

Analysis of National Diabetes Audit 2014-15 & 2015-16, Cambridgeshire & Peterborough Clinical Commissioning Group

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1. Introduction

The National Diabetes Audit (NDA) is one of the largest annual clinical audits in the world, integrating data from both primary and secondary care sources. The results of the 2015-16 collection were published on 31st January 2017. An overview of the NDA is available on the NHS Digital website at URL: <http://content.digital.nhs.uk/nda> and full data released in relation to the NDA, including results for individual General Practices, are available at URL: <http://digital.nhs.uk/pubs/ndauditcorerep1516>

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 recommended 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 services and organisations
- Identify and share best practice
- Identify gaps or shortfalls that are priorities for improvement
- Assess local practice against NICE guidelines
- 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 2014-15 & 2015-16, 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.

Within this paper, comparison of locality/CCG values to England are made through an assessment of 'statistical significance'. For each indicator value, 95% confidence intervals are calculated which provide a measure of uncertainty around the calculated value. If the confidence interval for the local value exceeds the value for the benchmark, the difference between the local value and the benchmark is said to be 'statistically significant'. Within this paper, where values are statistically significant they are represented via the below colour scheme:

Statistically significantly better than England
Statistically significantly worse than England

With the exception of primary care Quality Outcomes Framework (QOF) data contained within figure 2 and available via URL: <http://content.digital.nhs.uk/qof>, all data within this paper are sourced from publicly available National Diabetes Audit publications obtainable via URL: <http://content.digital.nhs.uk/nda>

2. Executive Summary

- The percentage of Cambridgeshire & Peterborough CCG practices participating in the National Diabetes Audit has increased from 71.3% in 2014/15 to 93.3% in 2015/2016, statistically significantly higher than the England participation rate of 81.4%. Within the CCG, type 1 registrations have increased by 31.5% (from 2,759 in 2014/15 to 3,627 in 2015/16) and type 2 registrations have increased over the same period by 32.2%, from 27,258 to 36,047.
- Only 9.9% of type 1 NDA registrations and 12.7% of type 2 registrations within C&P CCG were for patients within the most deprived 20% of patients, whereas 29.3% of type 1 and 23.3 of type 2 registrations were for patients in the least deprived 20%. This suggests that, although compliance with the NDA is significantly high within the CCG compared to England, there may be unaddressed need within the most deprived areas of the CCG. This trend is not reflected nationally, as in England type 1 registrations are relatively consistent across all five deprivation quintiles and for type 2, a greater percentage of patient registrations come from the most deprived areas.

- All four CCG localities - Cambridge, Huntingdon, Isle of Ely/Wisbech and Peterborough - have a statistically significantly higher percentage of type 1 care process completion for all 8 NDA outcomes and C&P CCG's overall completion percentage is significantly higher than England (43.7% compared to 37.3%). For treatment target achievement, the CCG is similar to England (18.0% compared to 18.3%), although the Peterborough locality is significantly worse with a percentage of 15.3%.
- There is a substantial discrepancy between CCG outcomes for type 2 patients between care process completion and treatment target achievement. For care process completion, as with type 1 patients, all four CCG localities are statistically significantly above England, as is the CCG overall with a completion percentage of 63.8% compared to 53.9% in England. However, for treatment target achievement, the CCG is significantly worse than England (36.3% compared to 40.4%) and the Huntingdon, Isle of Ely/Wisbech and Peterborough localities are significantly below England in isolation.
- Numbers of type 1 patients offered and attending structured education programmes have fallen within C&P CCG, with fewer patients diagnosed with diabetes in 2014 within the CCG being offered/receiving the service compared to those diagnosed in 2013. The percentage of type 2 patients diagnosed in 2014 and offered a structured education programme within the CCG was higher than those diagnosed in 2013, but the percentage who attended has fallen from 17.0% in those diagnosed in 2013 to 7.8% for those diagnosed in 2014.

3. Overview of 2014-15 & 2015-16 National Diabetes Audit Data

Figure 1: National Diabetes Audit 2014-15 & 2015-16, Participating General Practices – Cambridgeshire & Peterborough CCG/England Comparison

Audit Period	C&P CCG		England	
	Number	%	Number	%
2014-15	77	71.3	4,256	54.9
2015-16	98	93.3	6,165	81.4

C&P CCG's participation rate in the NDA has risen from 71.3% in 2014-15 to 93.3% and continues to be statistically significantly higher than England, for which participation has risen from 54.9% to 81.4%. 98 of 105 practices within the CCG participated in 2015-16 compared to 77 of 108 in 2014-15.

Figure 2: National Diabetes Audit 2014-15 & 2015-16, Participating General Practices by Clinical Commissioning Group Locality & 2015-16 Quality Outcomes Framework Indicators

CCG Locality	National Diabetes Audit Data						2015-16 Quality Outcomes Framework			
	2014-15 Participation			2015-16 Participation			1. Diabetes QOF Prevalence (17+)		2. Obesity QOF Prevalence (18+)	
	Y	N	% Participating	Y	N	% Participating	Number	%	Number	%
CAMBRIDGE	26	11	70.3%	34	2	94.4%	11,090	4.1%	15,260	5.7%
HUNTINGDON	16	10	61.5%	21	2	91.3%	8,491	6.1%	11,553	8.4%
ISLE OF ELY/WISBECH	11	3	78.6%	15	2	88.2%	10,242	7.4%	15,610	11.5%
PETERBOROUGH	24	7	77.4%	28	1	96.6%	13,473	6.6%	19,526	9.8%
CCG	77	31	71.3%	98	7	93.3%	43,296	5.8%	61,949	8.4%

All CCG localities showed an improvement in participation between 2014-15 and 2015-16. Participation in 2015-16 is highest within the CCG in Peterborough at 96.6% (28/29 practices) and lowest in Isle of Ely/Wisbech at 88.2% (15/17 practices). Diabetes prevalence in people aged 17+ is statistically significantly below the CCG average of 5.8% in Cambridge (4.1%) and significantly higher in all other localities. Obesity prevalence is also statistically significantly lower than the CCG average in Cambridge but significantly higher in Isle of Ely/Wisbech and Peterborough.

Figure 3: National Diabetes Audit 2014-15 & 2015-16, Total Registrations

Audit Period	Type 1				Type 2				Total Registrations			
	C&P CCG		England		C&P CCG		England		C&P CCG		England	
	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
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
2015-16	3,627	9.1	203,037	8.0	36,047	90.9	2,327,524	92.0	39,674	100.0	2,530,561	100.0

C&P CCG continues to have a higher percentage of type 1 registrations than England, with 9.1% compared to 8.0% and conversely a lower percentage of type 2 registrations (90.9% compared to 92.0%). The total number of registrations across the CCG grew by 32.2% between 2014-15 and 2015-16, whilst in England the increase over this period was 47.4%.

Figure 4: National Diabetes Audit 2014-15 & 2015-16, Registrations by Sex and Type

Sex	2014-15				2015-16			
	C&P CCG		England		C&P CCG		England	
	Type 1 (%)	Type 2 and other (%)	Type 1 (%)	Type 2 and other (%)	Type 1 (%)	Type 2 and other (%)	Type 1 (%)	Type 2 and other (%)
Male	56.8	56.4	56.3	55.6	56.5	56.7	56.5	55.5
Female	43.2	43.6	43.7	44.4	43.5	43.3	43.5	44.4
Unknown	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.1

The split of registrations by sex within C&P CCG continues to be relatively similar to that of England, with 56.5% of type 1 and 56.7% of type 2 registrations within the CCG being for males compared to 56.5% (type 1) and 55.5% (type 2) across England.

