

Analysis of National Diabetes Audit 2015-16 & 2016-17
Cambridgeshire and Peterborough Clinical
Commissioning Group

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CONTENTS

CONTENTS.....	2
1. Introduction	3
2. Executive Summary.....	4
3. Overview of 2015-16 & 2016-17 National Diabetes Audit	5
4. Care Process Completion for People with Type 1 Diabetes.....	11
5. Care Process Completion for People with Type 2 Diabetes.....	15
6. Treatment Target Achievement for people with Type 1 Diabetes	19
7. Treatment Target Achievement for People with Type 2 Diabetes	23
8. Structured Education Programme – Offers and Attendances	26

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 first results of the 2016-17 collection were published in November 2017, and the full report was published in March 2018. An overview of the NDA is available on the NHS Digital website at URL: <https://digital.nhs.uk/data-and-information/clinical-audits-and-registries/our-clinical-audits-and-registries/national-diabetes-audit-collection> and full data released in relation to the NDA, including results for individual General Practices, are available at URL: <https://digital.nhs.uk/data-and-information/publications/statistical/national-diabetes-audit/national-diabetes-audit-report-1-care-processes-and-treatment-targets-2016-17>

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 2015-16 & 2016-17, 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 reflection of statistical 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: <https://digital.nhs.uk/data-and-information/clinical-audits-and-registries/our-clinical-audits-and-registries/national-diabetes-audit>

2. Executive Summary

- The percentage of **Cambridgeshire & Peterborough CCG practices participating in the National Diabetes** Audit has increased from 93.3% in 2015-2016 to 97.1% in 2016-17, statistically significantly higher than the England participation rate of 95.0%. C&P CCG has shown increases of type 1 registrations of 6.3% (from 3,627 in 2015-16 to 3,855 in 2016-17) and type 2 registrations have increased over the same period by 11.5% (from 36,047 to 40,195).
- C&P CCG and England have a similar profile of registrations; Registrations are mostly in the <40 and 40-64 year old age groups for type 1 registrations, and 40-64 and 65-79 year age groups for type 2 registrations. Less than all 9% of all registrations are for type 1 diabetes.
- 10.2% of type 1 NDA registrations and 13.3% of type 2 registrations within C&P CCG were for patients within the **most deprived** 20% of areas. 27.8% of type 1 and 22.2% of type 2 registrations were for patients in the least deprived 20%. This reflects how Cambridgeshire has proportionally fewer areas that are categorised into the more deprived quintiles. At a 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.
- C&P CCG has a statistically significantly higher percentage of **type 1 care process completion** for all eight NDA care process outcomes than England (37.7% compared to 34.4%). Cambridge is also significantly higher than England for this indicator (40.2%). For **type 1 treatment target achievement**, Cambridge is also statistically significantly higher than England for this indicator, but C&P CCG is statistically similar to England (18.1% compared to 19.0%).

- There is a substantial discrepancy between CCG outcomes for type 2 patients between care process completion and treatment target achievement. C&P CCG and its localities are generally statistically significantly better than England for type 2 care process completion and statistically significantly worse than England for target treatment achievement.
- For **care process completion of type 2 diabetes**, the CCG is statistically similar to England, with a completion percentage of 47.3% compared to 47.7% nationally. Cambridge is statistically significantly better than England for this indicator (51.4%). Isle of Ely/Wisbech is statistically significantly worse than England for this indicator (42.0%). However, for **treatment target achievement of type 2 diabetes**, the CCG continues to be statistically significantly worse than England (35.3% compared to 41.1%). In 2016/17 each locality is also statistically significantly worse than England.
- Numbers of type 1 patients offered **structured education programmes** within C&P CCG have increased between 2014 and 2015, but fewer patients diagnosed are attending. Nationally, a larger percentage of those diagnosed are attending structured education programmes (3.3% compared to 0.0%).
- The percentage of type 2 patients diagnosed in 2015 and offered a **structured education programme** within the CCG was higher than those diagnosed in 2014, but the percentage who attended has fallen from 7.5% in those diagnosed in 2014 to 6.5% for those diagnosed in 2015.

3. Overview of 2015-16 & 2016-17 National Diabetes Audit

Figure 1: National Diabetes Audit 2015-16 & 2016-17, Participating General Practices – Cambridgeshire & Peterborough CCG/England Comparison

Area	Audit year	Practice count	Practices fully submitted	Participation (%)
C&P CCG	2016-17	103	100	97.1
	2015-16	105	98	93.3
England	2016-17	7,307	6,942	95.0
	2015-16	7,577	6,165	81.4

C&P CCG's participation rate in the NDA has risen from 93.3% in 2015-16 to 97.1%. It continues to be statistically significantly higher than England, for which participation has risen from 81.4% to 95.0%. 100 of 103 practices within C&P CCG participated in 2016-17 compared to 98 of 105 in 2015-16.

Figure 2: National Diabetes Audit 2015-16 & 2016-17, Participating General Practices by Clinical Commissioning Group Locality & 2016/17 Quality Outcomes Framework Indicators

CCG Locality	National Diabetes Audit Data						2016-17 Quality Outcomes Framework (QOF)			
	2015-16 participation			2016-17 Participation			1. Diabetes QOF prevalence (17+)		2. Obesity QOF prevalence (18+)	
	Y	N	% Participating	Y	N	% Participating	Number	%	Number	%
Cambridge	34	2	94.4	34	1	97.1	11,469	4.2	15,980	5.9
Huntingdon	21	2	91.3	21	2	91.3	8,773	6.3	12,352	9.0
Isle of Ely/Wisbech	15	2	88.2	17	0	100.0	10,537	7.6	16,328	11.9
Peterborough	28	1	96.6	28	0	100.0	14,082	6.9	19,720	9.8
CCG	98	7	93.3	100	3	97.1	44,861	5.9	64,380	8.5

Note: Assessment of 'statistical significance' (RAG-rating) are in comparison to C&P CCG values, not to England, as per all other Figures.

C&P CCG has improved its participation between 2015-16 and 2016-17. In 2016-17 only three GP practices did not participate – these were in Cambridge (1) and Huntingdon (2).

Diabetes prevalence in people aged 17+ is statistically significantly better (lower) than the C&P CCG rate in Cambridge, whereas all other localities are statistically significantly worse (higher).

Obesity prevalence, as defined as having a body mass index (BMI) that is greater than or equal to 30, is also statistically significantly lower than the C&P CCG average in Cambridge but significantly higher in all other localities.

Figure 3: National Diabetes Audit 2015-16 & 2016-17, Total Registrations

Area	Audit year	Type 1 registrations		Type 2 registrations		Total
		Number	%	Number	%	
C&P CCG	2016-17	3,855	8.75	40,195	91.25	44,050
	2015-16	3,627	9.14	36,047	90.86	39,674
England	2016-17	221,620	7.53	2,721,580	92.47	2,943,200
	2015-16	192,505	7.84	2,263,484	92.16	2,455,989

The percentage of type 1 diabetes registrations continues to be higher than England for C&P CCG, with 8.8% compared to 7.5% and conversely a lower percentage of type 2 registrations (91.2% compared to 92.5%). The total number of registrations across C&P CCG grew by 11.0% between 2015-16 and 2016-17, whilst in England the increase over this period was 19.8%. This rate of growth has slowed for both areas in comparison to the previous year.

