

# Analysis of National Diabetes Audit 2013-14 & 2014-15, Cambridgeshire & Peterborough Clinical Commissioning Group

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## Introduction

The National Diabetes Audit (NDA) is the largest annual clinical audit in the world, integrating data from both primary and secondary care sources. The results of the 2013-14 and 2014-15 collections were published on 28th January 2016. An overview of the NDA is available on the Health & Social Care Information Centre (HSCIC) website at URL: <http://www.hscic.gov.uk/nda> and full data released by HSCIC in relation to the NDA, including results for individual General Practices, are available at URL: <http://www.hscic.gov.uk/searchcatalogue?productid=20155&q=%22National+diabetes+audit%22&sort=Relevance&size=10&page=1#top>

The NDA aims to answer four key questions based on the diabetes National Service Framework:

* Is everyone with diabetes diagnosed and recorded on a practice diabetes register?
* What percentage of people registered with diabetes received the nine NICE key processes of diabetes care?
* What percentage of people registered with diabetes achieved NICE defined treatment targets for glucose control, blood pressure and blood cholesterol?
* For people with registered diabetes, what are the rates of acute and long term complications (disease outcomes)?

The NDA aims to improve the quality of patient care by enabling NHS organisations to:

* Compare their outcomes of care with similar NHS organisations
* Identify and share best practice
* Identify gaps or shortfalls in commissioning services
* Assess local practice against the diabetes National Service Framework and NICE guidelines and drive service improvement
* Provide a more comprehensive picture of diabetes care and outcomes in England and Wales

Through participation in the audit, local services are able to benchmark their performance and identify where they are performing well and improve the quality of treatment and care they provide. On a national level, wide participation in the audit also provides an overview of the quality of care being provided in England and Wales.

This report summarises findings for Cambridgeshire & Peterborough Clinical Commissioning Group (C&P CCG) from the NDA 2013-14 & 2014-15, including analysis of overall participation rates, the demographic composition of patients registered via general practices as part of the audit, care process completion for patients with type 1 diabetes and type 2 or other diabetes, percentages of patients newly diagnosed with diabetes offered/attending a structured education programme and treatment target achievement across the CCG.

## Executive Summary

* Participation in the National Diabetes Audit (NDA) is high within Cambridgeshire & Peterborough Clinical Commissioning Group (C&P CCG) compared to England and the number of participating general practices within the CCG has risen from 74 to 77 between 2013-14 and 2014-15 (71.3% of all general practices in the CCG; the national participation rate for 2014-15 is 54.9%). Participation rates are relatively consistent between Local Commissioning Groups (LCGs) in the CCG, although there is some variation between individual practices and LCGs with below average participation rates observed in Hunts Care Partners (52.9%) and Cam Health (55.6%).
* The demographic composition of registrations by general practices within Cambridgeshire & Peterborough CCG for the NDA is relatively similar to England, although percentages of registrations within the 'White' ethnicity group are 13.5% higher for type 1 registrations and 16.7% higher for type 2 and other registrations than England. Conversely, with regards to registrations from ‘minority ethnic’ groups, the percentage of type 1 registrations is 1.1% lower than England (8.6% compared to 9.7%) and for type 2 and other registrations the CCG percentage is 7.3% lower (11.8% compared to 19.1%).
* The CCG is performing 'as expected' with regards to care process completion for people with type 1 diabetes, although within this group, CCG performance is 'higher than expected' (therefore better) for foot surveillance and 'lower than expected' (worse) for cholesterol and urine albumin care process completion. The CCG is performing 'higher than expected' for care process completion for people with type 2 diabetes and for foot surveillance and BMI care processes within this indicator group.
* The percentage of newly diagnosed people with type 1 diabetes recorded as being offered a structured education programme has fallen across the CCG from 39.6% to 28.9% and is now lower than the England percentage of 32.8%. The number of newly diagnosed people with type 1 diabetes who go on to attend a structured education programme has also fallen, from 4.0% to 0.9% and this is also now below the England value which has remained at 1.9% across 2013-14 and 2014-15.
* The percentage of newly diagnosed people with type 2 diabetes recorded as being offered a structured educational programme has risen from 71.7% to 80.5% and remains above the England percentage, which in 2014-15 is 78.7%. The percentage of newly diagnosed people with type 2 diabetes who subsequently attended a structured education programme has fallen from 8.9% to 4.5% between 2013-14 and 2014-15 and is now below the England percentage which has risen over this period from 5.8% to 5.9%.
* Treatment target achievement for people with type 1 diabetes across the CCG is 17.9%, below the England percentage of 19.3%. The disparity between the CCG and England with regards to the achievement percentage achieved for people with type 2 diabetes is higher, with the CCG percentage 36.2% and England 41.3%.

## Overview of 2013-14 & 2014-15 National Diabetes Audit Data

**Figure 1: National Diabetes Audit 2013-14 & 2014-15, Participating General Practices**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **C&P CCG** | | **England** | |
| **Audit Period** | **Number** | **%** | **Number** | **%** |
| 2013-14 | 74 | 68.5 | 4,274 | 54.9 |
| 2014-15 | 77 | 71.3 | 4,256 | 54.9 |

C&P CCG has a statistically significantly high participation rate in the National Diabetes Audit for both 2013-14 and 2014-15 in comparison to England. The number of participating general practices in the CCG has risen by 2.8% from 74 to 77 and the participation rate is now 71.3%, 16.4% higher than the England participation rate of 54.9%.

**Figure 2: National Diabetes Audit 2013-14 & 2014-15, Local Commissioning Group Participation Rates & 2014-15 Quality Outcomes Framework Indicators**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **National Diabetes Audit Data** | | | | | | | **2014-15 Quality Outcomes Framework** | | | |
|  | **2013-14 Participation** | | | **2014-15 Participation** | | | **1. Diabetes QOF Prevalence (17+)** | | **2. Obesity QOF Prevalence (16+)** | |
| **Local Commissioning Group** | **Y** | **N** | **% Participating** | **Y** | **N** | **% Participating** | **Number** | **%** | **Number** | **%** |
| BORDERLINE | 9 | 1 | 90.0% | 8 | 2 | 80.0% | 5,615 | 6.5 | 8,297 | 9.5 |
| CAM HEALTH | 4 | 5 | 44.4% | 5 | 4 | 55.6% | 3,124 | 4.2 | 4,407 | 5.9 |
| CATCH | 21 | 7 | 75.0% | 21 | 7 | 75.0% | 7,618 | 4.0 | 11,541 | 6.0 |
| HUNTS CARE PARTNERS | 8 | 9 | 47.1% | 9 | 8 | 52.9% | 6,596 | 6.6 | 9,526 | 9.4 |
| HUNTS HEALTH | 5 | 4 | 55.6% | 7 | 2 | 77.8% | 3,292 | 5.9 | 5,100 | 9.0 |
| ISLE OF ELY | 7 | 3 | 70.0% | 8 | 2 | 80.0% | 5,269 | 6.8 | 8,180 | 10.5 |
| PETERBOROUGH\* | 17 | 4 | 81.0% | 16 | 5 | 76.2% | 7,225 | 6.5 | 11,542 | 10.3 |
| WISBECH | 3 | 1 | 75.0% | 3 | 1 | 75.0% | 2,930 | 7.5 | 4,501 | 11.3 |
| **CCG** | **74** | **34** | **68.5%** | **77** | **31** | **71.3%** | **41,669** | **5.7** | **63,094** | **8.5** |

\* Peterborough data include the Alma Road Surgery general practice which is now closed.

|  |
| --- |
| **Key:** |
| Statistically significantly better than CCG |
| Statistically similar to CCG |
| Statistically significantly worse than CCG |

The table above illustrates that there is a degree of variation in participation rates across Local Commissioning Groups within the CCG, with 2014/15 participation highest within the Borderline and Isle of Ely LCGs, both of which have a participation rate of 80.0%. The LCGs with the lowest participation rates are Hunts Care Partners (52.9%) and Cam Health (55.6%). 71.0% of practices in the five LCGs that have statistically significantly high levels of diabetes prevalence participated in the NDA and 70.3% in the two LCGs (Cam Health and Catch) that have statistically significantly low diabetes prevalence participated.

