



The Benchmarking Partnership

HbA1c Diabetes Patient Management Programme – Information Leaflet

The TBP HbA1c Diabetes Patient Management Programme is designed to help the laboratory take the lead in better management of diabetes patients. It facilitates a more effective working relationship between the laboratory, CCG/GPs and secondary care diabetes specialists to deliver better outcomes for patients and significant cost savings across the whole pathway.

The full programme comprises two major components. The first is a comprehensive PDF summary report which includes the following:

- Contextual data analyses to help better understanding of the challenges specific to the demographics of your population, including diabetes prevalence, age and deprivation.
- Overall test utilisation, including identification of diagnostic vs monitoring and management tests, and analyses of diabetic control within the population.
- Optimum re-test interval analyses, highlighting when to test within each control group for maximum cost effectiveness vs benefit to the patient specific to your population.
- Demand optimisation analyses to identify how many tests could be safely removed (ie currently 'over tested') vs tests which should be done to minimise risk to patients (ie currently 'under tested'), including cost benefit and potential savings analyses.
- Potential bed day cost savings analyses compare each GP practice with relevant national peers to create realistic savings targets over the coming years.
- Evidence based outcomes analyses identify best and worst performing GP practices based on diabetic control management over a fixed three-year period.
- Missed test analyses identify how many patients within each of the most severe control groups require their HbA1c test and estimate how many missed diagnoses there have been during the focus period. This is particularly relevant in the aftermath (and on-going impact) of COVID-19, as patient management has been severely affected by the pandemic and has left many patients urgently in need of their test.

Examples from Summary Report:

Total Number of Tests "Missed" (Most Recent 3 Years):	28,723
Potential Uplift In Workload Over Next 12 Months Through Late-Test Elimination:	10,983
Percentage Increase In Workload Through Late-Test Elimination:	7.3%
Direct Cost of Additional HbA1c Testing:	£32,949

	% Practices Currently Performing At Or Better Than The Following Metrics:	Total Potential Region-Wide Cost Savings Through All Practices Achieving The Following Metrics:
Highest Quartile:	21%	£3,337,397
Median:	40%	£2,092,880
Lowest Quartile:	58%	£1,121,166

(vs their own individually calculated national peer groups)

Achieving lowest quartile within a group of comparable peers feels like a reasonable target for each GP practice currently performing at or below that metric. On that basis, an annual saving of £1,121,166 through a reduction in emergency diabetes admissions feels like a realistic savings target for the region, based on £250 per bed day.

The second component produces monthly reports for each of your GP practices to identify exactly which patients in the highest control groups are urgently due their test. This single page report identifies patients through their name and NHS number, and provides critical information such as when the test was due, what the last test result was, and what the trend in control level was prior to that result. In a time of limited resource and a need to quickly and effectively identify the most at-risk patients, this report has been a most welcome addition to the service for the many GP practices already using this system.

Examples from GP Practice Report:

Total Tests Due In Each Priority Category			
7) >86	4		
6) 76-86	6		
5) 59-75	14		

NHS Number	Patient Name	Date of Birth	HbA1c Control Group	Most Recent HbA1c Result	Change vs		Missed Test Due Date
					Previous Test	Most Recent Test Date	
12345678	Anonymised Patient 2352	01/01/1970	7) >86	110	+20	21/01/2021	23/04/2021
12345679	Anonymised Patient 4130	02/01/1970	7) >86	106	+3	09/09/2020	10/12/2020
12345680	Anonymised Patient 2010	03/01/1970	7) >86	95	+1	10/12/2020	12/03/2021
12345681	Anonymised Patient 1588	04/01/1970	7) >86	93	+10	03/03/2021	03/06/2021
12345682	Anonymised Patient 1433	05/01/1970	6) 76-86	83	0	03/06/2020	03/09/2020
12345683	Anonymised Patient 1668	06/01/1970	6) 76-86	82	+7	16/03/2021	16/06/2021
12345684	Anonymised Patient 3280	07/01/1970	6) 76-86	79	-2	08/07/2020	08/10/2020

Total Number of Tests Missed Within Highest Four (Most Severe) Control Categories						
	Non-Diagnostic (Patient Management)		Diagnostic (Estimated)*		Total*	
	Tests Missed	% of Total	Tests Missed	% of Total	Tests Missed	% of Total
>86 mmol/mol	1,153	(3.4%)	154	(0.9%)	1,307	(2.5%)
76-86 mmol/mol	956	(2.8%)	61	(0.3%)	1,017	(2.0%)
59-75 mmol/mol	3,552	(10.6%)	148	(0.8%)	3,700	(7.2%)
48-58 mmol/mol	4,769	(14.2%)	293	(1.7%)	5,062	(9.9%)

Total Number of Urgent Non-Diagnostic Tests Missed Within the Highest Two Severity Categories:	2,109	Total Number of Estimated Missed Diagnoses of Diabetes (Excluding 'Pre-Diabetes'):	656
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*Missed Diagnostic HbA1c tests are estimated based on the proportion of diagnostic tests performed (Diagnostic HbA1c as a % of Total) during the twelve month period immediately prior to the COVID Impact Period, calculated against the sum of the total number of non-diagnostic tests done and missed during the CIP, minus those diagnostic tests that were actually performed.

This programme requires only a relatively small amount of input from the laboratory. A simple data download from the LIMS system (one initial data gather, plus a regular routine update) and then distribution of reports to GP practices. Our team will be on-hand throughout the process to help you with the data gathering process and will work with you via Teams/Zoom to review your data and ensure you are able to make the most effective use out of it. We will even help present it to your GPs on your behalf if required.

A 12-month subscription to this programme costs £4,000 for a single CCG, plus £1,000 for each additional CCG within the same Trust. Significant discounts are also available for those who subscribe as a network, and for existing customers of our other programmes or work.

If you would like to find out more, or would like to arrange a no-obligation Q&A chat about whether this programme might be right for you, please contact us at:

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