Figure 4: National Diabetes Audit 2015-16 & 2016-17, Registrations by Sex and Type

Area	Audit year	Type 1 registrations (%)			Type 2 registrations (%)		
		Males	Females	Unknown	Males	Females	Unknown
C&P CCG	2016-17	56.3	43.7	0.0	56.5	43.5	0.0
	2015-16	56.5	43.5	0.0	56.7	43.3	0.0
England	2016-17	56.7	43.3	0.0	55.8	44.2	0.0
	2015-16	56.5	43.5	0.0	55.5	44.4	0.1

The variance of registrations by sex within C&P CCG continues to be similar to that of England, with 56.3% of type 1 and 56.5% of type 2 registrations within C&P CCG being for males compared to 56.7% (type 1) and 55.8% (type 2) across England.

Figure 5: National Diabetes Audit 2015-16 & 2016-17, Registrations by Age

Area	Audit year	Type 1 registrations (%)					Type 2 registrations (%)				
		Aged under 40	Aged 40 to 64	Aged 65 to 79	Aged 80 and over	Age unknown	Aged under 40	Aged 40 to 64	Aged 65 to 79	Aged 80 and over	Age unknown
C&P CCG	2016-17	44.4	39.8	10.0	2.2	3.5	3.7	41.6	38.3	14.4	2.0
	2015-16	43.6	42.5	11.4	2.5	0.0	3.1	40.1	40.2	16.6	0.0
England	2016-17	44.8	40.4	10.4	2.1	2.4	3.9	42.8	38.0	13.8	1.5
	2015-16	43.5	42.3	11.6	2.6	0.0	3.7	41.0	39.3	16.1	0.0

C&P CCG and England have a similar profile of registrations. Registrations are mostly in the <40 and 40-64 year old age groups for type 1 registrations, and 40-64 and 65-79 year age groups for type 2 registrations.

Figure 6: National Diabetes Audit 2015-16 & 2016-17, Registrations by Ethnicity

Area	Audit year	Type 1 registrations (%)			Type 2 registrations (%)		
		White	Minority Ethnic Origin	Ethnicity unknown /Not Stated	White	Minority Ethnic Origin	Ethnicity unknown /Not Stated
C&P CCG	2016-17	88.7	5.8	5.4	81.4	10.4	8.2
	2015-16	85.0	5.4	9.6	82.0	9.8	8.2
England	2016-17	76.3	8.4	15.3	64.4	19.3	16.3
	2015-16	71.0	8.1	21.0	63.5	18.3	18.2

C&P CCG continues to have a higher percentage of registrations for 'white' ethnicity in comparison to England, which conversely has a higher percentage of 'minority ethnic origin' registrations. Registrations within the 'ethnicity unknown/not stated' group are higher for England than C&P CCG for both type 1 and type 2 in 2015-16 and 2016-17.

Figure 7: National Diabetes Audit 2016-17, Registrations by Deprivation Quintile

Type 1 registrations (%)							
Area	Audit year	IMD most deprived	IMD 2nd most deprived	IMD 3rd most deprived	IMD 2nd least deprived	IMD least deprived	IMD unknown
C&P CCG	2016-17	10.2	16.3	24.5	21.1	27.8	0.1
	2015-16	9.9	15.8	24.0	21.0	29.3	0.0
England	2016-17	20.1	20.2	20.4	20.0	19.3	0.0
	2015-16	19.5	20.2	20.6	20.0	19.6	0.0

Type 2 registrations (%)							
Area	Audit year	IMD most deprived	IMD 2nd most deprived	IMD 3rd most deprived	IMD 2nd least deprived	IMD least deprived	IMD unknown
C&P CCG	2016-17	13.3	19.0	25.4	20.2	22.2	0.0
	2015-16	12.7	18.3	25.1	20.5	23.3	0.0
England	2016-17	24.1	22.1	20.4	18.3	15.0	0.0
	2015-16	23.5	22.3	20.4	18.4	15.3	0.0

At a 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.

For both type 1 and type 2 registrations within C&P CCG, larger proportions of total registrations are in the less deprived quintiles. This reflects how Cambridgeshire has proportionally fewer areas that are categorised into the more deprived quintiles.

Figure 8: National Diabetes Audit 2016-17, Summary of Outcomes for People with Type 1 Diabetes by CCG Locality

CCG Locality	Care Process Completion (%)									Treatment Target Achievement (%)						
	HbA1c	Blood Pressure	Cholesterol	Serum Creatinine	Urine Albumin	Foot Surveillance	BMI	Smoking	All Eight Care Processes	HbA1c < 48 mmol/mol (6.5%)	HbA1c ≤ 58 mmol/mol (7.5%)	HbA1c ≤ 86 mmol/mol (10.0%)	Blood Pressure ≤ 140/80	Cholesterol < 4 mmol/L	Cholesterol < 5 mmol/L	All three treatment targets
Cambridge	88.8	93.9	80.5	85.7	68.0	71.4	84.0	78.4	40.2	14.8	38.1	88.3	67.3	25.8	65.1	23.4
Huntingdon	88.6	92.5	85.8	88.1	58.2	75.4	76.9	82.8	36.9	13.6	31.1	87.1	79.8	22.6	62.6	20.2
Isle of Ely/Wisbech	90.8	92.4	84.1	87.6	55.9	69.0	84.8	80.7	37.3	11.5	28.8	82.0	70.9	29.2	70.0	18.5
Peterborough	89.1	90.9	80.2	83.2	53.3	58.4	84.3	82.7	36.4	13.3	27.6	80.6	76.0	31.0	73.4	21.0
CCG	88.7	92.1	81.7	85.9	59.4	67.9	82.7	80.7	37.7	8.5	31.5	85.5	72.3	25.3	66.7	18.1
England	84.9	90.6	80.8	83.3	51.0	70.1	75.8	79.8	34.4	8.5	30.4	84.8	76.0	28.7	69.4	19.0

Note: HbA1c < 48 mmol/mol (6.5%) data are unreliable at a CCG locality level. This is due to small numbers at a GP practice level, and the NDA disclosure control methods being applied to these numbers. It is recommended that CCG level data is used for this measure for type 1 diabetes.

C&P CCG and Cambridge have a statistically significantly higher percentage of care process completion for all eight care process outcomes than England. Many individual outcomes, at a locality and CCG level, also have statistically significantly better values than those at a national level.

C&P CCG care process completion for foot surveillance is statistically significantly lower (worse) than England (67.9% compared to 70.1%). Peterborough is also statistically significantly below England for this indicator (58.4%). For HbA1c, Blood Pressure, Serum Creatinine, Urine Albumin and BMI indicators, the CCG is performing statistically significantly higher (better) than England for type 1 diabetes.

Cambridge has a statistically significantly higher percentage of care process completion than England for treatment target achievement for all three treatment targets. The C&P CCG value for this indicator is similar to England (18.1% compared to 19.0%).

C&P CCG is performing statistically significantly worse than England for the percentage of care process completion for Blood Pressure ≤ 140/80, Cholesterol <4 mmol/L, and Cholesterol <5 mmol/L.