**Figure 3: National Diabetes Audit 2013-14 & 2014-15, Total Registrations**

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Type 1** | | | | **Type 2** | | | | **Total Registrations** | | | |
|  | **C&P CCG** | | **England** | | **C&P CCG** | | **England** | | **C&P CCG** | | **England** | |
| **Audit Period** | **Number** | **%** | **Number** | **%** | **Number** | **%** | **Number** | **%** | **Number** | **%** | **Number** | **%** |
| 2013-14 | 2,559 | 9.5 | 143,910 | 9.0 | 24,444 | 90.5 | 1,458,277 | 91.0 | 27,003 | 100.0 | 1,602,187 | 100.0 |
| 2014-15 | 2,759 | 9.2 | 149,824 | 8.7 | 27,258 | 90.8 | 1,567,296 | 91.3 | 30,017 | 100.0 | 1,717,120 | 100.0 |

The CCG has 5.0% more type 1 registrations than that of England, although this percentage has now fallen from 9.5% of the total in 2013-14 to 9.2% of the total in 2014-15. The total number of registrations within the CCG has risen by 3,014 in 2014-15, an increase of 11.2%; nationally, the increase in 2014-15 is 7.2%.

**Figure 4: National Diabetes Audit 2014-15, Registrations by Sex and Type**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sex** | **C&P CCG** | | **England** | |
| **Type 1 (%)** | **Type 2 and other (%)** | **Type 1 (%)** | **Type 2 and other (%)** |
| Male | 56.8 | 56.4 | 56.3 | 55.6 |
| Female | 43.2 | 43.6 | 43.7 | 44.4 |

56.8% of type 1 registrations and 56.4% of type 2 and other registrations within the CCG were male and 43.2% of type 1 and 43.6% of type 2 and other registrations were female. The profile of registrations within the CCG is therefore similar to that observed nationally.

**Figure 5: National Diabetes Audit 2014-15, Registrations by Age and Type**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Age Group** | **C&P CCG** | | **England** | |
| **Type 1 (%)** | **Type 2 and other (%)** | **Type 1 (%)** | **Type 2 and other (%)** |
| <40 | 44.2 | 3.3 | 43.1 | 3.6 |
| 40-64 | 42.5 | 40.9 | 42.5 | 40.7 |
| 65-79 | 10.7 | 40.1 | 11.6 | 39.8 |
| 80+ | 2.6 | 15.7 | 2.5 | 15.8 |
| Unknown | - | - | 0.3 | 0.1 |

The CCG has a similar profile to England with regards to the age of registered patients for both type 1 and type 2 and other diabetes, although the CCG has a marginally higher percentage of registrations for type 1 diabetes patients in younger age groups, with 86.7% of type 1 registrations within the CCG for patients aged 64 and under, compared to 85.6% in England.

**Figure 6: National Diabetes Audit 2014-15, Registrations by Ethnicity and Type**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Ethnicity** | **C&P CCG** | | **England** | |
| **Type 1 (%)** | **Type 2 and other (%)** | **Type 1 (%)** | **Type 2 and other (%)** |
| White | 83.7 | 79.9 | 70.2 | 63.2 |
| Minority Ethnic Origin | 8.6 | 11.8 | 9.7 | 19.1 |
| Unknown/Not Stated | 7.7 | 8.3 | 20.2 | 17.8 |

Within the CCG, registrations for patients with a ‘White’ ethnicity were higher than for England for both type 1 and type 2 and other diabetes and conversely lower for minority ethnic origin patients; numbers unknown/not stated are also lower than for England.

**Figure 7: National Diabetes Audit 2013-14 / 2014-15, Care Process Completion for People with Type 1 Diabetes**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Care Process** | **C&P CCG** | | | **England** | | | **CCG Banding** |
| **% Completed 2013-14** | **% Completed 2014-15** | **% Variance 2013-14 / 2014-15** | **% Completed 2013-14** | **% Completed 2014-15** | **% Variance 2013-14 / 2014-15** |
| HbA1C | 83.7 | 82.4 | -1.3 | 81.5 | 84.0 | 2.5 | As expected |
| Blood Pressure | 88.4 | 88.6 | 0.2 | 87.2 | 89.3 | 2.1 | As expected |
| Cholesterol | 76.3 | 75.4 | -0.9 | 77.9 | 79.5 | 1.6 | Lower than expected |
| Serum Creatinine | 78.7 | 77.8 | -0.9 | 79.3 | 81.1 | 1.8 | As expected |
| Urine Albumin | 62.0 | 53.0 | -9.0 | 64.4 | 56.7 | -7.7 | Lower than expected |
| Foot Surveillance | 73.6 | 74.9 | 1.3 | 71.4 | 73.4 | 2.0 | Higher than expected |
| BMI | 81.2 | 79.4 | -1.8 | 77.2 | 75.4 | -1.8 | As expected |
| Smoking | 80.8 | 77.8 | -3.0 | 77.9 | 78.3 | 0.4 | As expected |
| **All Eight Care Processes** | 47.2 | 40.8 | -6.4 | 45.2 | 39.6 | -5.6 | As expected |

The NDA ‘bandings’ contained within the table above show where the CCG is performing ‘as expected’ (i.e. statistically indistinguishable from peers) based on data provided as part of the NDA that has allowed for modelling of the characteristics of the diabetic population. The statistical models used to predict care process completion are calculated to take into account characteristics including age, sex, ethnicity, Indices of Multiple Deprivation (IMD), smoking status and Body Mass Index (BMI) of the person with diabetes. This allows for a degree of ‘correction’ for factors that are outside of the control of the GP. The models are sufficient to predict whether further investigation of ‘higher than expected’ or ‘lower than expected’ outcomes could be beneficial, but do not ‘perfectly’ predict every outcome. The assigned bandings should not be treated as an absolute assessment of performance, but rather as a tool to aid local investigation.

If a general practice has a banding of ‘lower than expected’, this means that, taking into account all available data and within the context of the methodology outlined above, the practice is not achieving as high a rate of completion for the process as would be expected based on the national rate. This does not necessarily mean that the practice is underperforming, but may indicate that further investigation could be beneficial. Conversely, if a banding is ‘higher than expected’, this means that achievement is above what would be expected based on the national rate.

C&P CCG is ‘as expected’ for five of the eight care processes for people with type 1 diabetes in figure 7 above and for the sum total of all eight care processes combined. The CCG performs higher than expected for foot surveillance and lower than expected for cholesterol and urine albumin.

An LCG-level breakdown of all available care process data is provided below. Within these data, it should be noted that, due to small numbers, data for Cambridge Access Surgery and Parnwell Medical Centre have been suppressed as part of the NDA data release. It is, however, possible to infer from released practice data the contribution towards CCG totals from these practices and these data are are included in row ‘Data Suppressed’ in the tables below.

