

MPs call for improvements to diabetes care

Diabetes UK - Friday 22 January 2016

The Public Accounts Committee have called on the Government and the NHS to make urgent improvements to the delivery of diabetes care in England.

The Committee, which is formed of cross party MPs, made their call in a report, which has found that there has been very little improvement in diabetes healthcare in the past three years.

The report highlights that the quality of diabetes care varies far too much from area to area and that there are still far too many people with the condition who are not getting the basic recommended level of care. For example, younger people with Type 1 and Type 2 diabetes and people with Type 1 diabetes of all ages are less likely to receive the recommended level of care and have worse health outcomes.

The report also shows that the numbers of people receiving education to help them learn more about their condition varies from area to area. It is important that people with diabetes are supported to manage their condition well as this can help them to reduce their risk of serious diabetes related complications such as amputation, heart attack and stroke.

To improve the delivery of diabetes care, the Committee recommends that poorly performing areas are held to greater account and that the NHS put in place a timetable to reduce geographical variations and variations between different patient groups.

The Committee also calls on the NHS to set out a timetable to increase participation of the NHS Diabetes Prevention Programme, which Diabetes UK is working jointly with NHS England and Public Health England to develop, to 100,000 people a year.

Other recommendations in the Report include making it mandatory for GP practices to submit data for the National Diabetes Audit, and for NHS England to develop a more flexible range of diabetes education courses.

Chris Askew, Diabetes UK Chief Executive, said: "We welcome today's report from the Public Accounts Committee, which has once again highlighted that the current state of diabetes care must improve and that the NHS must take urgent action to get this right. We also welcome the report's recognition that the launch of the NHS Diabetes Prevention Programme, which we are developing jointly with NHS England and Public Health England, will be an important step towards tackling the increasing rise of Type 2 diabetes, which is largely preventable. What is really encouraging is to see how the report emphasises that the quality of diabetes care varies far too much from area to area and in particular that younger people and those with Type 1 diabetes have worse outcomes.

"The report also highlights how the numbers of people receiving education to help them learn more about their condition is very variable. Lack of care and support is reflected in the fact that around two thirds of people with diabetes don't have their condition under control, which puts them at increased risk of developing life threatening and debilitating diabetes related complications such as amputation, heart attack and stroke.

"This is a huge concern as these complications are not only personally devastating for all those involved but are also extremely costly to our already stretched health service. Diabetes costs the NHS £10 billion every year and if we don't get better at supporting people with the condition to live well this figure threatens to rise to unsustainable levels. This is why it is essential that the NHS acts on the report's recommendations and

ensures that all people with diabetes get the care and education they need to manage their condition well and that poorly performing areas are held to account.

“We only know about the differences between the quality of local services because of the National Diabetes Audit, which gathers this information. However, the number of GP practices submitting their data has been falling and now only covers 57 per cent of them. The committee is absolutely right to say that it should be mandatory for GP practices to submit data.

“Until we get better at preventing Type 2 diabetes and supporting people with diabetes to live long full lives we will continue to see high rates of premature death, devastating complications and unsustainable costs to the NHS.”