Figure 9: National Diabetes Audit 2016-17, Summary of Outcomes for People with Type 2 Diabetes by CCG Locality

CCG Locality	Care Process Completion (%)									Treatment Target Achievement (%)						
	HbA1c	Blood Pressure	Cholesterol	Serum Creatinine	Urine Albumin	Foot Surveillance	BMI	Smoking	All Eight Care Processes	HbA1c < 48 mmol/mol (6.5%)	HbA1c ≤ 58 mmol/mol (7.5%)	HbA1c ≤ 86 mmol/mol (10.0%)	Blood Pressure ≤ 140/80	Cholesterol < 4 mmol/L	Cholesterol < 5 mmol/L	All three treatment targets
Cambridge	96.0	96.6	92.9	95.5	72.9	74.1	87.5	86.9	51.4	28.2	67.4	94.0	69.1	36.3	72.2	37.5
Huntingdon	96.5	97.4	94.4	96.6	72.8	77.0	82.6	88.4	48.3	27.1	63.5	92.9	70.1	32.4	70.9	34.4
Isle of Ely/Wisbech	97.0	97.3	94.4	97.0	66.4	67.9	91.0	87.8	42.0	26.3	62.4	92.8	72.4	38.4	73.7	35.4
Peterborough	94.8	96.2	93.1	95.5	71.5	66.0	89.4	91.3	47.5	26.7	61.9	91.7	65.6	42.2	76.1	34.2
CCG	96.0	96.8	93.6	96.1	70.9	70.4	88.0	88.8	47.3	27.0	63.7	92.8	69.0	38.1	73.6	35.3
England	95.3	96.4	93.1	95.1	65.6	79.4	83.3	85.7	47.7	30.6	67.0	93.3	74.4	41.3	76.2	41.1

C&P CCG and its localities are generally statistically significantly better than England for type 2 care process completion and statistically significantly worse than England for target treatment achievement.

C&P CCG is statistically significantly better than England for 7 of the 8 indicators of the care process completion; the exception is foot surveillance (CCG 70.4%, England 79.4%). C&P CCG has a statistically similar percentage of care process completion for all eight care processes (47.3% compared to 47.7%). This has decreased from 2015-16. In 2015-16 C&P CCG was achieving slightly above the national level for all eight care processes (C&P CCG 63.8%, England 53.9%).

With regards to treatment target achievement, C&P CCG is statistically significantly below England for all six individual indicators and the measure that captures all three treatment targets. Most locality areas are also below England for most of the individual indicators.

4. Care Process Completion for People with Type 1 Diabetes

Figure 10: National Diabetes Audit 2015-16 / 2016-17, Care Process Completion for People with Type 1 Diabetes

Care Process	C&P CCG - (% completed)			England - (% completed)			CCG Banding	
	2015-16	2016-17	% Variance 2015-16/ 2016-17	2015-16	2016-17	% Variance 2015-16/ 2016-17	2015-16	2016-17
HbA1c	87.9	88.7	0.8	84.5	84.9	0.4	As expected	As expected
Blood Pressure	91.3	92.1	0.8	89.4	90.6	1.2	As expected	As expected
Cholesterol	80.1	81.7	1.6	80.0	80.8	0.8	As expected	As expected
Serum Creatinine	82.8	85.9	3.1	82.1	83.3	1.2	As expected	As expected
Urine Albumin	56.9	59.4	2.5	51.0	51.0	0.0	Higher than expected	Higher than expected
Foot Surveillance	76.5	67.9	-8.6	73.7	70.1	-3.6	As expected	Lower than expected
BMI	82.9	82.7	-0.2	75.8	75.8	0.0	Higher than expected	Higher than expected
Smoking	79.7	80.7	1.0	79.0	79.8	0.8	As expected	As expected
All Eight Care Processes	43.7	37.7	-6.0	37.3	34.4	-2.9	Higher than expected	As expected

C&P CCG 'bandings' from the NDA 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 is performing 'higher than expected' for two indicators for type 1 care process completion (urine albumin, and BMI) and 'lower than expected' for foot surveillance. All other indicators as 'as expected' within the table above. 'All eight care processes' has fallen from 'higher than expected' in 2015-16, to 'as expected' in 2016-17.

A C&P CCG locality-level breakdown of all available care process data is provided below. Within these data, it should be noted that 2015-16 audit methodology removed practices from the data publication where the practice size was small – this means data for Cambridge Access Surgery and the former Parnwell Medical

Centre¹ have been removed as part of the NDA data release. It is, however, possible to infer from released data the contribution towards C&P CCG totals from these practices due to differences between the locality totals and C&P CCG totals. A new method was implemented in the 2016-17 audit. In the 2016-17 NDA numbers data are not removed, but are rounded to the nearest 5, unless the number was 1 to 7, in which case the number is rounded to '5'. Rounded numbers are used to calculate percentages. This method may mean that locality totals and C&P CCG totals may differ due to rounding.

Figure 11: National Diabetes Audit 2015-16 / 2016-17, Care Process Completion for People with Type 1 Diabetes – C&P CCG Localities, HbA1c

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	1,034	1,186	87.2%	1,115	1,255	88.8%	1.7%
Huntingdon	619	708	87.4%	660	745	88.6%	1.2%
Isle of Ely/Wisbech	601	693	86.7%	695	765	90.8%	4.1%
Peterborough	923	1,027	89.9%	980	1,100	89.1%	-0.8%
CCG*	3,188	3,627	87.9%	3,420	3,855	88.7%	0.8%
England	162,651	192,505	84.5%	188,230	221,620	84.9%	0.4%

**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

All localities except Peterborough have seen an increase in percentage terms in care process completion for type 1 HbA1c between 2015-16 and 2016-17. All areas have a statistically significantly high completion percentage in comparison to England.

Figure 12: National Diabetes Audit 2015-16 / 2016-17, Care Process Completion for People with Type 1 Diabetes – C&P CCG Localities, Blood Pressure

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	1,048	1,144	91.6%	1,085	1,155	93.9%	2.3%
Huntingdon	612	687	89.1%	620	670	92.5%	3.5%
Isle of Ely/Wisbech	615	667	92.2%	670	725	92.4%	0.2%
Peterborough	903	981	92.0%	895	985	90.9%	-1.2%
CCG*	3,188	3,492	91.3%	3,270	3,550	92.1%	0.8%
England	165,263	184,820	89.4%	186,285	205,530	90.6%	1.2%

**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

All areas except Peterborough have seen an increase in percentage terms in care process completion for type 1 blood pressure between 2015-16 and 2016-17. In 2016-17 C&P CCG and Cambridge have a statistically significantly high completion percentage in comparison to England.

¹ Parnwell and Ailsworth have now merged to form Ainsworth Medical Centre

Figure 13: National Diabetes Audit 2015-16 / 2016-17, Care Process Completion for People with Type 1 Diabetes – C&P CCG Localities, Cholesterol

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	915	1,144	80.0%	930	1,155	80.5%	0.5%
Huntingdon	577	687	84.0%	575	670	85.8%	1.8%
Isle of Ely/Wisbech	539	667	80.8%	610	725	84.1%	3.3%
Peterborough	754	981	76.9%	790	985	80.2%	3.3%
CCG*	2,796	3,492	80.1%	2,900	3,550	81.7%	1.6%
England	147,799	184,820	80.0%	166,095	205,530	80.8%	0.8%

**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

All localities have shown an increase in percentage terms in care process completion in type 1 cholesterol between 2015-16 and 2016-17. Huntingdon and Isle of Ely/Wisbech are statistically significantly better than England for this indicator.

Peterborough was statistically significantly worse than England in 2015-16 but following an increase in completion is now statistically similar.

