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NHS Atlas of Variation in Healthcare for People with Diabetes

Reducing unwarranted variation to
increase value and improve quality

Case-study 2: Implementing the X-PERT Programme – Structured education for people with Type 2 diabetes¹

The challenge

There are about 11,000 people in Bexley with diabetes.² Bexley Care Trust needed to increase the number of people newly diagnosed with diabetes undertaking a structured patient education (SPE) programme. X-PERT is a group education programme at which people learn about up-to-date treatments and self-management of diabetes. In 2008/9, only 80 people completed the X-PERT Programme.³

Aim

The aim of the project was:

- To establish a structured patient education programme that 50% of people diagnosed with Type 2 diabetes would attend in the first year following diagnosis.

In addition, Bexley Care Trust wanted to enable 15% of all other people with Type 2 diabetes to complete structured patient education.

What was done?

Bexley Care Trust appointed a new Diabetes Programme Manager. The lack of a structured patient education programme was identified as a key area for improvement, therefore, the diabetes programme manager set up a project to increase uptake of the X-PERT Programme, which started in January 2010. The referral processes were reviewed and changes were made to improve both referrals and attendance (see Box CS2.1).

With the support of other local healthcare professionals, the X-PERT Programme was promoted to GPs and directly to patients. The offer was a taster session, followed by the full course if the patient wished to continue.

Box CS2.1: Changes made to improve referrals and attendance at the X-PERT programme in Bexley Care Trust

- A taster session was offered to people unsure of committing to the programme
- A dedicated administrator was appointed, together with new trainers, including practice nurses and patient support group members
- Marketing was used to raise awareness of the programme: self-referral was promoted and GP practices, pharmacists and opticians were targeted
- The referral process was simplified using an electronic form
- Patient choice was improved by offering sessions at a variety of venues and times
- All trainers were asked to attend regular training and team meetings to ensure sessions were consistent across the borough of Bexley
- A league table of referral rates and outcome data was used to encourage practices to participate (see Figure CS2.1)

Recognising the importance of ease of access, sessions were arranged at a variety of different venues in the area, on several different days and at various times, including at evenings and weekends. The sessions were run by a range of people including those from the local Diabetes UK branch, local community groups and patients who had already completed the Programme.

What changed?

Since February 2010, the average number of people attending the courses is 100 per month. The conversion

1 This case-study report is based on the one featured on the NHS Diabetes website, but has been expanded with further information from the team responsible for the work. http://www.diabetes.nhs.uk/our_publications/diabetes_success_stories/avoiding_admissions_and_improving_inpatient_care/implementing_the_xpert_programme/

2 Cotter B, Grumitt J (2011) GP commissioning: Shaping diabetes care in Bexley. *Diabetes & Primary Care* 13(6); 375-380.

3 X-PERT Programme. <http://www.xperthealth.org.uk/>

rate from 'taster' session to the full course was much higher than expected at 80%. The Programme achieved the target of reaching 50% of people with Type 2 diabetes who were in the first year of diagnosis.

The initial set of outcomes with respect to average HbA1c levels, average cholesterol levels and average body mass index (BMI) for Bexley Care Trust from the February 2010 series of X-PERT courses is shown in Table CS2.1 and compared with national data for the same time period.

Bexley Care Trust achieved the largest reduction in HbA1c from X-PERT structured patient education in the UK:

- 1.3% at 6 months;
- 1.4% at 12 months.

Improved glycaemic control is important because, for each reduction in HbA1c of 1%, the risk of the following complications decreases:

- Microvascular complications by 37%;
- Amputations by 43%;
- Myocardial infarction by 14%;
- Stroke by 12%;
- Death by 21%.

By 2011, there had been a 20-fold increase in referrals to the X-PERT programme. Positive participant feedback helped to increase the confidence of primary care practitioners to refer other people to the programme.

Other important outcomes from increased referrals to and maximising attendance at the X-PERT programme are shown in Box CS2.2.

Box CS2.2: Other important outcomes from increased referrals to and maximising attendance at the X-PERT programme in Bexley Care Trust

- Blood pressure levels have also been reduced
- Improved patient engagement: patient group membership rose from 492 to 790 in 2011; two new groups were formed – one in a hard-to-reach community and the other for young people
- Increased awareness among clinicians and patients with diabetes
- The success of the X-PERT programme has given momentum to other initiatives
- In conjunction with other initiatives, referral rates to the general diabetes consultant and diabetes specialist nurse clinics have been halved
- Around 200 patients have been transferred from secondary to primary care
- Almost two-thirds of people with Type 2 diabetes in Bexley Care Trust now manage their condition through diet and exercise and achieve an HbA1c level of <7.0%. Almost two-thirds of people with Type 2 diabetes on oral medication in Bexley Care Trust also achieve an HbA1c level of <7.0%.

Table CS2.1: Outcomes from February 2010 series of X-PERT courses – Bexley Care Trust and national data

	Bexley baseline	Bexley 6 months post X-PERT	Overall reduction (%)	National baseline	National 6 months post X-PERT	Overall reduction (%)
Average HbA1c (%)	8.4	7.1	15%	7.7	7.1	8%
Average cholesterol (mmol/l)	5.0	4.3	14%	4.4	4.2	5%
Average BMI (kg/m ²)	31.8	30.3	5%	31.8	30.8	3%

Resources

- › Bexley Diabetes website for various resources including information about patient and professional education. <http://www.diabetesbexley.org.uk/>

Further information

- › Cotter B, Grumitt J (2011) GP commissioning: Shaping Diabetes Care in Bexley. *Diabetes & Primary Care* 13(6); 375-380.

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Figure CS2.1: Referrals to and attendance at X-PERT programme from 28 practices

