

# HEALTHIER YOU

NHS DIABETES PREVENTION PROGRAMME

Preventing type 2 diabetes in England

# NDPP Hertfordshire

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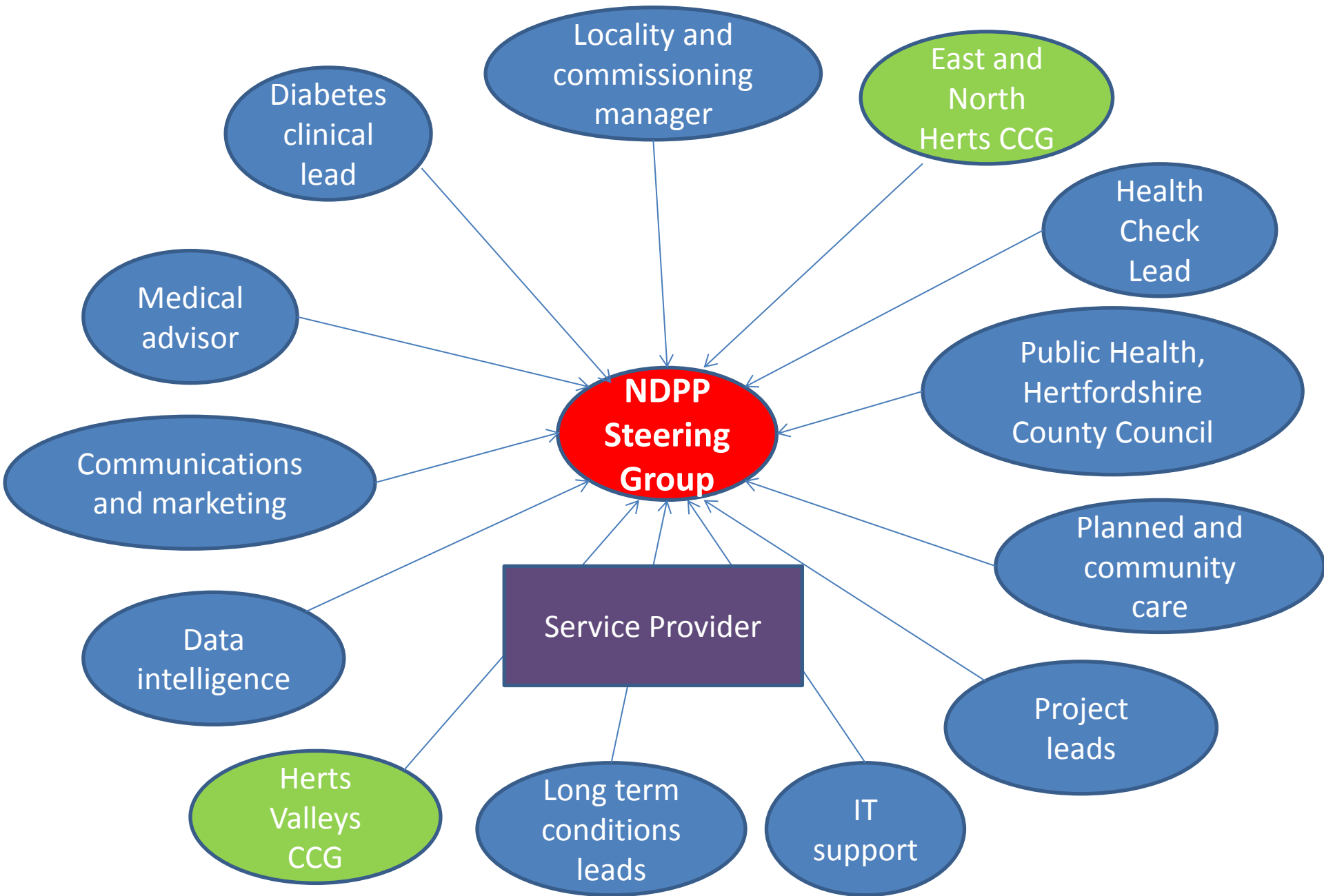
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# Overview

- Local picture
- What we did
- Outcomes so far
- What worked
- What we would do differently
- Top tips

# Local picture – Wave 1 site

- Submitted our bid in December 2015
- Appointed Wave 1 site in March 2016
- April – June 2016. Procurement and training process
- Awarded our provider in July 2016
- Mobilisation of the programme July – October 2016
- Launched the programme in October 2016
  
- Programme aims 1<sup>st</sup> October 2016 – 31<sup>st</sup> July 2018
  - Refer 6346 eligible patients
  - Expected uptake 2538 (40%)