Figure 5: National Diabetes Audit 2014-15 & 2015-16, Registrations by Age

Age Group	2014-15				2015-16			
	C&P CCG		England		C&P CCG		England	
	Type 1 (%)	Type 2 and other (%)	Type 1 (%)	Type 2 and other (%)	Type 1 (%)	Type 2 and other (%)	Type 1 (%)	Type 2 and other (%)
<40	44.2	3.3	43.1	3.6	43.6	3.1	43.5	3.7
40-64	42.5	40.9	42.5	40.7	42.5	40.1	42.3	41.0
65-79	10.7	40.1	11.6	39.8	11.4	40.2	11.6	39.3
80+	2.6	15.7	2.5	15.8	2.5	16.6	2.6	16.1
Unknown	0.0	0.0	0.3	0.1	0.0	0.0	0.0	0.0

Registrations continue to be mainly within the <40 and 40-64 age groups for both the CCG and England in 2015-16, as was the case in 2014-15.

Figure 6: National Diabetes Audit 2014-15 & 2015-16, Registrations by Ethnicity

Ethnicity	2014-15				2015-16			
	C&P CCG		England		C&P CCG		England	
	Type 1 (%)	Type 2 and other (%)	Type 1 (%)	Type 2 and other (%)	Type 1 (%)	Type 2 and other (%)	Type 1 (%)	Type 2 and other (%)
White	83.7	79.9	70.2	63.2	85.0	82.0	71.0	63.5
Minority Ethnic Origin	8.6	11.8	9.7	19.1	5.4	9.8	8.1	18.3
Unknown/Not Stated	7.7	8.3	20.2	17.8	9.6	8.2	21.0	18.2

The CCG continues to have a higher percentage of registrations for ‘white’ ethnicity in comparison to England, which overall has a higher percentage of ‘minority ethnic origin’ and ‘unknown/not stated’ registrations.

Figure 7: National Diabetes Audit 2015-16, Registrations by Deprivation Quintile

Indices of Multiple Deprivation Quintile	C&P CCG		England	
	Type 1 (%)	Type 2 and other (%)	Type 1 (%)	Type 2 and other (%)
1 (Most Deprived)	9.9	12.7	19.5	23.5
2	15.8	18.3	20.2	22.3
3	24.0	25.1	20.6	20.4
4	21.0	20.5	20.0	18.4
5 (Least Deprived)	29.3	23.3	19.6	15.3

The 2015-16 NDA data contains, for the first time, information on the relative deprivation of the general practice within which NDA participants are registered. For both type 1 and type 2 registrations within C&P CCG, the percentage of total registrations is higher in the less deprived quintiles than in the most deprived quintiles, suggesting that NDA coverage is lower in more deprived areas of the CCG or that diabetes cases are not ascertained and diagnosed as much in the more deprived areas. This trend is not reflected at national level – type 1 registrations are relatively evenly proportioned across all five deprivation quintiles and a higher percentage of type 2 registrations are in the more deprived quintiles nationally.

Figure 8: National Diabetes Audit 2015-16, Summary of Outcomes for People with Type 1 Diabetes by CCG Locality

Locality	Care Process Completion %									Treatment Target Achievement						
	HbA1C	Blood Pressure	Cholesterol	Serum Creatine	Urine Albumin	Foot Surveillance	BMI	Smoking	All 8 Outcomes	HbA1c < 48 mmol/mol	HbA1c <= 58 mmol/mol	HbA1c <= 86 mmol/mol	Blood pressure <= 140/80	Cholesterol < 4 mmol/L	Cholesterol < 5 mmol/L	All Three Treatment Targets
CAMBRIDGE	87.2%	91.6%	80.0%	79.5%	59.4%	76.4%	83.9%	78.9%	40.6%	9.4%	38.0%	90.8%	69.1%	27.2%	70.2%	20.7%
HUNTINGDON	87.4%	89.1%	84.0%	87.3%	59.8%	80.3%	77.6%	80.1%	47.7%	9.8%	30.4%	88.1%	77.5%	28.2%	70.0%	17.4%
ISLE OF ELY/WISBECH	86.7%	92.2%	80.8%	84.7%	56.7%	75.7%	83.5%	78.7%	41.4%	9.9%	28.7%	87.2%	73.5%	31.0%	70.5%	17.2%
PETERBOROUGH	89.9%	92.0%	76.9%	82.4%	52.1%	74.4%	85.2%	81.2%	46.3%	10.7%	27.2%	84.4%	68.0%	29.9%	71.0%	15.3%
C&P CCG	87.9%	91.3%	80.1%	82.8%	56.9%	76.5%	82.9%	79.7%	43.7%	10.0%	31.7%	87.8%	71.2%	29.0%	70.5%	18.0%
ENGLAND	84.5%	89.4%	80.0%	82.1%	51.0%	73.7%	75.8%	79.0%	37.3%	8.5%	29.6%	84.4%	75.7%	30.0%	70.9%	18.3%

All four CCG localities have a statistically significantly higher percentage of care process completion for all 8 outcomes than England and many are significantly higher for a number of individual outcomes. However, with regards to treatment target achievement, all localities are statistically similar to England with the exception of Peterborough which is statistically significantly lower than England (15.3% compared to 18.3%). Only two localities are statistically significantly below England for any of the 8 care processes – Peterborough for cholesterol (76.9% compared to 80.0%) and Cambridge for serum creatine (79.5% compared to 82.1%).

The CCG is statistically significantly above England for five care process completion indicators as well as its value for all 8 outcomes. For treatment target achievement, the CCG is significantly above England three individual indicators and significantly worse for one indicator (blood pressure <= 140/80).

Figure 9: National Diabetes Audit 2015-16, Summary of Outcomes for People with Type 2 Diabetes by CCG Locality

Locality	Care Process Completion %									Treatment Target Achievement						
	HbA1C	Blood Pressure	Cholesterol	Serum Creatine	Urine Albumin	Foot Surveillance	BMI	Smoking	All 8 Outcomes	HbA1c < 48 mmol/mol	HbA1c <= 58 mmol/mol	HbA1c <= 86 mmol/mol	Blood pressure <= 140/80	Cholesterol < 4 mmol/L	Cholesterol < 5 mmol/L	All Three Treatment Targets
CAMBRIDGE	96.2%	96.7%	92.8%	95.7%	77.3%	89.7%	87.0%	89.9%	66.4%	27.2%	68.5%	95.5%	70.5%	41.1%	76.8%	40.1%
HUNTINGDON	96.3%	96.7%	93.5%	95.9%	74.6%	91.1%	86.4%	85.9%	61.7%	27.0%	63.9%	94.2%	68.7%	37.7%	74.4%	35.2%
ISLE OF ELY/WISBECH	96.1%	96.6%	93.6%	96.3%	72.2%	89.1%	88.9%	85.2%	60.1%	26.9%	65.8%	94.7%	70.3%	41.9%	76.2%	37.7%
PETERBOROUGH	94.1%	95.5%	91.4%	94.6%	73.1%	87.3%	88.9%	90.3%	65.7%	25.4%	61.3%	93.3%	64.3%	42.0%	76.2%	32.8%
C&P CCG	95.5%	96.3%	92.6%	95.5%	74.1%	89.0%	87.9%	88.2%	63.8%	26.5%	64.7%	94.3%	68.1%	40.9%	76.0%	36.3%
ENGLAND	95.1%	95.8%	93.1%	94.8%	66.8%	87.1%	82.8%	85.4%	53.9%	28.2%	65.9%	93.4%	73.7%	42.3%	77.2%	40.4%

Due to a higher number of type 2 diabetes registrations, there is less statistical uncertainty regarding the data and therefore smaller confidence intervals, resulting in a higher number of statistically significant indicators. C&P CCG and its localities are generally statistically significantly better than England for type 2 care process completion and significantly worse than England for target treatment achievement.