Figure 14: National Diabetes Audit 2015-16 / 2016-17, Care Process Completion for People with Type 1 Diabetes – C&P CCG Localities, Serum Creatinine

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	910	1,144	79.5%	990	1,155	85.7%	6.2%
Huntingdon	600	687	87.3%	590	670	88.1%	0.7%
Isle of Ely/Wisbech	565	667	84.7%	635	725	87.6%	2.9%
Peterborough	808	981	82.4%	820	985	83.2%	0.9%
CCG*	2,893	3,492	82.8%	3,050	3,550	85.9%	3.1%
England	151,735	184,820	82.1%	171,175	205,530	83.3%	1.2%

**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

All localities have shown an increase in percentage terms in care process completion in type 1 serum creatinine between 2015-16 and 2016-17. C&P CCG and three localities are statistically significantly better than England; Cambridge has improved from previously being statistically significantly worse in 2015-16, and the Isle of Ely/Wisbech and C&P CCG have improved from being statistically similar to England in 2015-16.

Figure 15: National Diabetes Audit 2015-16 / 2016-17, Care Process Completion for People with Type 1 Diabetes – C&P CCG Localities, Urine Albumin

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	679	1,144	59.4%	785	1,155	68.0%	8.6%
Huntingdon	411	687	59.8%	390	670	58.2%	-1.6%
Isle of Ely/Wisbech	378	667	56.7%	405	725	55.9%	-0.8%
Peterborough	511	981	52.1%	525	985	53.3%	1.2%
CCG*	1,986	3,492	56.9%	2,110	3,550	59.4%	2.6%
England	94,338	184,820	51.0%	104,845	205,530	51.0%	0.0%

**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

In 2015-16 and 2016-17 Peterborough remains the only locality not performing statistically significantly better than England for completion of type 1 urine albumin. Cambridge has seen the largest increase in percentage points during this time period (8.6%).

Figure 16: National Diabetes Audit 2015-16 / 2016-17, Care Process Completion for People with Type 1 Diabetes – C&P CCG Localities, Foot Surveillance

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	874	1,144	76.4%	825	1,155	71.4%	-5.0%
Huntingdon	552	687	80.3%	505	670	75.4%	-5.0%
Isle of Ely/Wisbech	505	667	75.7%	500	725	69.0%	-6.7%
Peterborough	730	981	74.4%	575	985	58.4%	-16.0%
CCG*	2,671	3,492	76.5%	2,410	3,550	67.9%	-8.6%
England	136,143	184,820	73.7%	144,055	205,530	70.1%	-3.6%

**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

Between 2015-16 and 2016-17 each locality, and C&P CCG overall, saw a reduction in percentage terms in completion of type 1 foot surveillance. Peterborough saw the largest change (reduction of 16.0%) and is now statistically significantly lower (worse) than England.

C&P CCG has changed from statistically significantly better than England in 2015-16 to statistically significantly worse than England for this indicator. Huntingdon remain statistically significantly better.

Figure 17: National Diabetes Audit 2015-16 / 2016-17, Care Process Completion for People with Type 1 Diabetes – C&P CCG Localities, BMI

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	960	1,144	83.9%	970	1,155	84.0%	0.1%
Huntingdon	533	687	77.6%	515	670	76.9%	-0.7%
Isle of Ely/Wisbech	557	667	83.5%	615	725	84.8%	1.3%
Peterborough	836	981	85.2%	830	985	84.3%	-1.0%
CCG*	2,894	3,492	82.9%	2,935	3,550	82.7%	-0.2%
England	140,107	184,820	75.8%	155,875	205,530	75.8%	0.0%

**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

C&P CCG, Cambridge, Isle of Ely/Wisbech, and Peterborough continue to be statistically significantly better than England for completion of type 1 BMI.

Figure 18: National Diabetes Audit 2015-16 / 2016-17, Care Process Completion for People with Type 1 Diabetes – C&P CCG Localities, Smoking

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	903	1,144	78.9%	905	1,155	78.4%	-0.6%
Huntingdon	550	687	80.1%	555	670	82.8%	2.8%
Isle of Ely/Wisbech	525	667	78.7%	585	725	80.7%	2.0%
Peterborough	797	981	81.2%	815	985	82.7%	1.5%
CCG*	2,783	3,492	79.7%	2,865	3,550	80.7%	1.0%
England	145,933	184,820	79.0%	164,015	205,530	79.8%	0.8%

**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

The care process completion percentages for this indicator remain fairly stable. Peterborough is now statistically significantly better than England. C&P CCG remains statistically similar to England.

Figure 19: National Diabetes Audit 2015-16 / 2016-17, Care Process Completion for People with Type 1 Diabetes – C&P CCG Localities, All eight care processes

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	482	1,186	40.6%	505	1,255	40.2%	-0.4%
Huntingdon	338	708	47.7%	275	745	36.9%	-10.8%
Isle of Ely/Wisbech	287	693	41.4%	285	765	37.3%	-4.2%
Peterborough	476	1,027	46.3%	400	1,100	36.4%	-10.0%
CCG*	1,586	3,627	43.7%	1,455	3,855	37.7%	-6.0%
England	71,877	192,505	37.3%	76,215	221,620	34.4%	-2.9%

**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

All localities have seen a decrease in completion percentage for type 1 ‘all eight care processes’ in overall percentage terms, this has also been seen at a national level. Huntingdon and Peterborough have seen most notable reduction, with a decline of over 10% in care process completion percentages between 2015-16 and 2016-17. These two localities were statistically significantly better than England in 2015-16, but in 2016-17 are statistically similar to England.

C&P CCG and Cambridge remain statistically significantly better than England.

5. Care Process Completion for People with Type 2 Diabetes

Figure 20: National Diabetes Audit 2015-16 / 2016-17, Care Process Completion for People with Type 2 Diabetes

Care Process	C&P CCG - (% completed)			England - (% completed)			CCG Banding	
	2015-16	2016-17	% Variance 2015-16/ 2016-17	2015-16	2016-17	% Variance 2015-16/ 2016-17	2015-16	2016-17
HbA1c	95.5	96.0	0.5	95.1	95.3	0.2	As expected	As expected
Blood Pressure	96.3	96.8	0.5	95.8	96.4	0.6	As expected	As expected
Cholesterol	92.6	93.6	1.0	93.1	93.1	0.0	As expected	As expected
Serum Creatinine	95.5	96.1	0.6	94.8	95.1	0.3	As expected	As expected
Urine Albumin	74.1	70.9	-3.2	66.8	65.6	-1.2	Higher than expected	Higher than expected
Foot Surveillance	89.0	70.4	-18.6	87.1	79.4	-7.7	As expected	Lower than expected
BMI	87.9	88.0	0.1	82.8	83.3	0.5	Higher than expected	Higher than expected
Smoking	88.2	88.8	0.6	85.4	85.7	0.3	As expected	As expected
All Eight Care Processes	63.8	47.3	-16.5	53.9	47.7	-6.2	Higher than expected	Lower than expected

C&P CCG is performing ‘higher than expected’ for two indicators for type 2 care process completion (urine albumin, and BMI) in 2016-17 and ‘lower than expected’ for foot surveillance and ‘all eight care processes’. All other indicators as ‘as expected’ for this period.

'All eight care processes' changed from 'higher than expected' in 2015-16 to 'lower than expected' in 2016-17. Foot surveillance changed from 'as expected' in 2015-16 to 'lower than expected' in 2016-17.

Foot surveillance, urine albumin, and all eight care processes have seen a reduction in care process completion percentages for C&P CCG and England between 2015-16 and 2016-17.

Additional notes regarding the definition of the NDA 'CCG bandings' can be found under Figure 10 (above).

