

NHS RightCare scenario: **The variation between standard and optimal pathways**

Paul's story: Diabetes

Appendix: Summary slide pack

A decorative graphic at the bottom of the slide consisting of numerous overlapping, curved lines in shades of blue and green, creating a sense of movement and flow.

August 2014

Paul and the sub-optimal pathway

- Paul is 45, a bricklayer with a local employer. He is married to Wendy who is 42 and a barmaid. They have a 16 year old son called David
- Paul supports his local football club but doesn't do too much exercise. He smokes 10 cigarettes a day and drinks around four pints of beer a day. He is overweight
- The family lives in a village where the only shop has limited food options
- Paul and Wendy's GP works in a small practice, 17 miles away from the nearest district general hospital
- Paul's journey starts when, prompted by Wendy, he sees his GP:
 - Two years of increased urinary frequency and loss of energy
 - GP performs tests and confirms diabetes
 - Initial management with diet, exercise, pills
 - Six visits per year to practice nurse
 - Six lab tests per year

Five years later...

- Paul is now 50. He has given up smoking but is still drinking and has not lost weight.
- His recreation is still watching football and going to the pub
- He has been on insulin for a year
- His left leg hurts (vascular problem)
- Paul is not walking far, not driving, and missing work
- He has been referred to the hospital diabetes service and vascular surgeon – outpatients department at hospital
- Wendy has to drive him there
- David is at university

Two years later...

- Paul is now 52. His leg suddenly goes white and painful and is amputated below the knee
- He has significant heart and renal complications
- His vision is deteriorating
- Paul loses his job, with little chance of retraining
- Applies for more suitable housing
- Wendy gives up her job
- David takes a year off university

This version of Paul's journey costs £49k at 2014/15 prices

Paul's story: What the CCG has done

- The local CCG has looked at the variation data in its NHS RightCare Commissioning for Value pack and identified diabetes as a key improvement priority
- They have engaged the right people, designed an optimal pathway, identified what needed to change, built the case, taken the decisions and implemented the changes
- What does Paul's journey look like now?

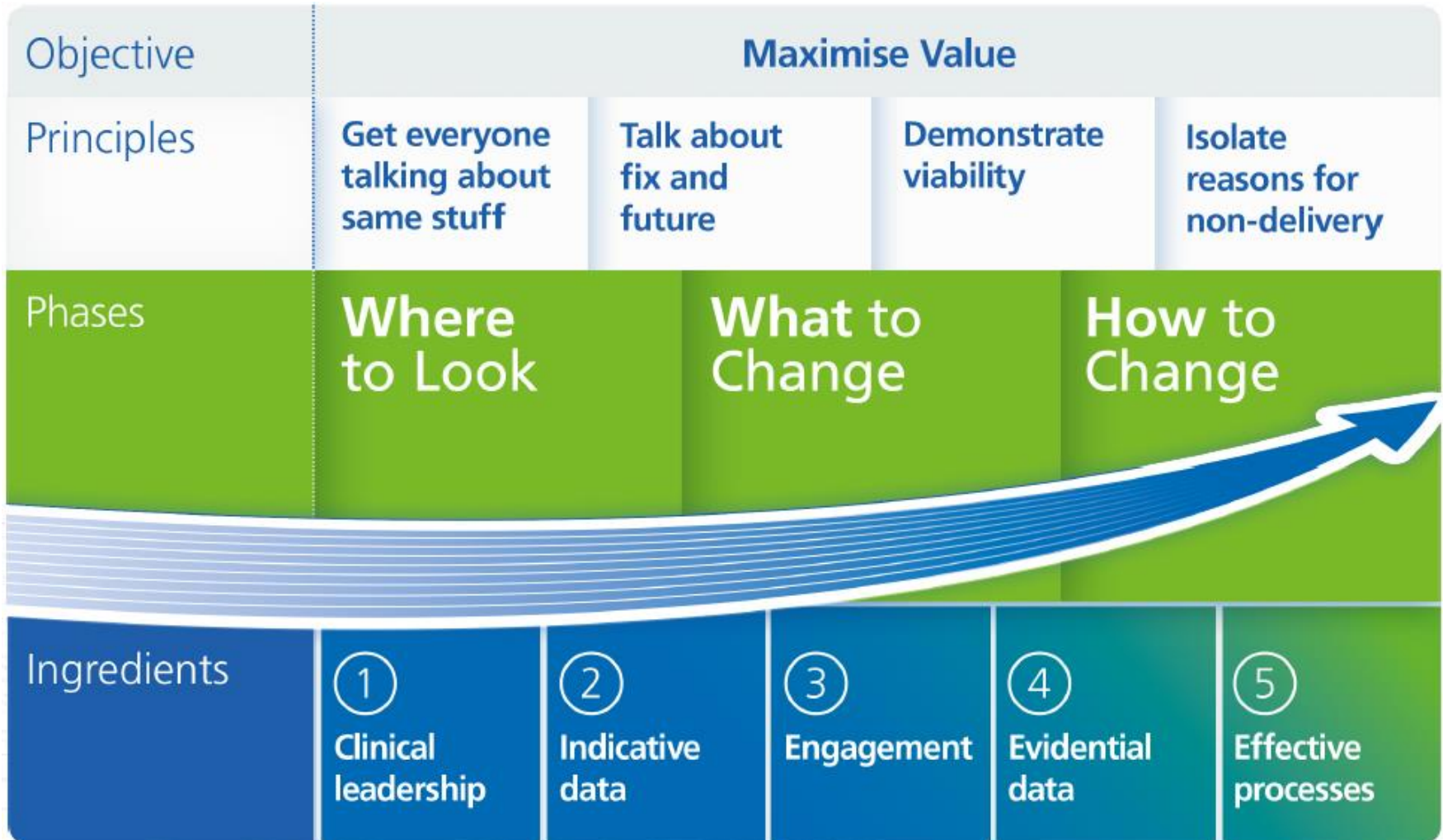
Paul and the optimal pathway

- Paul is 45, a bricklayer with a local employer. He is married to Wendy who is 42 and a barmaid. They have a 16 year old son called David
- Paul supports his local football club but doesn't do too much exercise. He smokes 10 cigarettes a day and drinks around four pints of beer a day. He is overweight
- An NHS Health Check identifies Paul's condition at the end of year one. Case management begins
- Use of specialist clinics for advice on diet and exercise (at a greater expense) and this is repeated every two years
- Paul's Care Plan / Medication / Retinopathy Screening is brought forward 18 months compared to Journey One
- Self Management – through the Desmond Programme
- Paul attends a Diabetes Patient Support Group, set up locally

Journey one cost £49k and managed Paul's deterioration

Journey two costs £9k and keeps Paul well

The NHS RightCare approach



Further information

For more information about Paul's journey, NHS RightCare or long term conditions you can:

Read the full scenario

- https://www.england.nhs.uk/rightcare/wp-content/uploads/sites/40/2016/09/Casebook_Paul-Adams-Scenario_Diabetes.pdf

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