For care process completion, C&P CCG is significantly above England for 7 of 8 indicators, the exception being cholesterol (CCG 92.6%, England 93.1%). The CCG is significantly above England for all 8 outcomes, with a value of 63.8% compared to 53.9% for England.

With regards to treatment target achievement, the CCG is significantly below England for five of six individual indicators and the measure that captures all three treatment targets. The exception is HbA1C <= 86 mmol/mol, where the CCG is significantly above England.

4. Care Process Completion for People with Type 1 Diabetes

Figure 10: National Diabetes Audit 2014-15 / 2015-16, Care Process Completion for People with Type 1 Diabetes

Care Process	C&P CCG			England			CCG Banding 14-15	CCG Banding 15-16
	% Completed 2014-15	% Completed 2015-16	% Variance 2014-15 / 2015-16	% Completed 2014-15	% Completed 2015-16	% Variance 2014-15 / 2015-16		
HbA1C	82.4	87.9	5.5	84.0	84.5	0.5	As expected	As expected
Blood Pressure	88.6	91.3	2.7	89.3	89.4	0.1	As expected	As expected
Cholesterol	75.4	80.1	4.7	79.5	80.0	0.5	Lower than expected	As expected
Serum Creatinine	77.8	82.8	5.0	81.1	82.1	1.0	As expected	As expected
Urine Albumin	53	56.9	3.9	56.7	51.0	-5.7	Lower than expected	Higher than expected
Foot Surveillance	74.9	76.5	1.6	73.4	73.7	0.3	Higher than expected	As expected
BMI	79.4	82.9	3.5	75.4	75.8	0.4	As expected	Higher than expected
Smoking	77.8	79.7	1.9	78.3	79.0	0.7	As expected	As expected
All Eight Care Processes	40.8	43.7	2.9	39.6	37.3	-2.3	As expected	Higher than expected

The NDA ‘bandings’ contained within the table above show where the CCG is performing ‘as expected’, ‘lower than expected’ (worse) or ‘higher than expected’ (better) based on data provided as part of the NDA that has enabled modelling 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, area deprivation score, 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 has improved in 2015-16 to now be higher than expected for three indicators (urine albumin, BMI and all eight care processes combined) and ‘as expected’ for the other six indicators within the table above.

A CCG locality-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 data the contribution towards CCG totals from these practices and these data are included in the row noted as 'Data Suppressed' in the tables below.

Figure 11: National Diabetes Audit 2014-15 / 2015-16, Care Process Completion for People with Type 1 Diabetes – C&P CCG Localities, HbA1c

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	613	794	77.2%	1,034	1,186	87.2%	10.0%
HUNTINGDON	416	501	83.0%	619	708	87.4%	4.4%
ISLE OF ELY/WISBECH	469	561	83.6%	601	693	86.7%	3.1%
PETERBOROUGH	767	894	85.8%	923	1,027	89.9%	4.1%
DATA SUPPRESSED	8	9	88.9%	11	11	100.0%	11.1%
C&P CCG	2,273	2,759	82.4%	3,188	3,625	87.9%	5.6%
England	109,776	130,750	84.0%	162,651	192,505	84.5%	0.5%

All localities have seen an improvement in care process completion for type 1 HbA1c between 2014/15 and 2015/16. The CCG now has a statistically significantly high completion percentage in comparison to England, as do three of four localities.

Figure 12: National Diabetes Audit 2014-15 / 2015-16, Care Process Completion for People with Type 1 Diabetes – C&P CCG Localities, Blood Pressure

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	657	766	85.8%	1,048	1,144	91.6%	5.8%
HUNTINGDON	422	487	86.7%	612	687	89.1%	2.4%
ISLE OF ELY/WISBECH	497	536	92.7%	615	667	92.2%	-0.5%
PETERBOROUGH	761	849	89.6%	903	981	92.0%	2.4%
DATA SUPPRESSED	8	9	88.9%	10	13	76.9%	-12.0%
C&P CCG	2,345	2,647	88.6%	3,188	3,492	91.3%	2.7%
England	112,150	125,624	89.3%	165,263	184,820	89.4%	0.1%

Cambridge, Isle of Ely/Wisbech and Peterborough are all statistically significantly better than England for care process completion for type 1 blood pressure in 2015/16.

Figure 13: National Diabetes Audit 2014-15 / 2015-16, Care Process Completion for People with Type 1 Diabetes – C&P CCG Localities, Cholesterol

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	523	766	68.3%	915	1,144	80.0%	11.7%
HUNTINGDON	399	487	81.9%	577	687	84.0%	2.1%
ISLE OF ELY/WISBECH	422	536	78.7%	539	667	80.8%	2.1%
PETERBOROUGH	642	849	75.6%	754	981	76.9%	1.2%
DATA SUPPRESSED	9	9	100.0%	11	13	84.6%	-15.4%
C&P CCG	1,995	2,647	75.4%	2,796	3,492	80.1%	4.7%
England	99,904	125,624	79.5%	147,799	184,820	80.0%	0.5%

All localities have shown an improvement in completion percentage in relation to this indicator, with CCG improvement from 75.4% to 80.1% improving statistical significance from significantly worse to statistically similar. Huntingdon has improved from being statistically similar to England to now significantly better in 2015/16 and Cambridge has improve from significantly worse to statistically similar. Although Peterborough has improved from 75.6% to 76.8%, the locality remains significantly worse than England.

Figure 14: National Diabetes Audit 2014-15 / 2015-16, Care Process Completion for People with Type 1 Diabetes – C&P CCG Localities, Serum Creatine

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	528	766	68.9%	910	1,144	79.5%	10.6%
HUNTINGDON	403	487	82.8%	600	687	87.3%	4.6%
ISLE OF ELY/WISBECH	444	536	82.8%	565	667	84.7%	1.9%
PETERBOROUGH	675	849	79.5%	808	981	82.4%	2.9%
DATA SUPPRESSED	9	9	100.0%	10	13	76.9%	-23.1%
C&P CCG	2,059	2,647	77.8%	2,893	3,492	82.8%	5.1%
England	101,848	125,624	81.1%	151,735	184,820	82.1%	1.0%

C&P CCG was statistically significantly worse than England for this indicator in 2014/15 and has now improved be statistically similar. Huntingdon has improved from similar to now significantly better. The largest observed rise in terms of percentage points is in Cambridge, 10.6% from 68.9% to 79.5%, but this locality remains significantly worse than England.

Figure 15: National Diabetes Audit 2014-15 / 2015-16, Care Process Completion for People with Type 1 Diabetes – C&P CCG Localities, Urine Albumin

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	387	766	50.5%	679	1,144	59.4%	8.8%
HUNTINGDON	259	487	53.2%	411	687	59.8%	6.6%
ISLE OF ELY/WISBECH	281	536	52.4%	378	667	56.7%	4.2%
PETERBOROUGH	472	849	55.6%	511	981	52.1%	-3.5%
DATA SUPPRESSED	5	9	55.6%	7	13	53.8%	-1.7%
C&P CCG	1,404	2,647	53.0%	1,986	3,492	56.9%	3.8%
England	71,194	125,624	56.7%	94,338	184,820	51.0%	-5.7%

C&P CCG has improved from significantly worse than England in 2014/15 to significantly better in 2015/16. Three localities are also significantly better than England, the exception being Peterborough.