**Figure 8: National Diabetes Audit 2013-14 / 2014-15, Care Process Completion for People with Type 1 Diabetes – C&P CCG LCGs, HbA1c**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **LCG** | **2013/14** | | | **2014/15** | | | **Change in % Completed 2013/14 - 2014/15** |
| **Numerator** | **Denominator** | **% Completed** | **Numerator** | **Denominator** | **% Completed** |
| BORDERLINE | 358 | 405 | 88.4% | 331 | 391 | 84.7% | -3.7% |
| CAM HEALTH | 99 | 123 | 80.5% | 116 | 152 | 76.3% | -4.2% |
| CATCH | 501 | 619 | 80.9% | 497 | 642 | 77.4% | -3.5% |
| HUNTS CARE PARTNERS | 207 | 260 | 79.6% | 231 | 284 | 81.3% | 1.7% |
| HUNTS HEALTH | 98 | 118 | 83.1% | 185 | 217 | 85.3% | 2.2% |
| ISLE OF ELY | 285 | 338 | 84.3% | 334 | 392 | 85.2% | 0.9% |
| PETERBOROUGH | 446 | 518 | 86.1% | 436 | 503 | 86.7% | 0.6% |
| WISBECH | 140 | 170 | 82.4% | 135 | 169 | 79.9% | -2.5% |
| DATA SUPPRESSED | 8 | 8 | 100.0% | 8 | 9 | 88.9% | -11.1% |
| **CCG** | 2,142 | 2,559 | 83.7% | 2,273 | 2,759 | 82.4% | -1.3% |
| **England** | 102,036 | 125,217 | 81.5% | 109,776 | 130,750 | 84.0% | 2.5% |

HbA1c completion has fallen by 1.3% across the CCG between 2013/14 and 2014/15, whilst completion in England has risen 2.5%. Among LCGs, completion percentage has fallen most in Cam Health (-4.2%), Borderline (-3.7%) and Catch (-3.5%).

**Figure 9: National Diabetes Audit 2013-14 / 2014-15, Care Process Completion for People with Type 1 Diabetes – C&P CCG LCGs, Blood Pressure**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **LCG** | **2013/14** | | | **2014/15** | | | **Change in % Completed 2013/14 - 2014/15** |
| **Numerator** | **Denominator** | **% Completed** | **Numerator** | **Denominator** | **% Completed** |
| BORDERLINE | 354 | 390 | 90.8% | 335 | 370 | 90.5% | -0.2% |
| CAM HEALTH | 101 | 119 | 84.9% | 121 | 147 | 82.3% | -2.6% |
| CATCH | 523 | 598 | 87.5% | 536 | 619 | 86.6% | -0.9% |
| HUNTS CARE PARTNERS | 208 | 253 | 82.2% | 234 | 275 | 85.1% | 2.9% |
| HUNTS HEALTH | 99 | 114 | 86.8% | 188 | 212 | 88.7% | 1.8% |
| ISLE OF ELY | 292 | 321 | 91.0% | 341 | 373 | 91.4% | 0.5% |
| PETERBOROUGH | 438 | 493 | 88.8% | 426 | 479 | 88.9% | 0.1% |
| WISBECH | 152 | 165 | 92.1% | 156 | 163 | 95.7% | 3.6% |
| DATA SUPPRESSED | 8 | 8 | 100.0% | 8 | 9 | 88.9% | -11.1% |
| **CCG** | 2,175 | 2,461 | 88.4% | 2,345 | 2,647 | 88.6% | 0.2% |
| **England** | 104,955 | 120,306 | 87.2% | 112,150 | 125,624 | 89.3% | 2.0% |

CCG completion percentage for blood pressure increased 0.2% between 2013/14 – 2014/15, whereas in England it increased 2.0% and the England completion percentage of 89.3% is now above the CCG percentage of 88.6%.

**Figure 10: National Diabetes Audit 2013-14 / 2014-15, Care Process Completion for People with Type 1 Diabetes – C&P CCG LCGs, Cholesterol**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **LCG** | **2013/14** | | | **2014/15** | | | **Change in % Completed 2013/14 - 2014/15** |
| **Numerator** | **Denominator** | **% Completed** | **Numerator** | **Denominator** | **% Completed** |
| BORDERLINE | 294 | 390 | 75.4% | 276 | 370 | 74.6% | -0.8% |
| CAM HEALTH | 84 | 119 | 70.6% | 94 | 147 | 63.9% | -6.6% |
| CATCH | 440 | 598 | 73.6% | 429 | 619 | 69.3% | -4.3% |
| HUNTS CARE PARTNERS | 193 | 253 | 76.3% | 225 | 275 | 81.8% | 5.5% |
| HUNTS HEALTH | 90 | 114 | 78.9% | 174 | 212 | 82.1% | 3.1% |
| ISLE OF ELY | 257 | 321 | 80.1% | 287 | 373 | 76.9% | -3.1% |
| PETERBOROUGH | 380 | 493 | 77.1% | 366 | 479 | 76.4% | -0.7% |
| WISBECH | 132 | 165 | 80.0% | 135 | 163 | 82.8% | 2.8% |
| DATA SUPPRESSED | 8 | 8 | 100.0% | 9 | 9 | 100.0% | 0.0% |
| **CCG** | 1,878 | 2,461 | 76.3% | 1,995 | 2,647 | 75.4% | -0.9% |
| **England** | 93,740 | 120,306 | 77.9% | 99,904 | 125,624 | 79.5% | 1.6% |

CCG completion for cholesterol has fallen 0.9% between 2013/14 and 2014/15 whereas in England it has increased by 1.6%. Completion in England is now 4.1% higher than the CCG at 79.5% nationally compared to 75.4% in the CCG. Disparity between completion percentages among LCGs is relatively wide for this indicator, ranging from 82.8% in Wisbech to 63.9% in Cam Health.

**Figure 11: National Diabetes Audit 2013-14 / 2014-15, Care Process Completion for People with Type 1 Diabetes – C&P CCG LCGs, Serum Creatine**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **LCG** | **2013/14** | | | **2014/15** | | | **Change in % Completed 2013/14 - 2014/15** |
| **Numerator** | **Denominator** | **% Completed** | **Numerator** | **Denominator** | **% Completed** |
| BORDERLINE | 307 | 390 | 78.7% | 292 | 370 | 78.9% | 0.2% |
| CAM HEALTH | 88 | 119 | 73.9% | 101 | 147 | 68.7% | -5.2% |
| CATCH | 436 | 598 | 72.9% | 427 | 619 | 69.0% | -3.9% |
| HUNTS CARE PARTNERS | 207 | 253 | 81.8% | 225 | 275 | 81.8% | 0.0% |
| HUNTS HEALTH | 92 | 114 | 80.7% | 178 | 212 | 84.0% | 3.3% |
| ISLE OF ELY | 264 | 321 | 82.2% | 306 | 373 | 82.0% | -0.2% |
| PETERBOROUGH | 397 | 493 | 80.5% | 383 | 479 | 80.0% | -0.6% |
| WISBECH | 139 | 165 | 84.2% | 138 | 163 | 84.7% | 0.4% |
| DATA SUPPRESSED | 8 | 8 | 100.0% | 9 | 9 | 100.0% | 0.0% |
| **CCG** | 1,938 | 2,461 | 78.7% | 2,059 | 2,647 | 77.8% | -1.0% |
| **England** | 95,430 | 120,306 | 79.3% | 101,848 | 125,624 | 81.1% | 1.8% |

CCG completion percentage for serum creatine remains below England in 2014/15; in 2013/14 CCG completion was 0.6% below England but this has now increased to 3.3% below England.

**Figure 12: National Diabetes Audit 2013-14 / 2014-15, Care Process Completion for People with Type 1 Diabetes – C&P CCG LCGs, Urine Albumin**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **LCG** | **2013/14** | | | **2014/15** | | | **Change in % Completed 2013/14 - 2014/15** |
| **Numerator** | **Denominator** | **% Completed** | **Numerator** | **Denominator** | **% Completed** |
| BORDERLINE | 219 | 390 | 56.2% | 209 | 370 | 56.5% | 0.3% |
| CAM HEALTH | 68 | 119 | 57.1% | 64 | 147 | 43.5% | -13.6% |
| CATCH | 390 | 598 | 65.2% | 323 | 619 | 52.2% | -13.0% |
| HUNTS CARE PARTNERS | 152 | 253 | 60.1% | 145 | 275 | 52.7% | -7.4% |
| HUNTS HEALTH | 70 | 114 | 61.4% | 114 | 212 | 53.8% | -7.6% |
| ISLE OF ELY | 227 | 321 | 70.7% | 208 | 373 | 55.8% | -15.0% |
| PETERBOROUGH | 312 | 493 | 63.3% | 263 | 479 | 54.9% | -8.4% |
| WISBECH | 80 | 165 | 48.5% | 73 | 163 | 44.8% | -3.7% |
| DATA SUPPRESSED | 8 | 8 | 100.0% | 5 | 9 | 55.6% | -44.4% |
| **CCG** | 1,526 | 2,461 | 62.0% | 1,404 | 2,647 | 53.0% | -9.0% |
| **England** | 77,478 | 120,306 | 64.4% | 71,194 | 125,624 | 56.7% | -7.7% |

Completion percentage for urine albumin has fallen 7.7% nationally between 2013/14 and 2014/15 and 9.0% across the CCG. All LCGs show a fall in completion with the exception of Borderline, within which there has been a modest rise of 0.3%.

