



Public Health
England

DiABETES UK
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NHS
England

National Diabetes Treatment and Care Programme

Creating a successful bid

**Based on the proposed bidding process – subject to
clearance within NHS England**

2 December 2016



The provisional application forms (1)

2 sections:

- Word – qualitative including written descriptions of plans and anticipated outcomes
- Excel – quantitative including key metrics around savings and expected improvements in clinical outcomes

Each question clearly labels which aspect(s) of the appraisal dashboard it refers to

(1) Complete this section as part of your application for funding to increase attendance at structured education

Please use this sheet to describe your detailed implementation plans to increase attendance at structured education. Where there is more than one CCG covered by this aspect of the bid and the analysis of issues and proposed actions differs between CCGs (or groups of CCGs), please duplicate and complete separate copies of the this section for each CCG/Group of CCGs as appropriate.

Please note: the modelling of the costs and savings have been developed from the evidence base on face to face structured education.

1. Please set out the CCGs that are bidding for funding with respect to this priority

2. What is your understanding of the reasons for low uptake of, and where relevant low completion of, structured education for Type 1 and Type 2 diabetes and for adults, and for children/young people, in your area, including:
- identification of specific population groups and GP practices from which attendance is low and consideration of the reasons why
 - feedback from patients on reasons for non-attendance and what could help improve attendance?

Appraisal dashboard criteria reference(s): Structured Education (SE) – clinical outcomes, patient experience and safety/quality



The provisional application forms (2)

1	Which CCG are the details within this tab referring to? Please add a new tab for each CCG included in your bid					Related scoring criteria
	Current annual commissioned capacity of structured education courses split by Type 1 and Type 2	Type 1	Type 2			
	No. of structured education courses delivered in 2014/15					
	No. of places provided on structured education courses in 2014/15					
	No. of patients referred to structured education in 2014/15					
	Reported level of attendance at structured education in 2014/15					
2	Reported percentage of patients completing the course in					Cohort
						Cohort
						Cohort
						Cohort
						Cohort
						Cohort
5	<u>Outcomes</u>	2017/18		2018/19		SE - Clinical outcomes
	If your bid is successful,	Type 1	Type 2	Type 1	Type 2	
a	What is planned number of structured education places to be offered each year?					
b	What is the expected total number of patients who will be <u>referred</u> for structured education in each year?					
c	Of the above, what is the expected number of newly diagnosed patients who will be referred?					
d	Of the above, what is the expected number of prevalent patients (excluding the newly diagnosed) who will be referred?					
e	What is the expected total number of patients who will <u>attend</u> structured education in each year?					



Evaluation criteria: Provisional appraisal dashboards

- Clinical
 - Cohort size
 - Clinical outcomes
 - CCG IAF rating (for TT and SE) / Current services in place (for MDFTs and DISNs)
- Patient experience
 - Patient experience measures or improvement plans
- Safety / quality
 - High quality service provided
- Sustainability
 - Commitment to fund service after transformation funding is withdrawn
 - Tracking savings
- Resources
 - Per patient cost of service and non-financial costs
- Strategic
 - Financial
 - Replicability
- Risks – risks around implementation, relationship, targeting, inter-relationship with other strategic plans



Overall: Must haves

Good bids should include details of;

- All partners (CCGs, providers, others) having mutually committed to the bid, including to costs/savings profiles and to reinvestment of savings for sustainability of the service developments
- An agreed Senior Responsible Officer, Clinical Lead and an Implementation Lead across the partnership
- The proposals being in line with local priorities for diabetes e.g. priorities within STPs
- Engagement (with clinicians, providers and patient groups) and their support for the proposals
- Governance and oversight arrangements to oversee the delivery of the interventions
- How participation in the National Diabetes Audit will be increased to $\geq 90\%$ by 2018/19

As well as the specific details of bids in each priority intervention area.

