1 diabetes in hospital that we can’t do in schools and other community settings.”**

Paediatric diabetes consultant



You can get more information by emailing [sharedpractice@diabetes.org.uk](mailto:sharedpractice@diabetes.org.uk)