**Figure 13: National Diabetes Audit 2013-14 / 2014-15, Care Process Completion for People with Type 1 Diabetes – C&P CCG LCGs, Foot Surveillance**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **LCG** | **2013/14** | | | **2014/15** | | | **Change in % Completed 2013/14 - 2014/15** |
| **Numerator** | **Denominator** | **% Completed** | **Numerator** | **Denominator** | **% Completed** |
| BORDERLINE | 285 | 390 | 73.1% | 268 | 370 | 72.4% | -0.6% |
| CAM HEALTH | 88 | 119 | 73.9% | 105 | 147 | 71.4% | -2.5% |
| CATCH | 440 | 598 | 73.6% | 454 | 619 | 73.3% | -0.2% |
| HUNTS CARE PARTNERS | 183 | 253 | 72.3% | 206 | 275 | 74.9% | 2.6% |
| HUNTS HEALTH | 89 | 114 | 78.1% | 166 | 212 | 78.3% | 0.2% |
| ISLE OF ELY | 247 | 321 | 76.9% | 290 | 373 | 77.7% | 0.8% |
| PETERBOROUGH | 352 | 493 | 71.4% | 354 | 479 | 73.9% | 2.5% |
| WISBECH | 120 | 165 | 72.7% | 130 | 163 | 79.8% | 7.0% |
| DATA SUPPRESSED | 8 | 8 | 100.0% | 9 | 9 | 100.0% | 0.0% |
| **CCG** | 1,812 | 2,461 | 73.6% | 1,982 | 2,647 | 74.9% | 1.2% |
| **England** | 85,945 | 120,306 | 71.4% | 92,148 | 125,624 | 73.4% | 1.9% |

Foot surveillance completion has increased 1.2% in the CCG between 2014/15 and 2013/14 (although a fall in completion is observed in Cam Health, Borderline and Catch) and completion percentage is now 74.9%, which remains above the England value of 73.4%.

**Figure 14: National Diabetes Audit 2013-14 / 2014-15, Care Process Completion for People with Type 1 Diabetes – C&P CCG LCGs, BMI**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **LCG** | **2013/14** | | | **2014/15** | | | **Change in % Completed 2013/14 - 2014/15** |
| **Numerator** | **Denominator** | **% Completed** | **Numerator** | **Denominator** | **% Completed** |
| BORDERLINE | 328 | 390 | 84.1% | 313 | 370 | 84.6% | 0.5% |
| CAM HEALTH | 93 | 119 | 78.2% | 104 | 147 | 70.7% | -7.4% |
| CATCH | 489 | 598 | 81.8% | 472 | 619 | 76.3% | -5.5% |
| HUNTS CARE PARTNERS | 201 | 253 | 79.4% | 208 | 275 | 75.6% | -3.8% |
| HUNTS HEALTH | 85 | 114 | 74.6% | 157 | 212 | 74.1% | -0.5% |
| ISLE OF ELY | 267 | 321 | 83.2% | 309 | 373 | 82.8% | -0.3% |
| PETERBOROUGH | 397 | 493 | 80.5% | 393 | 479 | 82.0% | 1.5% |
| WISBECH | 132 | 165 | 80.0% | 139 | 163 | 85.3% | 5.3% |
| DATA SUPPRESSED | 7 | 8 | 87.5% | 6 | 9 | 66.7% | -20.8% |
| **CCG** | 1,999 | 2,461 | 81.2% | 2,101 | 2,647 | 79.4% | -1.9% |
| **England** | 92,917 | 120,306 | 77.2% | 94,698 | 125,624 | 75.4% | -1.9% |

CCG completion for BMI fell by 1.9% between 2013/14 and 2014/15 but remains 4.0% above that of England, which also fell by 1.9% across this time period. Completion percentage increased in three LCGs; Wisbech, Peterborough and Borderline.

**Figure 15: National Diabetes Audit 2013-14 / 2014-15, Care Process Completion for People with Type 1 Diabetes – C&P CCG LCGs, Smoking**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **LCG** | **2013/14** | | | **2014/15** | | | **Change in % Completed 2013/14 - 2014/15** |
| **Numerator** | **Denominator** | **% Completed** | **Numerator** | **Denominator** | **% Completed** |
| BORDERLINE | 325 | 390 | 83.3% | 298 | 370 | 80.5% | -2.8% |
| CAM HEALTH | 99 | 119 | 83.2% | 98 | 147 | 66.7% | -16.5% |
| CATCH | 466 | 598 | 77.9% | 471 | 619 | 76.1% | -1.8% |
| HUNTS CARE PARTNERS | 196 | 253 | 77.5% | 205 | 275 | 74.5% | -2.9% |
| HUNTS HEALTH | 94 | 114 | 82.5% | 164 | 212 | 77.4% | -5.1% |
| ISLE OF ELY | 262 | 321 | 81.6% | 294 | 373 | 78.8% | -2.8% |
| PETERBOROUGH | 410 | 493 | 83.2% | 395 | 479 | 82.5% | -0.7% |
| WISBECH | 129 | 165 | 78.2% | 128 | 163 | 78.5% | 0.3% |
| DATA SUPPRESSED | 8 | 8 | 100.0% | 7 | 9 | 77.8% | -22.2% |
| **CCG** | 1,989 | 2,461 | 80.8% | 2,060 | 2,647 | 77.8% | -3.0% |
| **England** | 93,694 | 120,306 | 77.9% | 98,410 | 125,624 | 78.3% | 0.4% |

CCG completion for smoking was above the national percentage in 2013/14 (80.8% compared to 77.9%) but has now fallen 3.0% to 77.8% and is therefore below the national value which has increased 0.4% to 78.3%. All LCGs other than Wisbech show an observed year-on-year fall, with the decline highest in Cam Health (16.5%).

**Figure 16: National Diabetes Audit 2013-14 / 2014-15, Care Process Completion for People with Type 1 Diabetes – C&P CCG LCGs, All Eight Outcomes**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **LCG** | **2013/14** | | | **2014/15** | | | **Change in % Completed 2013/14 - 2014/15** |
| **Numerator** | **Denominator** | **% Completed** | **Numerator** | **Denominator** | **% Completed** |
| BORDERLINE | 203 | 405 | 50.1% | 205 | 391 | 52.4% | 2.3% |
| CAM HEALTH | 49 | 123 | 39.8% | 37 | 152 | 24.3% | -15.5% |
| CATCH | 279 | 619 | 45.1% | 237 | 642 | 36.9% | -8.2% |
| HUNTS CARE PARTNERS | 121 | 260 | 46.5% | 110 | 284 | 38.7% | -7.8% |
| HUNTS HEALTH | 62 | 118 | 52.5% | 88 | 217 | 40.6% | -12.0% |
| ISLE OF ELY | 152 | 338 | 45.0% | 155 | 392 | 39.5% | -5.4% |
| PETERBOROUGH | 267 | 518 | 51.5% | 227 | 503 | 45.1% | -6.4% |
| WISBECH | 68 | 170 | 40.0% | 63 | 169 | 37.3% | -2.7% |
| DATA SUPPRESSED | 7 | 8 | 87.5% | <5 | 9 | 44.4% | -43.1% |
| **CCG** | 1,208 | 2,559 | 47.2% | 1,126 | 2,759 | 40.8% | -6.4% |
| **England** | 56,588 | 125,217 | 45.2% | 51,752 | 130,750 | 39.6% | -5.6% |

The CCG remains above England for completion percentage with regards to all eight outcomes in 2014/15 (40.8% compared to 39.6%), although the 6.4% fall from 2013/14 within the CCG is higher than the 5.6% fall observed nationally. Within the Borderline LCG, completion percentage increased between 2013/14 and 2014/15 by 2.3%; completion percentage fell for all other LCGs.

