

AUTHORS

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INTRODUCTION

There is a large number of the younger diabetic population under paediatric monitoring teams at hospital locations. To ensure continuous care, we carry out validations on this group regularly and send DESP results to the local hospital sites.

The purpose of this validation is to ensure open communication between hospital paediatric services and DESP. By making sure we are aware of all younger individuals with diabetes who are under a paediatric consultant, any screening results can automatically be sent to the hospital as soon as they are graded. A quarterly report with the latest results is extracted and this is sent with the reasons (if known) why any of these individuals have not attended within the last 12 months, so they can be encouraged at their next diabetologist appointment with their consultant to book and attend a DESP appointment.

METHODOLOGY

There are 21 hospital paediatric teams across our 5 DESPs. A list of individuals over the age of 12 with diabetes are requested from each hospital site every 3 months. Upon receipt, a comparison is made between the NHS numbers received by the hospital and ours listed on Optomize. Those who are on Optomize but not on their list will need these demographics removed from their record, as they are no longer being seen by the paediatric team for their diabetes care. Any individuals not within our DESP area any longer are sent back to the hospital, so they are aware to chase the correct DESP.

Before the results are extracted, we first check to see if the number on our system match with the hospital. Results are then extracted and filtered for each paediatric site, to ensure we are only sending the relevant information to the hospital. Diabetic individuals without any DESP results in the last 12 months are highlighted and investigated further to determine the reason, whether this is non-attendance of appointments or cancellations or not responding to invitations. The paediatric teams are requested to encourage these to book a DESP appointment as part of their diabetic care.

Below is an example of the results reports we sent to the various hospitals. The rows highlighted in red show those who did not attend their appointments. Yellow show those who were last seen over a year ago. Green cells show future appointments in place, while green rows show patients who have attended.

Patient Identifier	Patient Name	Date Of Birth	Age	Peadiatrician Name	Last Screened	Reti- nopa- thy Left	Macu- lopa- thy Left	Reti- nopa- thy Right	Macu- lopa- thy Right	Worst Grade	Screening Outcome	Next Appointment Date	NPDAC ode	NPDA De scription	DESP Comments
XXX XXX XXXX	Example Patient	DD/MM/YYYY	YY	Dr Y Paediatrician	20/02/ 2015	RO	MO	R1	МО	R1M0			2	Abnormal	DNA APPTS 14/10/22 AND 12/10/24. DUE OCT 2024.
XXX XXX XXXX	Patient Example	DD/MM/YYYY	YY	Dr Y Paediatrician	22/08/ 2023	RO	MO	RO	MO	ROMO	Annual recall	20/08/ 2024	1	Normal	
XXX XXX XXXX	Test Patient	DD/MM/YYYY	YY	Dr Y Paediatrician	06/07/ 2023	RO	MO	R1	МО	R1M0	Annual recall		2	Abnormal	Seen 12/07/24. In grading
XXX XXX XXXX	Patient Test	DD/MM/YYYY	YY	Dr Y Paediatrician	21/07/ 2023	R1	MO	RO	MO	R1M0	Annual recall	22/07/ 2024	2	Abnormal	Within ± 6 Weeks
XXX XXX XXXX	Example Test Patient	DD/MM/YYYY	ΥΥ	Dr Y Paediatrician	14/04/ 2023	RO	MO	RO	MO	ROMO	Annual recall	26/07/ 2024	1	Normal	Pt called to cancel and rebook

Interim Results **-8.09%** Rate of DNAs **Quick view** 8.09% drop in DNA rates ~ 1300 total patients across all programmes ~ 1000 patients attended over the last 12 months ~ 79% attendance rate ~ 20% DNA rate 38% of DNAs have since attended Per Programme Between October 23 and April 24: • BSW: -23.14% • CM: -11.94% • Dorset: -9.41% • SWL: -8.89%

From the figures above we can see that for the majority of programmes there has been a drop in the DNA rate. Overall this equates to a average drop across all programmes of -8.09% in DNAs. There has been a small increase in DNA rates within Surrey.

• Surrey: +12.95%

Great Western Hospital

"We receive results for our patients quickly following appointments. All other communication is excellent and any queries regarding our patients dealt with promptly. This service is a great asset to our team and the information provided invaluable."

East Surrey Hospital

"Provision of results from your service is amazing, all arrive in timely manner. I could not wish more. You are very good and quick response for any enquires. It is a pleasure working with you."

SUMMARY OF INTERIM RESULTS

Whilst we request lists on a quarterly basis, the validation depends on the timely response of each hospital site. Further holdups include individuals not being coded/referred to DESP by their GP in a timely manner, meaning these patients may be under the paediatric team but will not yet be registered on DESP.

The majority of DNAs are currently unknown making up around 60% of the total DNA reasons. The creation of automatic did not attend (DNA) and did not respond (DNR) letters is currently in progress, allowing us to notify the paediatric teams of DNAs, as well as non-responders to open invites, outside of the quarterly validation. This will enable the paediatric teams to contact these individuals earlier, rather than waiting for the validation results, hopefully lowering DNA rates.

We have also recently sent the hospital paediatric sites a list of those who are serial non-attenders so they can encourage them to attend screening. Appointment reminders are now sent via email (When enabled) to parents (12-15yrs) and the diabetic individual (16yrs onwards).

For further improvements we can refine our contacts with hospital sites so we can both encourage them to attend our appointments. Further to this there is potential for DESP or the paediatric consultants to find out the reasons for DNA and plan accordingly.