Figure 16: National Diabetes Audit 2014-15 / 2015-16, Care Process Completion for People with Type 1 Diabetes – C&P CCG Localities, Foot Surveillance

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	559	766	73.0%	874	1,144	76.4%	3.4%
HUNTINGDON	372	487	76.4%	552	687	80.3%	4.0%
ISLE OF ELY/WISBECH	420	536	78.4%	505	667	75.7%	-2.6%
PETERBOROUGH	622	849	73.3%	730	981	74.4%	1.2%
DATA SUPPRESSED	9	9	100.0%	10	13	76.9%	-23.1%
C&P CCG	1,982	2,647	74.9%	2,671	3,492	76.5%	1.6%
England	92,148	125,624	73.4%	136,143	184,820	73.7%	0.3%

C&P CCG was statistically similar to England for this indicator in 2014/15 and is significantly better in 2015-16 with a value of 76.5% compared to 73.7%.

Figure 17: National Diabetes Audit 2014-15 / 2015-16, Care Process Completion for People with Type 1 Diabetes – C&P CCG Localities, BMI

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	576	766	75.2%	960	1,144	83.9%	8.7%
HUNTINGDON	365	487	74.9%	533	687	77.6%	2.6%
ISLE OF ELY/WISBECH	448	536	83.6%	557	667	83.5%	-0.1%
PETERBOROUGH	706	849	83.2%	836	981	85.2%	2.1%
DATA SUPPRESSED	6	9	66.7%	8	13	61.5%	-5.1%
C&P CCG	2,101	2,647	79.4%	2,894	3,492	82.9%	3.5%
England	94,698	125,624	75.4%	140,107	184,820	75.8%	0.4%

The CCG continues to be statistically significantly better than England for BMI care process completion and has improved 3.5 percentage points compared to 0.4% in England between 2014/15 and 2015/16.

Figure 18: National Diabetes Audit 2014-15 / 2015-16, Care Process Completion for People with Type 1 Diabetes – C&P CCG Localities, Smoking

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	569	766	74.3%	903	1,144	78.9%	4.7%
HUNTINGDON	369	487	75.8%	550	687	80.1%	4.3%
ISLE OF ELY/WISBECH	422	536	78.7%	525	667	78.7%	0.0%
PETERBOROUGH	693	849	81.6%	797	981	81.2%	-0.4%
DATA SUPPRESSED	7	9	77.8%	8	13	61.5%	-16.2%
C&P CCG	2,060	2,647	77.8%	2,783	3,492	79.7%	1.9%
England	98,410	125,624	78.3%	145,933	184,820	79.0%	0.7%

Cambridge has improved from significantly worse than England to now statistically similar. By contrast, a 0.4 percentage point fall in Peterborough combined with a 0.7 percentage point increase in England means Peterborough is now statistically similar to England, having been significantly better in 2014/15.

Figure 19: National Diabetes Audit 2014-15 / 2015-16, Care Process Completion for People with Type 1 Diabetes – C&P CCG Localities, All 8 Outcomes

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	274	794	34.5%	482	1,186	40.6%	6.1%
HUNTINGDON	198	501	39.5%	338	708	47.7%	8.2%
ISLE OF ELY/WISBECH	218	561	38.9%	287	693	41.4%	2.6%
PETERBOROUGH	432	894	48.3%	476	1,027	46.3%	-2.0%
DATA SUPPRESSED	0	9	0.0%	3	13	23.1%	23.1%
C&P CCG	1,122	2,759	40.7%	1,586	3,627	43.7%	3.1%
England	51,752	130,750	39.6%	71,877	192,505	37.3%	-2.3%

A rise of 3.1 percentage points, from 40.7% to 43.7%, between 2014/15 and 2015/16 has improved C&P CCG's outcomes for all 8 care processes collectively from statistically similar to England to now statistically significantly better.

5. Care Process Completion for People with Type 2 Diabetes

Figure 20: National Diabetes Audit 2014-15 / 2015-16, Care Process Completion for People with Type 2 Diabetes

Care Process	C&P CCG			England			CCG Banding	CCG Banding
	% Completed 2014-15	% Completed 2015-16	% Variance 2014-15 / 2015-16	% Completed 2014-15	% Completed 2015-16	% Variance 2014-15 / 2015-16		
HbA1C	95.1	95.5	0.4	94.9	95.1	0.2	As expected	As expected
Blood Pressure	96.2	96.3	0.1	96.2	95.8	-0.4	As expected	As expected
Cholesterol	92.2	92.6	0.4	93.2	93.1	-0.1	As expected	As expected
Serum Creatinine	95	95.5	0.5	94.6	94.8	0.2	As expected	As expected
Urine Albumin	75.6	74.1	-1.5	74.9	66.8	-8.1	As expected	Higher than expected
Foot Surveillance	88.5	89	0.5	87.2	87.1	-0.1	Higher than expected	As expected
BMI	88.1	87.9	-0.2	83.2	82.8	-0.4	Higher than expected	Higher than expected
Smoking	87	88.2	1.2	85.3	85.4	0.1	As expected	As expected
All Eight Care Processes	63.4	63.8	0.4	59	53.9	-5.1	Higher than expected	Higher than expected

The CCG continues to be banded 'higher than expected' for all eight care processes relating to type 2 patients combined in 2015/16. Urine Albumin has improved from 'as expected' to 'higher than expected' and foot surveillance has worsened from 'higher than expected' to 'as expected'.

Figure 21: National Diabetes Audit 2014-15 / 2015-16, Care Process Completion for People with Type 2 Diabetes – C&P CCG Localities, HbA1c

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	5,754	6,016	95.6%	8,836	9,182	96.2%	0.6%
HUNTINGDON	5,077	5,365	94.6%	6,548	6,803	96.3%	1.6%
ISLE OF ELY/WISBECH	6,112	6,331	96.5%	7,926	8,249	96.1%	-0.5%
PETERBOROUGH	8,938	9,491	94.2%	11,050	11,748	94.1%	-0.1%
DATA SUPPRESSED	52	55	94.5%	59	65	90.8%	-3.8%
C&P CCG	25,933	27,258	95.1%	34,419	36,047	95.5%	0.3%
England	1,426,977	1,503,034	94.9%	2,153,043	2,263,484	95.1%	0.2%

C&P CCG is now statistically significantly better than England for this indicator, having been statistically similar in 2014/15. Peterborough remains significantly worse than England and within this locality there is an observed fall of 0.1% between 2014/15 and 2015/16.

Figure 22: National Diabetes Audit 2014-15 / 2015-16, Care Process Completion for People with Type 2 Diabetes – C&P CCG Localities, Blood Pressure

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	5,806	6,016	96.5%	8,879	9,181	96.7%	0.2%
HUNTINGDON	5,153	5,363	96.1%	6,571	6,798	96.7%	0.6%
ISLE OF ELY/WISBECH	6,144	6,331	97.0%	7,971	8,249	96.6%	-0.4%
PETERBOROUGH	9,071	9,489	95.6%	11,216	11,745	95.5%	-0.1%
DATA SUPPRESSED	52	55	94.5%	65	65	100.0%	5.5%
C&P CCG	26,226	27,254	96.2%	34,702	36,038	96.3%	0.1%
England	1,445,734	1,502,807	96.2%	2,168,347	2,263,118	95.8%	-0.4%

The CCG is now significantly better than England for blood pressure care process completion for people with type 2 diabetes, having been statistically similar in 2014/15. Peterborough has improved from being significantly worse to now statistically similar.