**Figure 17: National Diabetes Audit 2014-15, Care Process Completion for People with Type 2 Diabetes**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Care Process** | **C&P CCG** | | | **England** | | | **CCG Banding** |
| **% Completed 2013-14** | **% Completed 2014-15** | **% Variance 2013-14 / 2014-15** | **% Completed 2013-14** | **% Completed 2014-15** | **% Variance 2013-14 / 2014-15** |
| HbA1C | 94.5 | 95.1 | 0.6 | 93.7 | 94.9 | 1.2 | As expected |
| Blood Pressure | 95.5 | 96.2 | 0.7 | 95.0 | 96.2 | 1.2 | As expected |
| Cholesterol | 92.5 | 92.2 | -0.3 | 92.5 | 93.2 | 0.7 | As expected |
| Serum Creatinine | 94.4 | 95.0 | 0.6 | 93.5 | 94.6 | 1.1 | As expected |
| Urine Albumin | 83.1 | 75.6 | -7.5 | 84.6 | 74.9 | -9.7 | As expected |
| Foot Surveillance | 88.0 | 88.5 | 0.5 | 86.5 | 87.2 | 0.7 | Higher than expected |
| BMI | 88.5 | 88.1 | -0.4 | 85.9 | 83.2 | -2.7 | Higher than expected |
| Smoking | 89.6 | 87.0 | -2.6 | 85.7 | 85.3 | -0.4 | As expected |
| **All Eight Care Processes** | 71.3 | 63.4 | -7.9 | 67.9 | 59.0 | -8.9 | Higher than expected |

The CCG’s completion percentage for care processes for people with type 2 diabetes is higher than expected for foot surveillance, BMI and for all eight care processes in total and ‘as expected’ for six other individual care processes.

**Figure 18: National Diabetes Audit 2013-14 / 2014-15, Care Process Completion for People with Type 2 Diabetes – C&P CCG LCGs, HbA1c**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **LCG** | **2013/14** | | | **2014/15** | | | **Change in % Completed 2013/14 - 2014/15** |
| **Numerator** | **Denominator** | **% Completed** | **Numerator** | **Denominator** | **% Completed** |
| BORDERLINE | 3,857 | 4,107 | 93.9% | 3,850 | 4,051 | 95.0% | 1.1% |
| CAM HEALTH | 940 | 980 | 95.9% | 1,199 | 1,237 | 96.9% | 1.0% |
| CATCH | 4,208 | 4,432 | 94.9% | 4,555 | 4,779 | 95.3% | 0.4% |
| HUNTS CARE PARTNERS | 2,765 | 2,934 | 94.2% | 3,064 | 3,243 | 94.5% | 0.2% |
| HUNTS HEALTH | 1,023 | 1,110 | 92.2% | 2,013 | 2,122 | 94.9% | 2.7% |
| ISLE OF ELY | 3,519 | 3,668 | 95.9% | 4,153 | 4,283 | 97.0% | 1.0% |
| PETERBOROUGH | 4,850 | 5,179 | 93.6% | 5,088 | 5,440 | 93.5% | -0.1% |
| WISBECH | 1,890 | 1,982 | 95.4% | 1,959 | 2,048 | 95.7% | 0.3% |
| DATA SUPPRESSED | 50 | 52 | 96.2% | 52 | 55 | 94.5% | -1.6% |
| **CCG** | 23,102 | 24,444 | 94.5% | 25,933 | 27,258 | 95.1% | 0.6% |
| **England** | 1,308,066 | 1,396,414 | 93.7% | 1,426,977 | 1,503,034 | 94.9% | 1.3% |

Completion for HbA1c has increased within the CCG by 0.6% between 2013/14 and 2014/15 and remains above the completion percentage for England (95.1% compared to 94.9%).

**Figure 19: National Diabetes Audit 2013-14 / 2014-15, Care Process Completion for People with Type 2 Diabetes – C&P CCG LCGs, Blood Pressure**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **LCG** | **2013/14** | | | **2014/15** | | | **Change in % Completed 2013/14 - 2014/15** |
| **Numerator** | **Denominator** | **% Completed** | **Numerator** | **Denominator** | **% Completed** |
| BORDERLINE | 3,926 | 4,107 | 95.6% | 3,895 | 4,051 | 96.1% | 0.6% |
| CAM HEALTH | 945 | 980 | 96.4% | 1,203 | 1,237 | 97.3% | 0.8% |
| CATCH | 4,244 | 4,432 | 95.8% | 4,603 | 4,779 | 96.3% | 0.6% |
| HUNTS CARE PARTNERS | 2,782 | 2,932 | 94.9% | 3,100 | 3,243 | 95.6% | 0.7% |
| HUNTS HEALTH | 1,038 | 1,108 | 93.7% | 2,053 | 2,120 | 96.8% | 3.2% |
| ISLE OF ELY | 3,529 | 3,668 | 96.2% | 4,170 | 4,283 | 97.4% | 1.2% |
| PETERBOROUGH | 4,921 | 5,179 | 95.0% | 5,176 | 5,438 | 95.2% | 0.2% |
| WISBECH | 1,908 | 1,982 | 96.3% | 1,974 | 2,048 | 96.4% | 0.1% |
| DATA SUPPRESSED | 51 | 52 | 98.1% | 52 | 55 | 94.5% | -3.5% |
| **CCG** | 23,344 | 24,440 | 95.5% | 26,226 | 27,254 | 96.2% | 0.7% |
| **England** | 1,326,075 | 1,396,229 | 95.0% | 1,445,734 | 1,502,807 | 96.2% | 1.2% |

Blood pressure completion has increased across the CCG by 0.7% to 96.2% in 2014/15 which is now equivalent to the completion percentage for England, which rose by 1.2% in the same period.

**Figure 20: National Diabetes Audit 2013-14 / 2014-15, Care Process Completion for People with Type 2 Diabetes – C&P CCG LCGs, Cholesterol**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **LCG** | **2013/14** | | | **2014/15** | | | **Change in % Completed 2013/14 - 2014/15** |
| **Numerator** | **Denominator** | **% Completed** | **Numerator** | **Denominator** | **% Completed** |
| BORDERLINE | 3,810 | 4,107 | 92.8% | 3,736 | 4,051 | 92.2% | -0.5% |
| CAM HEALTH | 925 | 980 | 94.4% | 1,167 | 1,237 | 94.3% | 0.0% |
| CATCH | 4,096 | 4,432 | 92.4% | 4,378 | 4,779 | 91.6% | -0.8% |
| HUNTS CARE PARTNERS | 2,688 | 2,932 | 91.7% | 2,992 | 3,243 | 92.3% | 0.6% |
| HUNTS HEALTH | 1,001 | 1,108 | 90.3% | 1,949 | 2,120 | 91.9% | 1.6% |
| ISLE OF ELY | 3,455 | 3,668 | 94.2% | 3,990 | 4,283 | 93.2% | -1.0% |
| PETERBOROUGH | 4,787 | 5,179 | 92.4% | 4,953 | 5,438 | 91.1% | -1.3% |
| WISBECH | 1,800 | 1,982 | 90.8% | 1,911 | 2,048 | 93.3% | 2.5% |
| DATA SUPPRESSED | 49 | 52 | 94.2% | 51 | 55 | 92.7% | -1.5% |
| **CCG** | 22,611 | 24,440 | 92.5% | 25,127 | 27,254 | 92.2% | -0.3% |
| **England** | 1,292,056 | 1,396,229 | 92.5% | 1,400,161 | 1,502,807 | 93.2% | 0.6% |

The CCG completion percentage for cholesterol has fallen 0.3% between 2013/14 and 2014/15, from 92.5% to 92.2%. During this period the completion percentage in England rose 0.6% to 93.2%.