Figure 21: National Diabetes Audit 2015-16 / 2016-17, Care Process Completion for People with Type 2 Diabetes – C&P CCG Localities, HbA1c

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	8,836	9,182	96.2%	9,475	9,865	96.0%	-0.2%
Huntingdon	6,548	6,803	96.3%	7,365	7,635	96.5%	0.2%
Isle of Ely/Wisbech	7,926	8,249	96.1%	9,360	9,650	97.0%	0.9%
Peterborough	11,050	11,748	94.1%	12,375	13,050	94.8%	0.8%
CCG*	34,419	36,047	95.5%	38,575	40,195	96.0%	0.5%
England	2,153,043	2,263,484	95.1%	2,593,585	2,721,580	95.3%	0.2%

**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

The care process completion percentages for this indicator remain fairly stable. C&P CCG continues to be statistically significantly better than England. Peterborough remains the only locality performing significantly worse than England, despite a small increase of 0.8% between 2015-16 and 2016-17.

Figure 22: National Diabetes Audit 2015-16 / 2016-17, Care Process Completion for People with Type 2 Diabetes – C&P CCG Localities, Blood Pressure

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	8,879	9,181	96.7%	9,385	9,715	96.6%	-0.1%
Huntingdon	6,571	6,798	96.7%	7,210	7,400	97.4%	0.8%
Isle of Ely/Wisbech	7,971	8,249	96.6%	9,230	9,485	97.3%	0.7%
Peterborough	11,216	11,745	95.5%	12,295	12,780	96.2%	0.7%
CCG*	34,702	36,038	96.3%	38,125	39,380	96.8%	0.5%
England	2,168,347	2,263,118	95.8%	2,582,470	2,680,030	96.4%	0.5%

**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

C&P CCG continues to be statistically significantly better than England for type 2 blood pressure. The care process completion percentages for this indicator remain fairly stable at a local and national level.

Figure 23: National Diabetes Audit 2015-16 / 2016-17, Care Process Completion for People with Type 2 Diabetes – C&P CCG Localities, Cholesterol

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	8,517	9,181	92.8%	9,030	9,715	92.9%	0.2%
Huntingdon	6,354	6,798	93.5%	6,985	7,400	94.4%	0.9%
Isle of Ely/Wisbech	7,721	8,249	93.6%	8,950	9,485	94.4%	0.8%
Peterborough	10,735	11,745	91.4%	11,900	12,780	93.1%	1.7%
CCG*	33,386	36,038	92.6%	36,850	39,380	93.6%	0.9%
England	2,107,093	2,263,118	93.1%	2,496,110	2,680,030	93.1%	0.0%

**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

C&P CCG has improved its care process completion of type 2 cholesterol by 0.9% and has changed from being statistically significantly worse than England to statistically significantly better.

Figure 24: National Diabetes Audit 2015-16 / 2016-17, Care Process Completion for People with Type 2 Diabetes – C&P CCG Localities, Serum Creatinine

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	8,783	9,181	95.7%	9,280	9,715	95.5%	-0.1%
Huntingdon	6,521	6,798	95.9%	7,150	7,400	96.6%	0.7%
Isle of Ely/Wisbech	7,942	8,249	96.3%	9,205	9,485	97.0%	0.8%
Peterborough	11,111	11,745	94.6%	12,200	12,780	95.5%	0.9%
CCG*	34,418	36,038	95.5%	37,845	39,380	96.1%	0.6%
England	2,145,808	2,263,118	94.8%	2,548,695	2,680,030	95.1%	0.3%

**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

C&P CCG continues to be statistically significantly better than England for this indicator and has improved 0.6 percentage points between 2015-16 and 2016-17.

Figure 25: National Diabetes Audit 2015-16 / 2016-17, Care Process Completion for People with Type 2 Diabetes – C&P CCG Localities, Urine Albumin

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	7,093	9,181	77.3%	7,085	9,715	72.9%	-4.3%
Huntingdon	5,070	6,798	74.6%	5,385	7,400	72.8%	-1.8%
Isle of Ely/Wisbech	5,953	8,249	72.2%	6,295	9,485	66.4%	-5.8%
Peterborough	8,582	11,745	73.1%	9,135	12,780	71.5%	-1.6%
CCG*	26,722	36,038	74.1%	27,905	39,380	70.9%	-3.3%
England	1,512,517	2,263,118	66.8%	1,757,285	2,680,030	65.6%	-1.3%

**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

Each locality, C&P CCG, and England have seen a fall in their care process completion percentage for type 2 urine albumin between 2015-16 and 2016-17. However, C&P CCG and each locality except Isle of Ely/Wisbech remain statistically significantly better than England.

Figure 26: National Diabetes Audit 2015-16 / 2016-17, Care Process Completion for People with Type 2 Diabetes – C&P CCG Localities, Foot Surveillance

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	8,239	9,181	89.7%	7,200	9,715	74.1%	-15.6%
Huntingdon	6,192	6,798	91.1%	5,695	7,400	77.0%	-14.1%
Isle of Ely/Wisbech	7,347	8,249	89.1%	6,445	9,485	67.9%	-21.1%
Peterborough	10,249	11,745	87.3%	8,435	12,780	66.0%	-21.3%
CCG*	32,085	36,038	89.0%	27,735	39,380	70.4%	-18.6%
England	1,972,306	2,263,118	87.1%	2,128,980	2,680,030	79.4%	-7.7%

**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

Nationally there has been a decline in foot surveillance care process completion between 2015-16 and 2016-17 (7.7%). However, locally there has been a more noted change for C&P CCG and each locality. The CCG has seen a decline in care process completion of 18.6%.

C&P CCG was statistically significantly better than England in 2015-16, but now C&P CCG and all localities are statistically significantly worse than England.

Figure 27: National Diabetes Audit 2015-16 / 2016-17, Care Process Completion for People with Type 2 Diabetes – C&P CCG Localities, BMI

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	7,991	9,181	87.0%	8,500	9,715	87.5%	0.5%
Huntingdon	5,874	6,798	86.4%	6,115	7,400	82.6%	-3.8%
Isle of Ely/Wisbech	7,336	8,249	88.9%	8,635	9,485	91.0%	2.1%
Peterborough	10,436	11,745	88.9%	11,420	12,780	89.4%	0.5%
CCG*	31,670	36,038	87.9%	34,650	39,380	88.0%	0.1%
England	1,874,535	2,263,118	82.8%	2,232,315	2,680,030	83.3%	0.5%

**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

Huntingdon is the only locality to see a reduction in care process completion of type 2 BMI between 2015-16 and 2016-17. It is now statistically similar to England. C&P CCG, and remaining localities, continue to be statistically significantly better than England.

Figure 28: National Diabetes Audit 2015-16 / 2016-17, Care Process Completion for People with Type 2 Diabetes – C&P CCG Localities, Smoking

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	8,252	9,181	89.9%	8,445	9,715	86.9%	-3.0%
Huntingdon	5,839	6,798	85.9%	6,540	7,400	88.4%	2.5%
Isle of Ely/Wisbech	7,032	8,249	85.2%	8,325	9,485	87.8%	2.5%
Peterborough	10,605	11,745	90.3%	11,665	12,780	91.3%	1.0%
CCG*	31,776	36,038	88.2%	34,960	39,380	88.8%	0.6%
England	1,932,234	2,263,118	85.4%	2,296,625	2,680,030	85.7%	0.3%

**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

Cambridge was the only locality to see a decline in completion percentages of this indicator, a fall of 3.0 percentage points, but it remains statistically significantly better than England along with all other localities, and C&P CCG overall.