Bids for funding to improve uptake of structured education

Value equation		Outcomes/Criteria	Importance (%)
OUTCOMES	Clinical	Number of additional patients referred for structured education. Evidence drawn from National Diabetes Audit. This should be expressed as per X% of population or similar. Also collect information on current and future referral and attendance rates to support assessment of bids.	10%
		Planned improvement in CCGIAF rating for structured education	5%
		Planned increased attendance at structured education and completion of course.	20%
	Patient Experience	Set out local measures of patient experience or use qualitative information about plans for improvement.	10%
		Safety/quality	Service adheres to NICE guidelines and quality standards.
	Sustainability	Total amount of local funding committed in each year	15%
		Savings generated locally.	10%
RESOURCES		Number of additional patients to attend annually. Total cost of service and details of any capital requirements upon which successful delivery of the bid is reliant	15%
RISKS	Assessment of identification of implementation risks and mitigating actions		25%
	Assessment of identification of degree of support of key partners		25%
	Assessment of risk that intervention is not well targeted		25%
	Assessment of degree to which inter-relationship with other strategic plans are identified and addressed.		25%
STRATEGIC	Proportion of new/additional service cost to be funded locally in 2017/18		50%
	Degree to which the improvement approach can be replicated elsewhere.		50%



Bids for funding to enable an increase in achievement of the 3 NICE recommended treatment targets

Bids should clearly set out;

- Percentage of patients with diabetes that achieved the 3 NICE recommended treatment targets according to the most recent NDA and the expected improvement up to 2020/21
- Understanding of the reasons why treatment targets achievement levels may be lower than national average (40.2%) including consideration of different segments of the CCG's population
- The proposed intervention(s), actions to be taken and the resources required for these
- Local measures of patient experience and/or plans for improvement of patient experience
- Demonstration of how improvements will be sustainable (including whether the bid requires ongoing funding or describes a short term intervention)
- The profile of anticipated savings and commitment to reinvest these to support long term sustainability of the service
- Degree to which the approach could be replicated elsewhere
- Any risks to delivery which have been identified and mitigating actions



Bids for funding to put in place a new or expanded multidisciplinary foot care team (MDFT)

Bids should clearly set out;

- Whether the bid is for a new or expanded service
- Current number of patients seen by the MDFT and for each year up to 2020/21 the planned levels of improvement in;
 - Number of patients who will be seen by the MDFT
 - Waiting times / accessibility for patients with major / minor foot care needs
 - Number of amputations
- Describe how the proposed additional or extended MDFT function will fit into the wider treatment pathway and interface with other services
- Provide detailed implementation plans including the resources required and the criteria which will be used to determine which patients are seen by the MDFT
- Local measures of patient experience and/or plans for improvement of patient experience
- Demonstration of how the new/expanded service will be sustainable
- The profile of anticipated savings and commitment to reinvest these to support long term sustainability of the service
- Any risks to delivery which have been identified and mitigating actions



Bids for funding to put in place a new or expanded diabetes inpatient specialist nursing (DISN) service

Bids should clearly set out;

- Whether the bid is for a new or expanded service
- Average number of inpatients with diabetes that have needs that would be appropriate for the DISN to support
- For each year up to 2020/21 set out the planned levels of improvement in average length of stay for patients with diabetes, reduction in medication errors and reduction in hypoglycaemic and hyperglycaemic episodes in inpatients
- Describe how the proposed additional or extended DISN function will fit into the wider treatment pathway and interface with other services
- Provide detailed implementation plans including the resources required and the criteria which will be used to determine which patients are seen by the DISN
- Local measures of patient experience and/or plans for improvement of patient experience
- Demonstration of how the new/expanded service will be sustainable
- The profile of anticipated savings and commitment to reinvest these to support long term sustainability of the service
- Any risks to delivery which have been identified and mitigating actions



What to avoid when developing bids

- Not including all key partners – ensure you work in an appropriate group of CCGs and providers
- Failure to ensure that the proposals address all key issues in the appraisal dashboard
- Submitting many separate bids – an individual CCG may be part of different partnerships covering differing priorities or providers, but should not submit multiple bids for the same priorities and providers
- Vague responses – if you don't have the evidence to back up your proposals set out how you plan to get it and your best estimate
- Not demonstrating an understanding of the key issues for different parts of the local population that affect outcomes
- Failure to demonstrate mutual commitment to the proposals across commissioners and providers
- Failure to confirm mutual support for the cost and savings profiles and for reinvestment of savings to sustain the improvements



Support available

National support

- The expected call to bid slide pack will include;
 - The background and logic models for each of the 4 interventions
 - Appraisal dashboard for each of the interventions which will be used in the assessment of the bids, including the weighting for each criteria
 - Various links to supporting information such as a data dashboard which sets out the available data by CCG to support CCGs developing bids
- A programme of webinars to support organisations developing individual bids (details TBC)
- Regular webinars with NHS England regional clinical networks
- An email address to direct specific queries to (england.diabetestreatment@nhs.net)
- A FAQs document to support by answering regularly raised questions

Clinical network support

- Support in developing individual bids
- Responding to queries from local commissioners and their partner organisations