Figure 23: National Diabetes Audit 2014-15 / 2015-16, Care Process Completion for People with Type 2 Diabetes – C&P CCG Localities, Cholesterol

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	5,545	6,016	92.2%	8,517	9,181	92.8%	0.6%
HUNTINGDON	4,941	5,363	92.1%	6,354	6,798	93.5%	1.3%
ISLE OF ELY/WISBECH	5,901	6,331	93.2%	7,721	8,249	93.6%	0.4%
PETERBOROUGH	8,689	9,489	91.6%	10,735	11,745	91.4%	-0.2%
DATA SUPPRESSED	51	55	92.7%	59	65	90.8%	-2.0%
C&P CCG	25,127	27,254	92.2%	33,386	36,038	92.6%	0.4%
England	1,400,161	1,502,807	93.2%	2,107,093	2,263,118	93.1%	-0.1%

Although CCG attainment for this care process has improved by 0.4 percentage points, the CCG remains statistically significantly worse than England.

Figure 24: National Diabetes Audit 2014-15 / 2015-16, Care Process Completion for People with Type 2 Diabetes – C&P CCG Localities, Serum Creatine

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	5,715	6,016	95.0%	8,783	9,181	95.7%	0.7%
HUNTINGDON	5,078	5,363	94.7%	6,521	6,798	95.9%	1.2%
ISLE OF ELY/WISBECH	6,099	6,331	96.3%	7,942	8,249	96.3%	-0.1%
PETERBOROUGH	8,961	9,489	94.4%	11,111	11,745	94.6%	0.2%
DATA SUPPRESSED	51	55	92.7%	61	65	93.8%	1.1%
C&P CCG	25,904	27,254	95.0%	34,418	36,038	95.5%	0.5%
England	1,421,987	1,502,807	94.6%	2,145,808	2,263,118	94.8%	0.2%

C&P CCG continues to be statistically significantly better than England for this indicator and has improved 0.5 percentage points between 2014/15 and 2015/16.

Figure 25: National Diabetes Audit 2014-15 / 2015-16, Care Process Completion for People with Type 2 Diabetes – C&P CCG Localities, Urine Albumin

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	4,703	6,016	78.2%	7,093	9,181	77.3%	-0.9%
HUNTINGDON	3,961	5,363	73.9%	5,070	6,798	74.6%	0.7%
ISLE OF ELY/WISBECH	4,796	6,331	75.8%	5,953	8,249	72.2%	-3.6%
PETERBOROUGH	7,108	9,489	74.9%	8,582	11,745	73.1%	-1.8%
DATA SUPPRESSED	40	55	72.7%	24	65	36.9%	-35.8%
C&P CCG	20,608	27,254	75.6%	26,722	36,038	74.1%	-1.5%
England	1,125,696	1,502,807	74.9%	1,512,517	2,263,118	66.8%	-8.1%

Although C&P CCG's attainment percentage for this indicator has fallen between 2014/15 and 2015/16, the CCG remains significantly better than England.

Figure 26: National Diabetes Audit 2014-15 / 2015-16, Care Process Completion for People with Type 2 Diabetes – C&P CCG Localities, Foot Surveillance

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	5,367	6,016	89.2%	8,239	9,181	89.7%	0.5%
HUNTINGDON	4,782	5,363	89.2%	6,192	6,798	91.1%	1.9%
ISLE OF ELY/WISBECH	5,621	6,331	88.8%	7,347	8,249	89.1%	0.3%
PETERBOROUGH	8,288	9,489	87.3%	10,249	11,745	87.3%	-0.1%
DATA SUPPRESSED	49	55	89.1%	58	65	89.2%	0.1%
C&P CCG	24,107	27,254	88.5%	32,085	36,038	89.0%	0.6%
England	1,310,545	1,502,807	87.2%	1,972,306	2,263,118	87.1%	-0.1%

Foot surveillance care process completion has improved across C&P CCG by 0.6 percentage points between 2014/15 and 2015/16 and remains statistically significantly above England.

Figure 27: National Diabetes Audit 2014-15 / 2015-16, Care Process Completion for People with Type 2 Diabetes – C&P CCG Localities, BMI

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	5310	6016	88.3%	7991	9181	87.0%	-1.2%
HUNTINGDON	4619	5363	86.1%	5874	6798	86.4%	0.3%
ISLE OF ELY/WISBECH	5641	6331	89.1%	7336	8249	88.9%	-0.2%
PETERBOROUGH	8395	9489	88.5%	10436	11745	88.9%	0.4%
DATA SUPPRESSED	36	55	65.5%	33	65	50.8%	-14.7%
C&P CCG	24001	27254	88.1%	31670	36038	87.9%	-0.2%
England	1,250,720	1,502,807	83.2%	1,874,535	2,263,118	82.8%	-0.4%

The CCG remains statistically significantly above England for BMI care process completion for people with type 2 diabetes.

Figure 28: National Diabetes Audit 2014-15 / 2015-16, Care Process Completion for People with Type 2 Diabetes – C&P CCG Localities, Smoking

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	5,453	6,016	90.6%	8,252	9,181	89.9%	-0.8%
HUNTINGDON	4,345	5,363	81.0%	5,839	6,798	85.9%	4.9%
ISLE OF ELY/WISBECH	5,370	6,331	84.8%	7,032	8,249	85.2%	0.4%
PETERBOROUGH	8,496	9,489	89.5%	10,605	11,745	90.3%	0.8%
DATA SUPPRESSED	48	55	87.3%	48	65	73.8%	-13.4%
C&P CCG	23,712	27,254	87.0%	31,776	36,038	88.2%	1.2%
England	1,282,244	1,502,807	85.3%	1,932,234	2,263,118	85.4%	0.1%

The Huntingdon locality has improved 4.9 percentage points for this indicator between 2014/15 and 2015/16 and is now statistically similar to England having been significantly worse in 2014/15.

Figure 29: National Diabetes Audit 2014-15 / 2015-16, Care Process Completion for People with Type 2 Diabetes – C&P CCG Localities, All 8 Outcomes

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	4,078	6,016	67.8%	6,096	9,182	66.4%	-1.4%
HUNTINGDON	3,149	5,365	58.7%	4,197	6,803	61.7%	3.0%
ISLE OF ELY/WISBECH	3,814	6,331	60.2%	4,958	8,249	60.1%	-0.1%
PETERBOROUGH	6,212	9,491	65.5%	7,714	11,748	65.7%	0.2%
DATA SUPPRESSED	26	55	47.3%	16	65	24.6%	-22.7%
C&P CCG	17,279	27,258	63.4%	22,981	36,047	63.8%	0.4%
England	887,337	1,503,034	59.0%	1,219,714	2,263,484	53.9%	-5.1%

The CCG is statistically significantly better than England in 2015/16 for all 8 outcomes combined, as are all four localities.