Figure 29: National Diabetes Audit 2015-16 / 2016-17, Care Process Completion for People with Type 2 Diabetes – C&P CCG Localities, All eight care processes

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	6,096	9,182	66.4%	5,070	9,865	51.4%	-15.0%
Huntingdon	4,197	6,803	61.7%	3,685	7,635	48.3%	-13.4%
Isle of Ely/Wisbech	4,958	8,249	60.1%	4,050	9,650	42.0%	-18.1%
Peterborough	7,714	11,748	65.7%	6,205	13,050	47.5%	-18.1%
CCG*	22,981	36,047	63.8%	19,015	40,195	47.3%	-16.4%
England	1,219,714	2,263,484	53.9%	1,296,915	2,721,580	47.7%	-6.2%

**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

In 2015-16 the CCG and all localities were statistically significantly better than England for all eight care processes combined. Between 2015-16 and 2016-17 each area has seen a decline in completion percentages, this has also been seen at a national level to a lesser extent (C&P CCG declined by 16.4 percentage points compared to 6.2 for England).

In 2016-17 Isle of Ely/Wisbech is now statistically significantly worse than England for this indicator. C&P CCG, Huntingdon, and Peterborough are statistically similar in 2016-17, having previously been statistically significantly better.

6. Treatment Target Achievement for people with Type 1 Diabetes

Figure 30: National Diabetes Audit 2015-16 / 2016-17, Treatment Target Achievement for People with Type 1 Diabetes

Treatment target	C&P CCG - (% completed)			England - (% completed)		
	2015-16	2016-17	% Variance 2015-16/ 2016-17	2015-16	2016-17	% Variance 2015-16/ 2016-17
HbA1c < 48 mmol/mol (6.5%)	10.0	8.5	-1.5	8.5	8.5	0.0
HbA1c ≤ 58 mmol/mol (7.5%)	31.7	31.5	-0.2	29.6	30.4	0.8
HbA1c ≤ 86 mmol/mol (10.0%)	87.8	85.5	-2.3	84.4	84.8	0.4
Blood Pressure ≤ 140/80	71.2	72.3	1.1	75.7	76.0	0.3
Cholesterol < 4 mmol/L	29.0	25.3	-3.7	30.0	28.7	-1.3
Cholesterol < 5 mmol/L	70.5	66.7	-3.8	70.9	69.4	-1.5
All three treatment targets	18.0	18.1	0.1	18.3	19.0	0.7

The modelled NDA 'banding' methodology described in Section 4 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.

The C&P CCG completion rate for 'all three treatment targets' changed from 18.0% in 2015-16 to 18.1% in 2016-17. The national rate increased by 0.7% to 19.0% over the same period.

Individually, most treatment target indicators saw a decline in percentage completed between 2015-16 and 2016-17 for C&P CCG, with the exception of blood pressure (increase of 1.1 percentage points). Nationally, indicators generally saw small increases, with the exception of cholesterol indicators.

Figure 31: National Diabetes Audit 2015-16 / 2016-17, Treatment Target Achievement for People with Type 1 Diabetes – HbA1c <48 mmol/mol (6.5%)

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
CCG*	314	3,147	10.0%	290	3,415	8.5%	-1.5%
England	13,693	161,335	8.5%	15,880	187,665	8.5%	0.0%

NDA disclosure control methods being applied to small numbers means that HbA1c < 48 mmol/mol (6.5%) data are unreliable at geographies smaller than CCG level. It is recommended that CCG level data is used for this measure for type 1 diabetes.

Variances between 2015-16 and 2016-17 NDA methodology for disclosure control also make it unreliable to compare HbA1c < 48 mmol/mol (6.5%) data between years.

Figure 32: National Diabetes Audit 2015-16 / 2016-17, Treatment Target Achievement for People with Type 1 Diabetes – HbA1c <58 mmol/mol (7.5%)

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	391	1,028	38.0%	425	1,115	38.1%	0.1%
Huntingdon	187	615	30.4%	205	660	31.1%	0.7%
Isle of Ely/Wisbech	170	593	28.7%	200	695	28.8%	0.1%
Peterborough	245	901	27.2%	270	980	27.6%	0.4%
CCG*	998	3,147	31.7%	1,075	3,415	31.5%	-0.2%
England	47,703	161,335	29.6%	57,075	187,665	30.4%	0.8%

**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

C&P CCG had a 0.2 percentage point decrease in treatment target achievement percentage of HbA1c <58mmol/mol between 2015-16 and 2016-17, whilst England had an increase of 0.8 percentage points. The C&P CCG is now statistically similar to England for this indicator, having previously been statistically significantly better.

Cambridge remains statistically significantly better than England.

Figure 33: National Diabetes Audit 2015-16 / 2016-17, Treatment Target Achievement for People with Type 1 Diabetes – HbA1c <86 mmol/mol (10.0%)

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	933	1,028	90.8%	985	1,115	88.3%	-2.4%
Huntingdon	542	615	88.1%	575	660	87.1%	-1.0%
Isle of Ely/Wisbech	517	593	87.2%	570	695	82.0%	-5.2%
Peterborough	760	901	84.4%	790	980	80.6%	-3.7%
CCG*	2,762	3,147	87.8%	2,920	3,415	85.5%	-2.3%
England	136,171	161,335	84.4%	159,070	187,665	84.8%	0.4%

**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

C&P CCG showed a 2.3 percentage point decrease in treatment target achievement percentage of HbA1c <86mmol/mol between 2015-16 and 2016-17, whilst England had an increase of 0.4. C&P CCG is now statistically similar to England.

All localities saw a decline in treatment target achievement percentage between 2015-16 and 2016-17. Peterborough is now statistically significantly worse than England.

Figure 34: National Diabetes Audit 2015-16 / 2016-17, Treatment Target Achievement for People with Type 1 Diabetes – Blood Pressure <= 140/80

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	723	1,047	69.1%	730	1,085	67.3%	-1.8%
Huntingdon	474	612	77.5%	495	620	79.8%	2.4%
Isle of Ely/Wisbech	452	615	73.5%	475	670	70.9%	-2.6%
Peterborough	614	903	68.0%	680	895	76.0%	8.0%
CCG*	2,270	3,187	71.2%	2,365	3,270	72.3%	1.1%
England	124,367	164,384	75.7%	141,350	186,045	76.0%	0.3%

**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

C&P CCG has increased its treatment target achievement percentage by 1.1 percentage point between 2015-16 and 2016-17, but it remains statistically significantly worse than England.

Peterborough and Huntingdon saw increases in the percentages achieved for this indicator. Peterborough is now statistically similar to England and Huntingdon is statistically significantly better than England.

Figure 35: National Diabetes Audit 2015-16 / 2016-17, Treatment Target Achievement for People with Type 1 Diabetes – Cholesterol < 4 mmol/L

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	249	914	27.2%	240	930	25.8%	-1.4%
Huntingdon	163	577	28.2%	130	575	22.6%	-5.6%
Isle of Ely/Wisbech	167	539	31.0%	175	600	29.2%	-1.8%
Peterborough	225	753	29.9%	245	790	31.0%	1.1%
CCG*	810	2,794	29.0%	735	2,900	25.3%	-3.6%
England	44,159	147,403	30.0%	47,470	165,605	28.7%	-1.3%

**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

The CCG was statistically similar to England in 2015-16 for this indicator, but following a decline in percentage achieved it is now statistically significantly worse than England.

Huntingdon is also statistically significantly worse than England in 2016-17 for this indicator.