**Figure 21: National Diabetes Audit 2013-14 / 2014-15, Care Process Completion for People with Type 2 Diabetes – C&P CCG LCGs, Serum Creatine**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **LCG** | **2013/14** | | | **2014/15** | | | **Change in % Completed 2013/14 - 2014/15** |
| **Numerator** | **Denominator** | **% Completed** | **Numerator** | **Denominator** | **% Completed** |
| BORDERLINE | 3,863 | 4,107 | 94.1% | 3,850 | 4,051 | 95.0% | 1.0% |
| CAM HEALTH | 938 | 980 | 95.7% | 1,191 | 1,237 | 96.3% | 0.6% |
| CATCH | 4,183 | 4,432 | 94.4% | 4,524 | 4,779 | 94.7% | 0.3% |
| HUNTS CARE PARTNERS | 2,743 | 2,932 | 93.6% | 3,080 | 3,243 | 95.0% | 1.4% |
| HUNTS HEALTH | 1,022 | 1,108 | 92.2% | 1,998 | 2,120 | 94.2% | 2.0% |
| ISLE OF ELY | 3,518 | 3,668 | 95.9% | 4,143 | 4,283 | 96.7% | 0.8% |
| PETERBOROUGH | 4,883 | 5,179 | 94.3% | 5,111 | 5,438 | 94.0% | -0.3% |
| WISBECH | 1,875 | 1,982 | 94.6% | 1,956 | 2,048 | 95.5% | 0.9% |
| DATA SUPPRESSED | 46 | 52 | 88.5% | 51 | 55 | 92.7% | 4.3% |
| **CCG** | 23,071 | 24,440 | 94.4% | 25,904 | 27,254 | 95.0% | 0.6% |
| **England** | 1,305,807 | 1,396,229 | 93.5% | 1,421,987 | 1,502,807 | 94.6% | 1.1% |

Serum creatine completion increased by 0.6% across the CCG between 2013/14 and 2014/15 and rose in all LCGs with the exception of Peterborough.

**Figure 22: National Diabetes Audit 2013-14 / 2014-15, Care Process Completion for People with Type 2 Diabetes – C&P CCG LCGs, Urine Albumin**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **LCG** | **2013/14** | | | **2014/15** | | | **Change in % Completed 2013/14 - 2014/15** |
| **Numerator** | **Denominator** | **% Completed** | **Numerator** | **Denominator** | **% Completed** |
| BORDERLINE | 3,370 | 4,107 | 82.1% | 3,205 | 4,051 | 79.1% | -2.9% |
| CAM HEALTH | 842 | 980 | 85.9% | 896 | 1,237 | 72.4% | -13.5% |
| CATCH | 3,825 | 4,432 | 86.3% | 3,807 | 4,779 | 79.7% | -6.6% |
| HUNTS CARE PARTNERS | 2,392 | 2,932 | 81.6% | 2,412 | 3,243 | 74.4% | -7.2% |
| HUNTS HEALTH | 925 | 1,108 | 83.5% | 1,549 | 2,120 | 73.1% | -10.4% |
| ISLE OF ELY | 3,178 | 3,668 | 86.6% | 3,373 | 4,283 | 78.8% | -7.9% |
| PETERBOROUGH | 4,258 | 5,179 | 82.2% | 3,903 | 5,438 | 71.8% | -10.4% |
| WISBECH | 1,484 | 1,982 | 74.9% | 1,423 | 2,048 | 69.5% | -5.4% |
| DATA SUPPRESSED | 46 | 52 | 88.5% | 40 | 55 | 72.7% | -15.7% |
| **CCG** | 20,320 | 24,440 | 83.1% | 20,608 | 27,254 | 75.6% | -7.5% |
| **England** | 1,181,108 | 1,396,229 | 84.6% | 1,125,696 | 1,502,807 | 74.9% | -9.7% |

Nationally, the completion percentage for urine albumin fell 9.7% between 2013/14 and 2014/15, from 84.6% to 74.9%. The CCG’s completion percentage of 75.6% is therefore now higher than that of England, although the CCG also saw an observed fall of 7.5% over this time period.

**Figure 23: National Diabetes Audit 2013-14 / 2014-15, Care Process Completion for People with Type 2 Diabetes – C&P CCG LCGs, Foot Surveillance**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **LCG** | **2013/14** | | | **2014/15** | | | **Change in % Completed 2013/14 - 2014/15** |
| **Numerator** | **Denominator** | **% Completed** | **Numerator** | **Denominator** | **% Completed** |
| BORDERLINE | 3,635 | 4,107 | 88.5% | 3,616 | 4,051 | 89.3% | 0.8% |
| CAM HEALTH | 868 | 980 | 88.6% | 1,121 | 1,237 | 90.6% | 2.1% |
| CATCH | 3,934 | 4,432 | 88.8% | 4,246 | 4,779 | 88.8% | 0.1% |
| HUNTS CARE PARTNERS | 2,611 | 2,932 | 89.1% | 2,876 | 3,243 | 88.7% | -0.4% |
| HUNTS HEALTH | 965 | 1,108 | 87.1% | 1,906 | 2,120 | 89.9% | 2.8% |
| ISLE OF ELY | 3,236 | 3,668 | 88.2% | 3,859 | 4,283 | 90.1% | 1.9% |
| PETERBOROUGH | 4,442 | 5,179 | 85.8% | 4,672 | 5,438 | 85.9% | 0.1% |
| WISBECH | 1,767 | 1,982 | 89.2% | 1,762 | 2,048 | 86.0% | -3.1% |
| DATA SUPPRESSED | 46 | 52 | 88.5% | 49 | 55 | 89.1% | 0.6% |
| **CCG** | 21,504 | 24,440 | 88.0% | 24,107 | 27,254 | 88.5% | 0.5% |
| **England** | 1,208,272 | 1,396,229 | 86.5% | 1,310,545 | 1,502,807 | 87.2% | 0.7% |

CCG completion percentage for foot surveillance remains above that of England at 88.5% in comparison to 87.2%, although England’s completion percentage has increased by 0.7% between 2013/14 and 2014/15 in comparison to a 0.5% rise within the CCG.

**Figure 24: National Diabetes Audit 2013-14 / 2014-15, Care Process Completion for People with Type 2 Diabetes – C&P CCG LCGs, BMI**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **LCG** | **2013/14** | | | **2014/15** | | | **Change in % Completed 2013/14 - 2014/15** |
| **Numerator** | **Denominator** | **% Completed** | **Numerator** | **Denominator** | **% Completed** |
| BORDERLINE | 3,669 | 4,107 | 89.3% | 3,693 | 4,051 | 91.2% | 1.8% |
| CAM HEALTH | 873 | 980 | 89.1% | 1,074 | 1,237 | 86.8% | -2.3% |
| CATCH | 3,917 | 4,432 | 88.4% | 4,236 | 4,779 | 88.6% | 0.3% |
| HUNTS CARE PARTNERS | 2,609 | 2,932 | 89.0% | 2,827 | 3,243 | 87.2% | -1.8% |
| HUNTS HEALTH | 992 | 1,108 | 89.5% | 1,792 | 2,120 | 84.5% | -5.0% |
| ISLE OF ELY | 3,211 | 3,668 | 87.5% | 3,805 | 4,283 | 88.8% | 1.3% |
| PETERBOROUGH | 4,534 | 5,179 | 87.5% | 4,702 | 5,438 | 86.5% | -1.1% |
| WISBECH | 1,790 | 1,982 | 90.3% | 1,836 | 2,048 | 89.6% | -0.7% |
| DATA SUPPRESSED | 42 | 52 | 80.8% | 36 | 55 | 65.5% | -15.3% |
| **CCG** | 21,637 | 24,440 | 88.5% | 24,001 | 27,254 | 88.1% | -0.5% |
| **England** | 1,199,038 | 1,396,229 | 85.9% | 1,250,720 | 1,502,807 | 83.2% | -2.7% |

CCG completion percentage for BMI is now 4.9% higher than England at 88.1% compared to 83.2% as completion fell 2.7% between 2013/14 and 2014/15 in England whereas the fall across the CCG was 0.5%; increases in completion percentage are observed in the Borderline, Isle of Ely and Catch LCGs.

