NHS
Commissioning Board

12 March 2013

Baroness Barbara Young
Diabetes UK

(sent via e-mail)

Dear Barbara and colleagues,

Thank you very much for your letter urging us to demonstrate strong leadership and take decisive action at this crucial juncture of health service reform, to safeguard what has recently been achieved in improving diabetes care. We agree with you fully on this and can assure you of our commitment to improve outcomes for patients with diabetes across all five domains of the NHS Outcomes Framework.

Diabetes will rightly be at the heart of many aspects of the work of the Commissioning Board. Within the Medical Directorate, Professor Sir Mike Richards and Dr Martin McShane have already identified diabetes as a priority for domains 1 and 2 respectively. The Domain 1 team will be working with Public Health England and others, to make NHS Healthcheck as effective as possible, thereby hopefully reducing people's risk of developing diabetes (e.g. through advice on lifestyle factors) and also diagnosing diabetes earlier. Economic modelling has shown the potential for the programme to prevent over 4,000 people a year from developing diabetes, and to detect over 20,000 cases of diabetes and kidney disease much earlier. Other approaches to finding the 850,000 patients with undiagnosed diabetes will be explored in partnership with NHS Improving Quality (until recently known as the new Improvement Body).

Central to domain 2 is an approach, which was developed specifically to improve diabetes care. This brings together commissioning, best practice, integrated working between professionals and, most importantly, empowering patients and carers to ensure they receive the best possible care. The Commissioning Board will also be looking at ways of supporting and incentivising GPs to complete the nine care processes and to drive up achievement of treatment standards.

The incoming National Clinical Director for Obesity and Diabetes will be responsible for working across all 5 domains of the NHS Outcomes Framework – to reduce mortality, to improve quality of life, to improve recovery from acute episodes of ill health and to improve patient experience and safety for patients with diabetes. He will do this in conjunction with the

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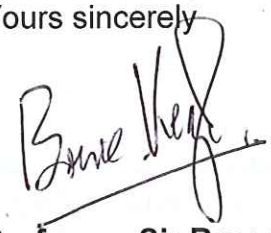
Domain Directors and NHS Improving Quality (NHS IQ) and hopefully with engagement of all stakeholders, including yourselves. Although diabetes is indeed a major risk factor for cardiovascular disease, we can assure you that diabetes care per se will also be of major importance. The NCD working with the Domain Directors and NHSIQ will have support and resources from across the Board – within the Domain Teams particularly but also within other Directorates such as the Patients and Information Directorate. The new NCD will also consider how best to seek advice and support from the wider community, especially from clinicians and patients, to inform their plans and strategy within the Board.

NHS Improving Quality will align its work with the five domains of the NHS Outcomes Framework. Although the key themes identified for NHS IQ are generic (e.g. early diagnosis; integrated care; rehabilitation etc.) it will of course be central to their successful delivery to improve outcomes for patients with specific conditions such as diabetes. NHS IQ will inherit expertise and experience from NHS Diabetes and we will be looking to align this with the domain based approach. As you are well aware, people with conditions such as diabetes often have other long-term conditions, and this approach will ensure it is the patient, not the condition, that is at the centre of their care. Further details of the work programmes that NHS IQ will lead will be available shortly.

As you and many of your cosignatories will know, the importance of diabetes as a major cause of excess deaths and disability from heart disease, stroke and peripheral arterial disease will be reflected in the forthcoming Cardiovascular Outcomes Strategy. While recognising that aspects of diabetes need to be managed separately and in their own right, implementation of this strategy will be of major benefit to patients with diabetes. We look forward to working with you all to make this a reality.

We hope you will see form the approach set out in this letter that improving outcomes for all patients, including those with diabetes, is firmly at the heart of the Domain-based approach which the Commissioning Board is adopting.

Yours sincerely



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