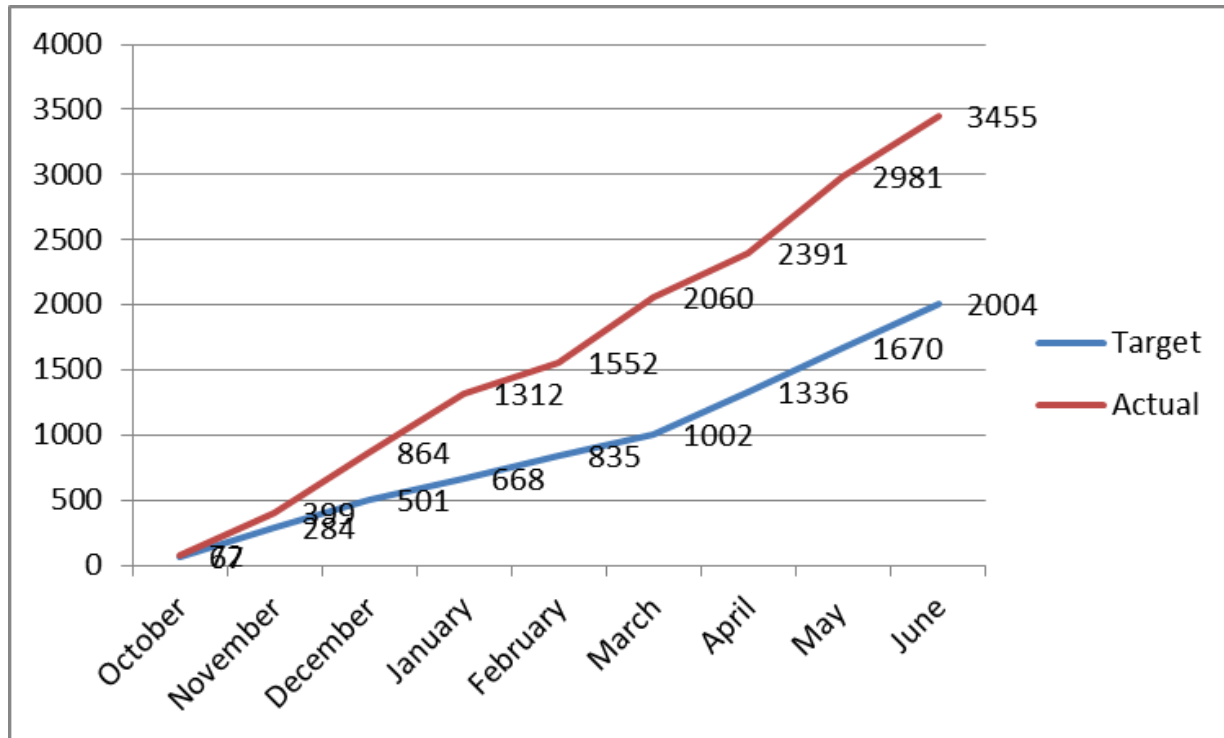
# What we did

- Identify eligible patients – 2 phases
  - Create reports/searches for all GP clinical systems
  - Create pop-ups on all GP clinical systems for newly identified patients.
- Agree implementation approach – Year 1 approach
  - HVCCG – Mail out to eligible patients. Payment per letter.
  - ENHCCG – Mail out to eligible patients. Payment for meeting overall referral target.

# What we did

- Marketing resources
  - Patient letters
  - Leaflets
  - Screensavers for GPs
- Service provider
  - Mobilisation plan
  - Assurance – training and recruitment
  - Support – venues and contacts
- Regular communications
  - Attend locality meetings monthly
  - Practice manager meetings
  - Clinical leads meetings
  - Outreach/Events
  - CCG bulletins
  - Health Check Training

# Outcomes so far



Referrals: 3455 referrals by end of June. Target of 2004 (+1451)

Initial Assessments: 1143 IAs conducted (35% conversion) Target of 802 (+341)

Groups: 62 groups planned for year end



# What worked

- Proactive CCG project leads
- GP as a clinical champion
- Good engagement with Primary Care
- Regular communications with primary care – drip feed approach
- Regular contact with our service provider
- Links with other public health priorities – Health Checks, Stop Smoking services
- Incentives

# What we would do differently

- Phased roll out – clustered GP practices
  - Delivered almost 2 x target in the first 6 months. This has created long waiting lists and some disgruntled patients and doctors.
- Gain access to more data from our provider – conversion rates (ref to IA), waiting times
- Review other regions use of incentives
- Direct booking of referrals (admin pathways) to avoid very high rates of unable to contacts

# Top tips & next steps

- Incentives – for conversion to initial assessment and not just mail out or referral. - **Increase the quality of the referral.**
- Communications with GP practices and clinical leads – set realistic expectations. - **go back to locality meetings.**
- Opportunities to market the service – **ongoing events**
- Collect some case studies for future marketing – **just started**
- Monitor overall referral numbers and conversion rates – **35% currently**
- Support service provider – **identify new groups**
- Role of the steering group – **feedback to GPs**

# Thank you

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