Figure 36: National Diabetes Audit 2015-16 / 2016-17, Treatment Target Achievement for People with Type 1 Diabetes – Cholesterol < 5 mmol/L

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	642	914	70.2%	605	930	65.1%	-5.2%
Huntingdon	404	577	70.0%	360	575	62.6%	-7.4%
Isle of Ely/Wisbech	380	539	70.5%	420	600	70.0%	-0.5%
Peterborough	535	753	71.0%	580	790	73.4%	2.4%
CCG*	1,970	2,794	70.5%	1,935	2,900	66.7%	-3.8%
England	104,451	147,403	70.9%	114,970	165,605	69.4%	-1.4%

**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

A national and C&P CCG level decline occurred for this indicator between 2015-16 and 2016-17. The C&P CCG is now statistically significantly worse than England, along with Cambridge and Huntingdon.

Peterborough is statistically significantly better than England for treatment target achievement percentage for cholesterol <5 mmol/l.

Figure 37: National Diabetes Audit 2015-16 / 2016-17, Treatment Target Achievement for People with Type 1 Diabetes – All three treatment targets

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	186	897	20.7%	220	940	23.4%	2.7%
Huntingdon	97	557	17.4%	115	570	20.2%	2.8%
Isle of Ely/Wisbech	90	522	17.2%	110	595	18.5%	1.2%
Peterborough	115	754	15.3%	170	810	21.0%	5.7%
CCG*	492	2,739	18.0%	525	2,905	18.1%	0.1%
England	25,990	141,839	18.3%	30,945	162,530	19.0%	0.7%

**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

Each locality, C&P CCG, and England have increased their treatment target achievement percentages between 2015-16 and 2016-17 for all three treatment targets.

Peterborough was statistically significantly worse than England in 2015-16 but is now statistically similar. Cambridge is now statistically significantly better than England for this indicator.

7. Treatment Target Achievement for People with Type 2 Diabetes

Figure 38: National Diabetes Audit 2015-16 / 2016-17, Treatment Target Achievement for People with Type 2 Diabetes

Treatment target	C&P CCG - (% completed)			England - (% completed)		
	2015-16	2016-17	% Variance 2015-16/ 2016-17	2015-16	2016-17	% Variance 2015-16/ 2016-17
HbA1c < 48 mmol/mol (6.5%)	26.5	27.0	0.5	28.2	30.6	2.4
HbA1c ≤ 58 mmol/mol (7.5%)	64.7	63.7	-1.0	65.9	67.0	1.1
HbA1c ≤ 86 mmol/mol (10.0%)	94.3	92.8	-1.5	93.4	93.3	-0.1
Blood Pressure ≤ 140/80	68.1	69.0	0.9	73.7	74.4	0.7
Cholesterol < 4 mmol/L	40.9	38.1	-2.8	42.3	41.3	-1.0
Cholesterol < 5 mmol/L	76.0	73.6	-2.4	77.2	76.2	-1.0
All three treatment targets	36.3	35.3	-1.0	40.4	41.1	0.7

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

Figure 39: National Diabetes Audit 2015-16 / 2016-17, Treatment Target Achievement for People with Type 2 Diabetes – HbA1c <48 mmol/mol (6.5%)

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	2,391	8,795	27.2%	2,675	9,470	28.2%	1.1%
Huntingdon	1,758	6,518	27.0%	1,995	7,365	27.1%	0.1%
Isle of Ely/Wisbech	2,116	7,856	26.9%	2,460	9,360	26.3%	-0.7%
Peterborough	2,776	10,911	25.4%	3,300	12,375	26.7%	1.2%
CCG	9,055	34,139	26.5%	10,415	38,570	27.0%	0.5%
England	603,836	2,141,028	28.2%	791,445	2,588,170	30.6%	2.4%

**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

Although there has been some improvement for the above indicator between 2015-16 and 2016-17, all localities and C&P CCG continue to be statistically significantly worse than England.

Figure 40: National Diabetes Audit 2015-16 / 2016-17, Treatment Target Achievement for People with Type 2 Diabetes – HbA1c <58 mmol/mol (7.5%)

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	6,023	8,795	68.5%	6,380	9,470	67.4%	-1.1%
Huntingdon	4,163	6,518	63.9%	4,675	7,365	63.5%	-0.4%
Isle of Ely/Wisbech	5,167	7,856	65.8%	5,840	9,360	62.4%	-3.4%
Peterborough	6,693	10,911	61.3%	7,655	12,375	61.9%	0.5%
CCG	22,087	34,139	64.7%	24,550	38,570	63.7%	-1.0%
England	1,410,955	2,141,028	65.9%	1,732,965	2,588,170	67.0%	1.1%

**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

Nationally there was an increase in treatment target achievement percentages for this indicator between 2015-16 and 2016-17. Conversely, C&P CCG has seen a decline in completion percentages and remains statistically significantly worse than England.

Three localities, Cambridge, Huntingdon, and Isle of Ely/Wisbech, had a decrease in their achievement percentages between 2015-16 and 2016-17. Cambridge has become statistically similar to England in 2016-17, having previously been statistically significantly better. Isle of Ely/Wisbech has become statistically similar, having previously being statistically significantly worse than England for this indicator.

Although Peterborough showed an increase in treatment target achievement percentage (by 0.5 percentage points) it remains statistically significantly worse than England.

Figure 41: National Diabetes Audit 2015-16 / 2016-17, Treatment Target Achievement for People with Type 2 Diabetes – HbA1c <86 mmol/mol (10.0%)

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	8,397	8,795	95.5%	8,905	9,470	94.0%	-1.4%
Huntingdon	6,138	6,518	94.2%	6,845	7,365	92.9%	-1.2%
Isle of Ely/Wisbech	7,441	7,856	94.7%	8,690	9,360	92.8%	-1.9%
Peterborough	10,176	10,911	93.3%	11,350	12,375	91.7%	-1.5%
CCG	32,208	34,139	94.3%	35,805	38,570	92.8%	-1.5%
England	1,999,636	2,141,028	93.4%	2,415,410	2,588,170	93.3%	-0.1%

**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

All localities, C&P CCG, and England have shown decreases in treatment target achievement percentages for this indicator between 2015-16 and 2016-17. C&P CCG is now statistically significantly worse than England.

Peterborough has become statistically significantly worse than England, and Cambridge remains statistically significantly better than England.

Figure 42: National Diabetes Audit 2015-16 / 2016-17, Treatment Target Achievement for People with Type 2 Diabetes – Blood Pressure <= 140/80

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	6,259	8,874	70.5%	6,475	9,365	69.1%	-1.4%
Huntingdon	4,511	6,565	68.7%	5,050	7,205	70.1%	1.4%
Isle of Ely/Wisbech	5,601	7,968	70.3%	6,680	9,230	72.4%	2.1%
Peterborough	7,208	11,214	64.3%	8,065	12,295	65.6%	1.3%
CCG	23,637	34,686	68.1%	26,270	38,100	69.0%	0.8%
England	1,590,081	2,156,748	73.7%	1,917,905	2,579,510	74.4%	0.6%

**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

C&P CCG and all localities except Cambridge have shown an increase in treatment target achievement percentage for this indicator between 2015-16 and 2016-17. However, they all remain statistically significantly worse than England.