6. Treatment Target Achievement for People with Type 1 Diabetes

Figure 30: National Diabetes Audit 2014-15 / 2015-16, Treatment Target Achievement for People with Type 1 Diabetes

Treatment Target	C&P CCG			England		
	% Completed 2014-15	% Completed 2015-16	% Variance 2014-15 / 2015-16	% Completed 2014-15	% Completed 2015-16	% Variance 2014-15 / 2015-16
HbA1c < 48 mmol/mol	10.5	10	-0.5	8.9	8.5	-0.4
HbA1c ≤ 58 mmol/mol	30.3	31.7	1.4	30.5	29.6	-0.9
HbA1c ≤ 86 mmol/mol	85.8	87.8	2	84.7	84.4	-0.3
Blood pressure ≤ 140/80	76.1	71.2	-4.9	76.5	75.7	-0.8
Cholesterol < 4 mmol/L	29.2	29	-0.2	30.1	30.0	-0.1
Cholesterol < 5 mmol/L	72.2	70.5	-1.7	71.4	70.9	-0.5
All Three Treatment Targets	17.9	18	0.1	19.3	18.3	-1.0

The modelled banding methodology described above has been investigated for treatment target achievement results but is not judged to be appropriate and is therefore not provided. This is because the statistical models taking account of characteristics including age, sex, ethnicity and deprivation did not predict with sufficient certainty whether an individual was likely to achieve a treatment target. Accordingly, it is likely that achievement of treatment targets is largely driven by factors other than the patient characteristics captured in the NDA.

Figure 31: National Diabetes Audit 2014-15 / 2015-16, Treatment Target Achievement for People with Type 1 Diabetes – HbA1c <48 mmol/mol (6.5%)

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	57	603	9.5%	97	1,028	9.4%	0.0%
HUNTINGDON	35	413	8.5%	60	615	9.8%	1.3%
ISLE OF ELY/WISBECH	51	463	11.0%	59	593	9.9%	-1.1%
PETERBOROUGH	91	749	12.1%	96	901	10.7%	-1.5%
DATA SUPPRESSED	1	7	14.3%	2	10	20.0%	5.7%
C&P CCG	235	2,235	10.5%	314	3,147	10.0%	-0.5%
England	9,663	108,731	8.9%	13,693	161,335	8.5%	-0.4%

C&P CCG remains significantly better than England for this indicator, although attainment percentage has fallen 0.5 percentage points between 2014/15 and 2015/16.

Figure 32: National Diabetes Audit 2014-15 / 2015-16, Treatment Target Achievement for People with Type 1 Diabetes – HbA1c <58 mmol/mol (7.5%)

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	188	545	34.5%	391	1,028	38.0%	3.5%
HUNTINGDON	126	413	30.5%	187	615	30.4%	-0.1%
ISLE OF ELY/WISBECH	142	463	30.7%	170	593	28.7%	-2.0%
PETERBOROUGH	200	749	26.7%	245	901	27.2%	0.5%
DATA SUPPRESSED	22	65	33.8%	5	10	50.0%	16.2%
C&P CCG	678	2,235	30.3%	998	3,147	31.7%	1.4%
England	33,131	108,731	30.5%	47,703	161,335	29.6%	-0.9%

A 1.4 percentage point increase in treatment target achievement percentage between 2014/15 and 2015/16 compared to a 0.9 percentage point fall in England has seen C&P improve from statistically similar to England to now significantly better.

Figure 33: National Diabetes Audit 2014-15 / 2015-16, Treatment Target Achievement for People with Type 1 Diabetes – HbA1c <88 mmol/mol (10.0%)

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	480	545	88.1%	933	1028	90.8%	2.7%
HUNTINGDON	345	413	83.5%	542	615	88.1%	4.6%
ISLE OF ELY/WISBECH	411	463	88.8%	517	593	87.2%	-1.6%
PETERBOROUGH	621	749	82.9%	760	901	84.4%	1.4%
DATA SUPPRESSED	60	65	92.3%	10	10	100.0%	7.7%
C&P CCG	1,917	2,235	85.8%	2762	3147	87.8%	2.0%
England	92,068	108,731	84.7%	136,171	161,335	84.4%	-0.3%

C&P CCG is now significantly better than England (87.8% compared to 84.4%), and target achievement percentage has risen 2.0 percentage points between 2014/15 and 2015/16.

Figure 34: National Diabetes Audit 2014-15 / 2015-16, Treatment Target Achievement for People with Type 1 Diabetes – Blood Pressure <= 140/80

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	446	589	75.7%	723	1,047	69.1%	-6.7%
HUNTINGDON	321	422	76.1%	474	612	77.5%	1.4%
ISLE OF ELY/WISBECH	392	496	79.0%	452	615	73.5%	-5.5%
PETERBOROUGH	565	761	74.2%	614	903	68.0%	-6.2%
DATA SUPPRESSED	60	76	78.9%	7	10	70.0%	-8.9%
C&P CCG	1,784	2,344	76.1%	2,270	3,187	71.2%	-4.9%
England	85,066	111,267	76.5%	124,367	164,384	75.7%	-0.8%

Across the CCG, the target achievement percentage for this indicator has fallen by 4.9 percentage points and C&P CCG is now significantly worse than England. Cambridge and Peterborough localities are both also now significantly worse than England as a result of falls in the target achievement percentage between 2014/5 and 2015/16.

Figure 35: National Diabetes Audit 2014-15 / 2015-16, Treatment Target Achievement for People with Type 1 Diabetes – Cholesterol < 4 mmol/L

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	104	468	22.2%	249	914	27.2%	5.0%
HUNTINGDON	113	399	28.3%	163	577	28.2%	-0.1%
ISLE OF ELY/WISBECH	133	422	31.5%	167	539	31.0%	-0.5%
PETERBOROUGH	207	642	32.2%	225	753	29.9%	-2.4%
DATA SUPPRESSED	25	64	39.1%	6	11	54.5%	15.5%
C&P CCG	582	1,995	29.2%	810	2794	29.0%	-0.2%
England	29,966	99,656	30.1%	44,159	147,403	30.0%	-0.1%

The CCG continues to be statistically similar to England for this indicator, although Cambridge has improved by 5.0 percentage points between 2014/15 and 2015/16 and is now similar to England having been significantly worse in 2014/15.

Figure 36: National Diabetes Audit 2014-15 / 2015-16, Treatment Target Achievement for People with Type 1 Diabetes – Cholesterol < 5 mmol/L

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	333	468	71.2%	642	914	70.2%	-0.9%
HUNTINGDON	294	399	73.7%	404	577	70.0%	-3.7%
ISLE OF ELY/WISBECH	296	422	70.1%	380	539	70.5%	0.4%
PETERBOROUGH	474	642	73.8%	535	753	71.0%	-2.8%
DATA SUPPRESSED	44	64	68.8%	9	11	81.8%	13.1%
C&P CCG	1,441	1,995	72.2%	1970	2794	70.5%	-1.7%
England	71,143	99,656	71.4%	104,451	147,403	70.9%	-0.5%

Target achievement percentage for this indicator has fallen 1.7 percentage points across C&P CCG between 2014/15 and 2015/16; the CCG remains statistically similar to England, as do all localities.

Figure 37: National Diabetes Audit 2014-15 / 2015-16, Treatment Target Achievement for People with Type 1 Diabetes – All three treatment targets

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	91	435	20.9%	186	897	20.7%	-0.2%
HUNTINGDON	73	373	19.6%	97	557	17.4%	-2.2%
ISLE OF ELY/WISBECH	65	402	16.2%	90	522	17.2%	1.1%
PETERBOROUGH	99	636	15.6%	115	754	15.3%	-0.3%
DATA SUPPRESSED	13	59	22.0%	4	9	44.4%	22.4%
C&P CCG	341	1905	17.9%	492	2,739	18.0%	0.1%
England	18,382	95,382	19.3%	25,990	141,839	18.3%	-1.0%

C&P CCG remains statistically similar for all three treatment targets, with an attainment percentage of 18.0% compared to 18.3% across England.