**Figure 25: National Diabetes Audit 2013-14 / 2014-15, Care Process Completion for People with Type 2 Diabetes – C&P CCG LCGs, Smoking**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **LCG** | **2013/14** | | | **2014/15** | | | **Change in % Completed 2013/14 - 2014/15** |
| **Numerator** | **Denominator** | **% Completed** | **Numerator** | **Denominator** | **% Completed** |
| BORDERLINE | 3,795 | 4,107 | 92.4% | 3,671 | 4,051 | 90.6% | -1.8% |
| CAM HEALTH | 897 | 980 | 91.5% | 1,134 | 1,237 | 91.7% | 0.1% |
| CATCH | 3,996 | 4,432 | 90.2% | 4,319 | 4,779 | 90.4% | 0.2% |
| HUNTS CARE PARTNERS | 2,580 | 2,932 | 88.0% | 2,598 | 3,243 | 80.1% | -7.9% |
| HUNTS HEALTH | 991 | 1,108 | 89.4% | 1,747 | 2,120 | 82.4% | -7.0% |
| ISLE OF ELY | 3,014 | 3,668 | 82.2% | 3,503 | 4,283 | 81.8% | -0.4% |
| PETERBOROUGH | 4,751 | 5,179 | 91.7% | 4,825 | 5,438 | 88.7% | -3.0% |
| WISBECH | 1,836 | 1,982 | 92.6% | 1,867 | 2,048 | 91.2% | -1.5% |
| DATA SUPPRESSED | 49 | 52 | 94.2% | 48 | 55 | 87.3% | -7.0% |
| **CCG** | 21,909 | 24,440 | 89.6% | 23,712 | 27,254 | 87.0% | -2.6% |
| **England** | 1,196,361 | 1,396,229 | 85.7% | 1,282,244 | 1,502,807 | 85.3% | -0.4% |

Smoking completion within the CCG remains above the national value for 2014/15 (87.0% compared to 85.3%), although within the CCG completion percentage fell by 2.6% compared to only 0.4% across England.

**Figure 26: National Diabetes Audit 2013-14 / 2014-15, Care Process Completion for People with Type 2 Diabetes – C&P CCG LCGs, All Eight Outcomes**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **LCG** | **2013/14** | | | **2014/15** | | | **Change in % Completed 2013/14 - 2014/15** |
| **Numerator** | **Denominator** | **% Completed** | **Numerator** | **Denominator** | **% Completed** |
| BORDERLINE | 3,029 | 4,107 | 73.8% | 2,899 | 4,051 | 71.6% | -2.2% |
| CAM HEALTH | 748 | 980 | 76.3% | 779 | 1,237 | 63.0% | -13.4% |
| CATCH | 3,279 | 4,432 | 74.0% | 3,299 | 4,779 | 69.0% | -5.0% |
| HUNTS CARE PARTNERS | 2,059 | 2,934 | 70.2% | 1,907 | 3,243 | 58.8% | -11.4% |
| HUNTS HEALTH | 841 | 1,110 | 75.8% | 1,242 | 2,122 | 58.5% | -17.2% |
| ISLE OF ELY | 2,421 | 3,668 | 66.0% | 2,568 | 4,283 | 60.0% | -6.0% |
| PETERBOROUGH | 3,695 | 5,179 | 71.3% | 3,313 | 5,440 | 60.9% | -10.4% |
| WISBECH | 1,317 | 1,982 | 66.4% | 1,246 | 2,048 | 60.8% | -5.6% |
| DATA SUPPRESSED | 34 | 52 | 65.4% | 26 | 55 | 47.3% | -18.1% |
| **CCG** | 17,423 | 24,444 | 71.3% | 17,279 | 27,258 | 63.4% | -7.9% |
| **England** | 948,040 | 1,396,414 | 67.9% | 887,337 | 1,503,034 | 59.0% | -8.9% |

Completion percentages for all eight outcomes for the CCG is 63.4% for 2014/15 which, as in 2013/14, is higher than the national completion percentage (59.0%). The percentage has, however, fallen by 7.9%, whereas in England it has fallen 8.9%.

**Figure 27: National Diabetes Audit 2014-15, Percentage of newly diagnosed people with type 1 diabetes recorded as being offered a structured education programme**

The percentage of newly diagnosed people with type 1 diabetes recorded as being offered a structured education programme has fallen across the CCG from 39.6% in 2013-14 to 28.9% in 2014-15; this contrasts with a rise observed nationally over this time period from 30.9% to 32.8%.

**Figure 28: National Diabetes Audit 2014-15, Percentage of newly diagnosed people with type 1 diabetes recorded as having attended a structured education programme**

The percentage of newly diagnosed people with type 1 diabetes recorded as having attended a structure education programme across the CCG has fallen from 4.0% to 0.9% between 2013-14 and 2014-15; across England the percentage remained consistent at 1.9% over this period.

**Figure 29: National Diabetes Audit 2014-15, Percentage of newly diagnosed people with type 2 diabetes recorded as being offered a structured education programme**

As with England, the CCG has seen its percentage of newly diagnosed people with type 2 diabetes increase between 2013-14 and 2014-15, by 8.8% to 80.5%.

**Figure 30: National Diabetes Audit 2014-15, Percentage of newly diagnosed people with type 2 diabetes recorded as having attended a structured education programme**

The percentage of newly diagnosed people with type 2 diabetes recorded as having attended a structured education programme has fallen between 2013-14 and 2014-15 across the CCG by almost half (49.4%), from 8.9% to 4.5%. Nationally it has risen from 5.8% to 5.9%.

**Figure 31: National Diabetes Audit 2013-14 / 2014-15, Treatment target achievement for people with type 1 diabetes**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Treatment Target** | **C&P CCG** | | | **England** | | |
| **% Completed 2013-14** | **% Completed 2014-15** | **% Variance 2013-14 / 2014-15** | **% Completed 2013-14** | **% Completed 2014-15** | **% Variance 2013-14 / 2014-15** |
| HbA1c < 48 mmol/mol | 9.3 | 10.5 | 1.2 | 8.6 | 8.9 | 0.3 |
| HbA1c <= 58 mmol/mol | 28.6 | 30.3 | 1.7 | 30.0 | 30.5 | 0.5 |
| HbA1c <= 86 mmol/mol | 85.0 | 85.8 | 0.8 | 85.0 | 84.7 | -0.3 |
| Blood pressure <= 140/80 | 72.6 | 76.1 | 3.5 | 76.3 | 76.5 | 0.2 |
| Cholesterol < 4 mmol/L | 27.4 | 29.2 | 1.8 | 30.1 | 30.1 | 0.0 |
| Cholesterol < 5 mmol/L | 69.2 | 72.2 | 3.0 | 71.6 | 71.4 | -0.2 |
| **All Three Treatment Targets** | 16.1 | **17.9** | 1.8 | 18.9 | **19.3** | 0.4 |

Banding is not provided for treatment target achievement as it was deemed inappropriate when investigated as part of the NDA. The statistical models used, which take in to account characteristics including age, sex, ethnicity, Indices of Multiple Deprivation (IMD), smoking status and Body Mass Index did not predict with sufficient certainty whether an individual was likely to achieve the treatment target. According, it is considered likely that achievement of treatment targets is largely driven by factors other than the patient characteristics captured in the NDA.