Figure 43: National Diabetes Audit 2015-16 / 2016-17, Treatment Target Achievement for People with Type 2 Diabetes – Cholesterol < 4 mmol/L

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	3,499	8,516	41.1%	3,275	9,030	36.3%	-4.8%
Huntingdon	2,396	6,352	37.7%	2,260	6,985	32.4%	-5.4%
Isle of Ely/Wisbech	3,234	7,720	41.9%	3,435	8,940	38.4%	-3.5%
Peterborough	4,508	10,735	42.0%	5,025	11,895	42.2%	0.3%
CCG	13,659	33,382	40.9%	14,035	36,830	38.1%	-2.8%
England	887,739	2,100,853	42.3%	1,026,840	2,487,945	41.3%	-1.0%

**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

Between 2015-16 and 2016-17 only Peterborough has shown an increase in achievement percentages for type 2 cholesterol <4 mmol/L. Peterborough is now statistically significantly better than England.

C&P CCG and all localities excluding Peterborough are performing statistically significantly worse than England for this indicator in 2016-17.

Figure 44: National Diabetes Audit 2015-16 / 2016-17, Treatment Target Achievement for People with Type 2 Diabetes – Cholesterol < 5 mmol/L

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	6,541	8,516	76.8%	6,520	9,030	72.2%	-4.6%
Huntingdon	4,726	6,352	74.4%	4,955	6,985	70.9%	-3.5%
Isle of Ely/Wisbech	5,881	7,720	76.2%	6,585	8,940	73.7%	-2.5%
Peterborough	8,175	10,735	76.2%	9,055	11,895	76.1%	0.0%
CCG	25,363	33,382	76.0%	27,125	36,830	73.6%	-2.3%
England	1,622,794	2,100,853	77.2%	1,895,065	2,487,945	76.2%	-1.1%

**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

England, C&P CCG, and all localities except Peterborough, have shown decreases in completion of treatment target achievement in percentage terms for this indicator between 2015-16 and 2016-17. C&P CCG remains statistically significantly worse than England, along with Huntingdon, and Isle of Ely/Wisbech. Cambridge is also statistically significantly worse than England, having previously been statistically similar.

Peterborough is now statistically similar to England for this indicator, having been statistically significantly worse in 2015-16.

Figure 45: National Diabetes Audit 2015-16 / 2016-17, Treatment Target Achievement for People with Type 2 Diabetes – All three treatment targets

CCG Locality	2015-16			2016-17			Change in % completed 2015-16/2016-17
	Numerator	Denominator	% Completed	Numerator	Denominator	% Completed	
Cambridge	3,353	8,357	40.1%	3,325	8,865	37.5%	-2.6%
Huntingdon	2,195	6,231	35.2%	2,375	6,905	34.4%	-0.8%
Isle of Ely/Wisbech	2,832	7,511	37.7%	3,130	8,835	35.4%	-2.3%
Peterborough	3,404	10,378	32.8%	3,990	11,680	34.2%	1.4%
CCG	11,811	32,534	36.3%	12,810	36,280	35.3%	-1.0%
England	821,282	2,031,644	40.4%	999,755	2,434,835	41.1%	0.6%

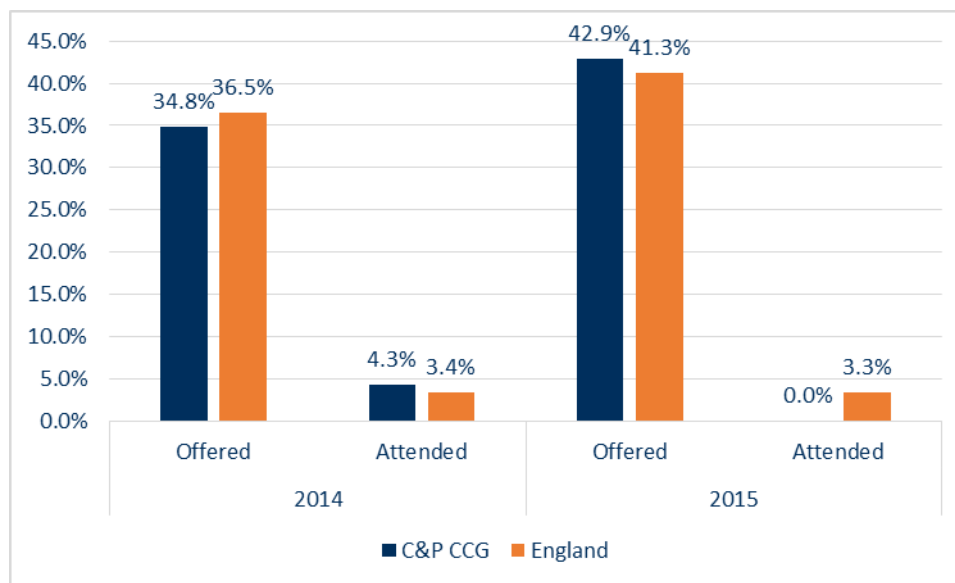
**CCG published totals may differ to aggregated locality totals due to data suppression (2015-16 methodology) or rounding (2016-17 methodology)*

England and Peterborough have shown increases in treatment target achievement percentage for this indicator between 2015-16 and 2016-17. C&P CCG and all other localities have shown decreases in the same period.

C&P CCG, and all localities, remain statistically significantly worse than England for this indicator.

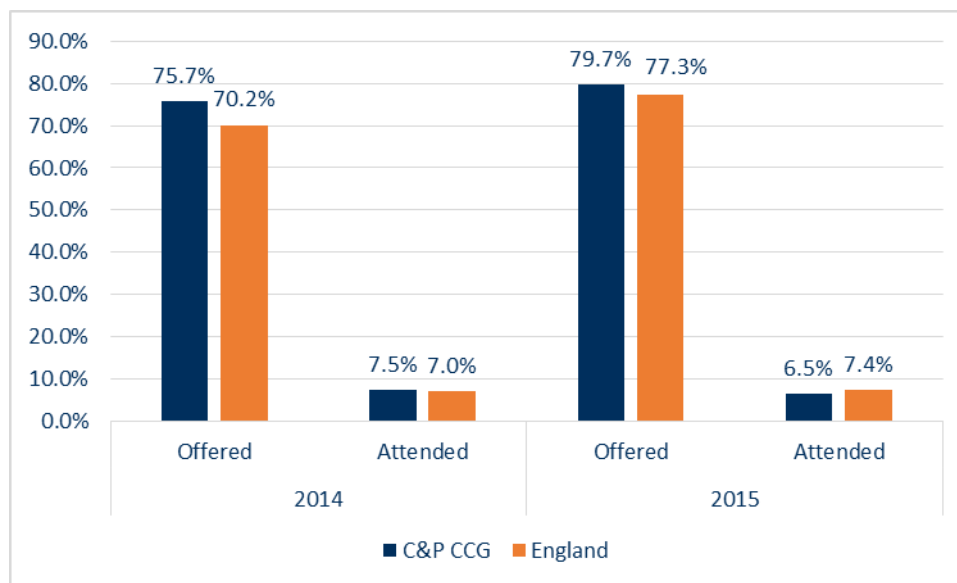
8. Structured Education Programme – Offers and Attendances

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



The above chart shows the percentage of newly diagnosed people with type 1 diabetes in either 2014 or 2015 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 2015 were offered a structured education programme in 2014, at a C&P CCG and national level. The percentage of those who were offered and did attend a structured education programme declined from 4.3% in 2014 to 0.0% in 2015 for C&P CCG, but remained stable at 3.4%/3.3% for England.

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



For type 2 diabetes, more people diagnosed in 2015 were offered a structured education programme in 2014, at a C&P CCG and national level. The percentage of those who were offered and did attend a structured education programme declined from 7.5% in 2014 to 6.5% in 2015 for C&P CCG, but increased from 7.0% to 7.4% for England.

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