7. Treatment Target Achievement for People with Type 2 Diabetes

Figure 38: National Diabetes Audit 2014-15 / 2015-16, Treatment Target Achievement for People with Type 2 Diabetes

Treatment Target	C&P CCG			England		
	% Completed 2014-15	% Completed 2015-16	% Variance 2014-15 / 2015-16	% Completed 2014-15	% Completed 2015-16	% Variance 2014-15 / 2015-16
HbA1c < 48 mmol/mol	24.9	26.5	1.6	29.5	28.2	-1.3
HbA1c ≤ 58 mmol/mol	62.2	64.7	2.5	66.5	65.9	-0.6
HbA1c ≤ 86 mmol/mol	93.4	94.3	0.9	93.5	93.4	-0.1
Blood pressure ≤ 140/80	69.9	68.1	-1.8	74.3	73.7	-0.6
Cholesterol < 4 mmol/L	41.3	40.9	-0.4	42.2	42.3	0.1
Cholesterol < 5 mmol/L	77.3	76.0	-1.3	77.6	77.2	-0.4
All Three Treatment Targets	36.2	36.3	0.1	41.3	40.4	-0.9

The table above shows that treatment target achievement for people within type 2 diabetes remains relatively stable across C&P CCG and therefore continues to be below that of England.

Figure 39: National Diabetes Audit 2014-15 / 2015-16, Treatment Target Achievement for People with Type 2 Diabetes – HbA1c <48 mmol/mol (6.5%)

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	1,399	5,712	24.5%	2,391	8,795	27.2%	2.7%
HUNTINGDON	1,307	5,043	25.9%	1,758	6,518	27.0%	1.1%
ISLE OF ELY/WISBECH	1,562	6,057	25.8%	2,116	7,856	26.9%	1.1%
PETERBOROUGH	2,102	8,813	23.9%	2,776	10,911	25.4%	1.6%
DATA SUPPRESSED	12	51	23.5%	14	59	23.7%	0.2%
C&P CCG	6,382	25,676	24.9%	9,055	34,139	26.5%	1.7%
England	418,340	1,418,452	29.5%	603,836	2,141,028	28.2%	-1.3%

Although all localities show an improvement for the above indicator between 2014/15 and 2015/16, all continue to be statistically significantly worse than England.

Figure 40: National Diabetes Audit 2014-15 / 2015-16, Treatment Target Achievement for People with Type 2 Diabetes – HbA1c <58 mmol/mol (7.5%)

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	3,301	5,162	63.9%	6,023	8,795	68.5%	4.5%
HUNTINGDON	3,116	5,043	61.8%	4,163	6,518	63.9%	2.1%
ISLE OF ELY/WISBECH	3,858	6,057	63.7%	5,167	7,856	65.8%	2.1%
PETERBOROUGH	5,259	8,813	59.7%	6,693	10,911	61.3%	1.7%
DATA SUPPRESSED	425	601	70.7%	41	59	69.5%	-1.2%
C&P CCG	15,959	25,676	62.2%	22,087	34,139	64.7%	2.5%
England	942,828	1,418,452	66.5%	1,410,955	2,141,028	65.9%	-0.6%

The CCG continues to be significantly worse than England for the above indicator, although target achievement percentage has increased 2.5 percentage points between 2014/15 and 2015/16. Cambridge has improved from significantly worse than England to significantly better.

Figure 41: National Diabetes Audit 2014-15 / 2015-16, Treatment Target Achievement for People with Type 2 Diabetes – HbA1c <88 mmol/mol (10.0%)

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	4,894	5,162	94.8%	8,397	8,795	95.5%	0.7%
HUNTINGDON	4,690	5,043	93.0%	6,138	6,518	94.2%	1.2%
ISLE OF ELY/WISBECH	5,725	6,057	94.5%	7,441	7,856	94.7%	0.2%
PETERBOROUGH	8,101	8,813	91.9%	10,176	10,911	93.3%	1.3%
DATA SUPPRESSED	573	601	95.3%	56	59	94.9%	-0.4%
C&P CCG	23,983	25,676	93.4%	32,208	34,139	94.3%	0.9%
England	1,326,671	1,418,452	93.5%	1,999,636	2,141,028	93.4%	-0.1%

All localities have shown an improvement in treatment target achievement percentage for this indicator between 2014/15 and 2015/16 and the CCG is now statistically significantly better than England.

Figure 42: National Diabetes Audit 2014-15 / 2015-16, Treatment Target Achievement for People with Type 2 Diabetes – Blood Pressure <= 140/80

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	3,646	5,250	69.4%	6,259	8,874	70.5%	1.1%
HUNTINGDON	3,585	5,143	69.7%	4,511	6,565	68.7%	-1.0%
ISLE OF ELY/WISBECH	4,458	6,142	72.6%	5,601	7,968	70.3%	-2.3%
PETERBOROUGH	6,154	9,068	67.9%	7,208	11,214	64.3%	-3.6%
DATA SUPPRESSED	466	604	77.2%	58	65	89.2%	12.1%
C&P CCG	18,309	26,207	69.9%	23,637	34,686	68.1%	-1.7%
England	1,065,513	1,434,598	74.3%	1,590,081	2,156,748	73.7%	-0.6%

Target achievement percentage for this indicator has fallen across the CCG by 1.7 percentage points between 2014/15 and 2015/16 and remains statistically significantly worse than England.

Figure 43: National Diabetes Audit 2014-15 / 2015-16, Treatment Target Achievement for People with Type 2 Diabetes – Cholesterol < 4 mmol/L

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	2,007	5,013	40.0%	3,499	8,516	41.1%	1.1%
HUNTINGDON	1,969	4,937	39.9%	2,396	6,352	37.7%	-2.2%
ISLE OF ELY/WISBECH	2,472	5,900	41.9%	3,234	7,720	41.9%	0.0%
PETERBOROUGH	3,663	8,689	42.2%	4,508	10,735	42.0%	-0.2%
DATA SUPPRESSED	254	582	43.6%	22	59	37.3%	-6.4%
C&P CCG	10,365	25,121	41.3%	13,659	33,382	40.9%	-0.3%
England	588,805	1,396,431	42.2%	887,739	2,100,853	42.3%	0.1%

Cambridge, Huntingdon and C&P CCG remain statistically significantly worse than England for treatment target achievement for people with type 2 diabetes – cholesterol < 4 mmol/L.

Figure 44: National Diabetes Audit 2014-15 / 2015-16, Treatment Target Achievement for People with Type 2 Diabetes – Cholesterol < 5 mmol/L

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	3,878	5,013	77.4%	6,541	8,516	76.8%	-0.6%
HUNTINGDON	3,795	4,937	76.9%	4,726	6,352	74.4%	-2.5%
ISLE OF ELY/WISBECH	4,559	5,900	77.3%	5,881	7,720	76.2%	-1.1%
PETERBOROUGH	6,735	8,689	77.5%	8,175	10,735	76.2%	-1.4%
DATA SUPPRESSED	460	582	79.0%	40	59	67.8%	-11.2%
C&P CCG	19,427	25,121	77.3%	25,363	33,382	76.0%	-1.4%
England	1,084,209	1,396,431	77.6%	1,622,794	2,100,853	77.2%	-0.4%

C&P CCG is now statistically significantly worse than England for this indicator, having been statistically similar in 2014/15.