The table above provides percentages completed for both the CCG and England and shows the CCG to have a lower completion percentage for all three treatment targets than England (17.9% compared to 19.3%). However, the CCG does have a higher completion percentage for HbA1c < 48 mmol/mol, HbA1c <= 86 and cholesterol < 5 mmol/L. The CCG has also seen a rise in completion percentage of all treatment target indicators between 2013/14 and 2014/15 and an increase in completion of all three treatment targets of 1.8% compared to an increase of 0.4% nationally, suggesting the meeting of completion treatment targets is improving faster within the CCG than nationally.

**Figure 32: National Diabetes Audit 2013-14 / 2014-15, Treatment target achievement for people with type 2 diabetes**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Treatment Target** | **C&P CCG** | | | **England** | | |
| **% Completed 2013-14** | **% Completed 2014-15** | **% Variance 2013-14 / 2014-15** | **% Completed 2013-14** | **% Completed 2014-15** | **% Variance 2013-14 / 2014-15** |
| HbA1c < 48 mmol/mol | 22.7 | 24.9 | 2.2 | 29.3 | 29.5 | 0.2 |
| HbA1c <= 58 mmol/mol | 61.1 | 62.2 | 1.1 | 67.1 | 66.5 | -0.6 |
| HbA1c <= 86 mmol/mol | 93.5 | 93.4 | -0.1 | 93.8 | 93.5 | -0.3 |
| Blood pressure <= 140/80 | 68.2 | 69.9 | 1.7 | 73.5 | 74.3 | 0.8 |
| Cholesterol < 4 mmol/L | 40.5 | 41.3 | 0.8 | 42.0 | 42.2 | 0.2 |
| Cholesterol < 5 mmol/L | 76.2 | 77.3 | 1.1 | 77.9 | 77.6 | -0.3 |
| **All Three Treatment Targets** | 34.5 | **36.2** | 1.7 | 41.5 | **41.3** | -0.2 |

C&P CCG has a completion percentage for all three treatment targets of 36.2%, lower than the England percentage of 41.3%. The CCG has a lower completion percentage than England for each of the six individual target indicators within the table above, however completion percentages have increased for five of six individual measures in 2014/15 compared to 2013/14.

**Further sources of diabetes information.**

Further data that may be of use in relation to diabetes within Cambridgeshire & Peterborough CCG and associated localities are available via the links below:

1. Public Health England National General Practice Profiles – C&P CCG URL: <http://fingertips.phe.org.uk/profile/general-practice/data#mod,6,pyr,2015,pat,19,par,E38000026,are,-,sid1,2000005,ind1,-,sid2,-,ind2,->
2. Public Health England Healthier Lives – Diabetes URL: <http://healthierlives.phe.org.uk/topic/diabetes>
3. Public Health England Cardiovascular Disease Profiles URL: <http://fingertips.phe.org.uk/profile/cardiovascular>
4. NHS Atlas of Variation in Healthcare for People with Diabetes: <http://www.rightcare.nhs.uk/index.php/atlas/diabetes>
5. Appendix 1 below provides an overview of diabetes-related indicators at LCG/CCG level as contained within the 2014/15 Quality Outcomes Framework data release available at: <http://www.hscic.gov.uk/catalogue/PUB18887>
6. Cambridgeshire County Council Long Term Conditions JSNA and Data Supplements:

<http://www.cambridgeshireinsight.org.uk/JSNA/LTCs-across-the-lifecourse-2015>

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Appendix 1: 2014/15 Quality Outcomes Framework – Diabetes & Associated Indicators

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **LCG** | **1. Diabetes QOF Prevalence (17+)** | | **2. Exception Rate For Diabetes Indicators, %** | | **3. Obesity QOF Prevalence (16+)** | | **4. Last HbA1c <= 59 mmol/mol, %** | | **5. Last HbA1c <= 64 mmol/mol, %** | | **6. Last HbA1c <= 75 mmol/mol, %** | | **7. Last BP is <= 150/90 mmHg, %** | | **8. Last BP is <= 140/80 mmHg, %** | | **9. Last Measured Cholesterol is <= 5 mmol/l, %** | |
| **Number** | **%** | **Number** | **%** | **Number** | **%** | **Number** | **%** | **Number** | **%** | **Number** | **%** | **Number** | **%** | **Number** | **%** | **Number** | **%** |
| BORDERLINE | 5,615 | 6.5 | 6,550 | 14.3 | 8,297 | 9.5 | 3,098 | 55.2 | 3,563 | 63.5 | 4,250 | 75.7 | 4,758 | 84.7 | 3,615 | 64.4 | 3,874 | 69.0 |
| CAM HEALTH | 3,124 | 4.2 | 2,694 | 10.5 | 4,407 | 5.9 | 1,770 | 56.7 | 2,082 | 66.6 | 2,506 | 80.2 | 2,722 | 87.1 | 2,186 | 70.0 | 2,178 | 69.7 |
| CATCH | 7,618 | 4.0 | 7,009 | 11.3 | 11,541 | 6.0 | 4,558 | 59.9 | 5,291 | 69.6 | 6,152 | 80.9 | 6,527 | 85.8 | 5,180 | 68.1 | 5,213 | 68.6 |
| HUNTS CARE PARTNERS | 6,596 | 6.6 | 7,489 | 13.8 | 9,526 | 9.4 | 3,871 | 58.7 | 4,454 | 67.5 | 5,245 | 79.5 | 5,747 | 87.1 | 4,444 | 67.4 | 4,648 | 70.5 |
| HUNTS HEALTH | 3,292 | 5.9 | 3,911 | 14.4 | 5,100 | 9.0 | 1,832 | 55.7 | 2,141 | 65.0 | 2,580 | 78.4 | 2,859 | 86.8 | 2,210 | 67.1 | 2,252 | 68.4 |
| ISLE OF ELY | 5,269 | 6.8 | 4,294 | 9.9 | 8,180 | 10.5 | 3,158 | 59.9 | 3,623 | 68.8 | 4,277 | 81.2 | 4,715 | 89.5 | 4,020 | 76.3 | 3,702 | 70.3 |
| PETERBOROUGH | 7,225 | 6.5 | 9,666 | 16.1 | 11,542 | 10.3 | 3,689 | 50.5 | 4,246 | 58.2 | 5,145 | 70.8 | 6,034 | 83.1 | 4,581 | 62.7 | 5,045 | 69.3 |
| WISBECH | 2,930 | 7.5 | 2,472 | 10.3 | 4,501 | 11.3 | 1,636 | 55.8 | 1,881 | 64.2 | 2,242 | 76.5 | 2,271 | 77.5 | 1,665 | 56.8 | 1,982 | 67.6 |
| BORDERLINE & PETERBOROUGH LCGS | 12,840 | 6.5 | 16,216 | 15.3 | 19,839 | 9.9 | 6,787 | 52.5 | 7,809 | 60.5 | 9,395 | 72.9 | 10,792 | 83.8 | 8,196 | 63.4 | 8,919 | 69.2 |
| All OTHER LCGs IN CCG | 28,829 | 5.4 | 27,869 | 11.8 | 43,255 | 8.0 | 16,825 | 58.4 | 19,472 | 67.6 | 23,002 | 79.8 | 24,841 | 86.2 | 19,705 | 68.4 | 19,975 | 69.3 |
| CCG | 41,669 | 5.7 | 44,085 | 12.9 | 63,094 | 8.5 | 23,612 | 56.6 | 27,281 | 65.4 | 32,397 | 77.7 | 35,633 | 85.5 | 27,901 | 66.8 | 28,894 | 69.3 |

|  |
| --- |
| Key: |
| Statistically significantly better than CCG |
| Statistically similar to CCG |
| Statistically significantly worse than CCG |