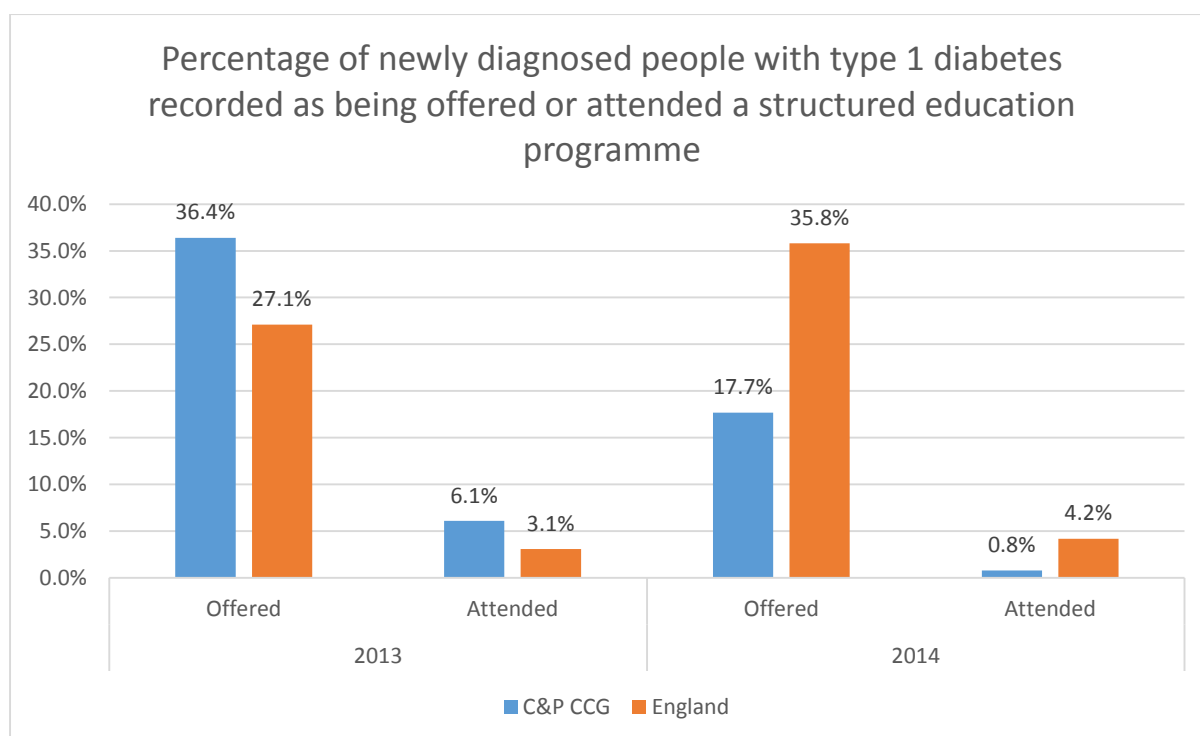
Figure 45: National Diabetes Audit 2014-15 / 2015-16, Treatment Target Achievement for People with Type 2 Diabetes – All three treatment targets

Locality	2014/15			2015/16			Change in % Completed 2014/15 - 2015/16
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CAMBRIDGE	1,812	4,898	37.0%	3,353	8,357	40.1%	3.1%
HUNTINGDON	1,704	4,817	35.4%	2,195	6,231	35.2%	-0.1%
ISLE OF ELY/WISBECH	2,206	5,769	38.2%	2,832	7,511	37.7%	-0.5%
PETERBOROUGH	2,861	8,375	34.2%	3,404	10,378	32.8%	-1.4%
DATA SUPPRESSED	256	572	44.8%	27	57	47.4%	2.6%
C&P CCG	8,839	24,431	36.2%	11,811	32,534	36.3%	0.1%
England	558,209	1,351,792	41.3%	821,282	2,031,644	40.4%	-0.9%

Cambridge has improved from significantly worse than England in 2014/15 to statistically similar in 2015/16. However, all other localities and C&P CCG are significantly worse than England for 2015/16.

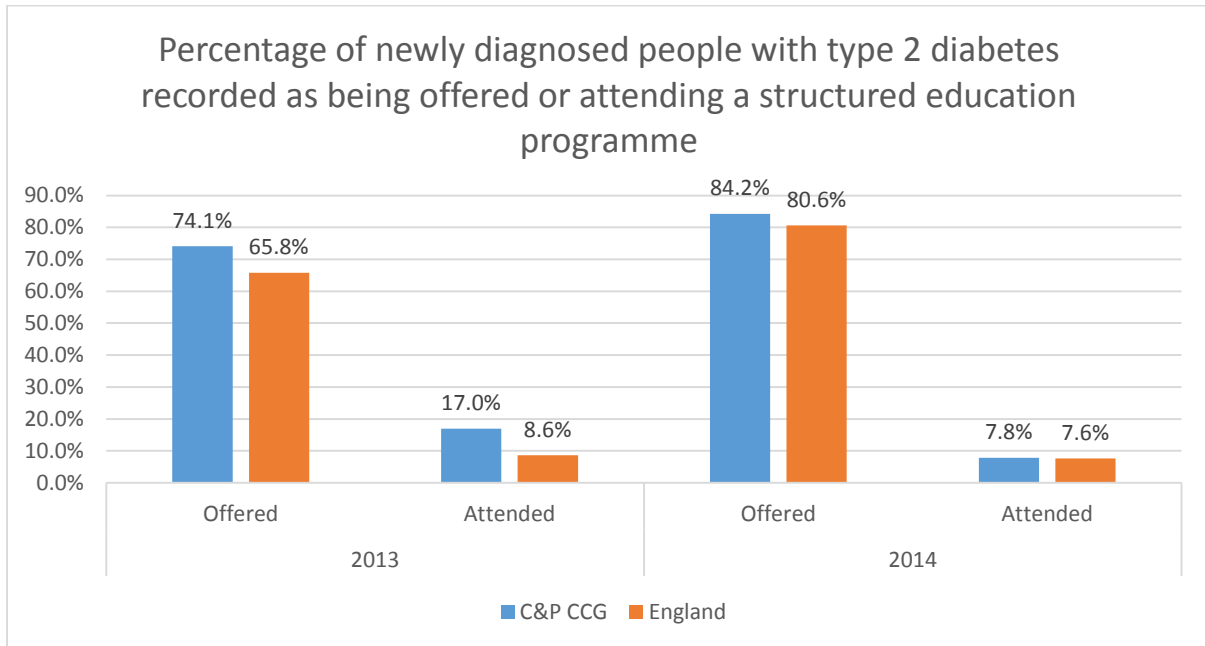
8. Structured Education Programme – Offers & Attendances

Figure 46: Percentage of newly diagnosed people with type 1 diabetes recorded as being offered or attending a structured education programme



The above table shows the percentage of newly diagnosed people with type 1 diabetes in either 2013 or 2014 that were either offered a structured education programme but did not attend, or were offered and did attend a structured education programme. More people diagnosed in 2013 were offered and attended a structured education programme in C&P CCG than in 2014, whereas nationally percentages are higher for 2014 than 2013.

Figure 47: Percentage of newly diagnosed people with type 2 diabetes recorded as being offered or attending a structured education programme



In both C&P CCG and England, a greater percentage of people diagnosed with type 2 diabetes in 2014 were offered a structured education programme than in 2013, whereas attendance fell as a percentage more significantly in 2014 in C&P CCG than nationally.

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