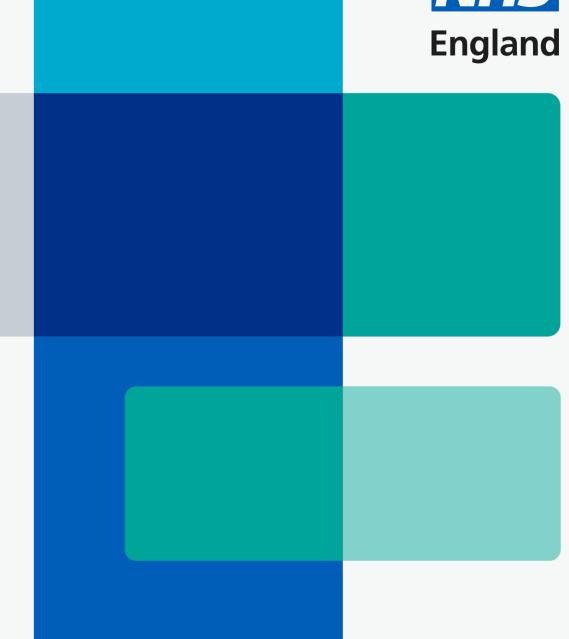


National CYPDN **Technology training day**

Fulya Mehta National Speciality Advisor CYA Diabetes NHS England



National Paediatric Audit Data – Median HbA1c for CYP living with Type 1 Diabetes in England and Wales

Year on year

HbA1c

outcomes

improvement in

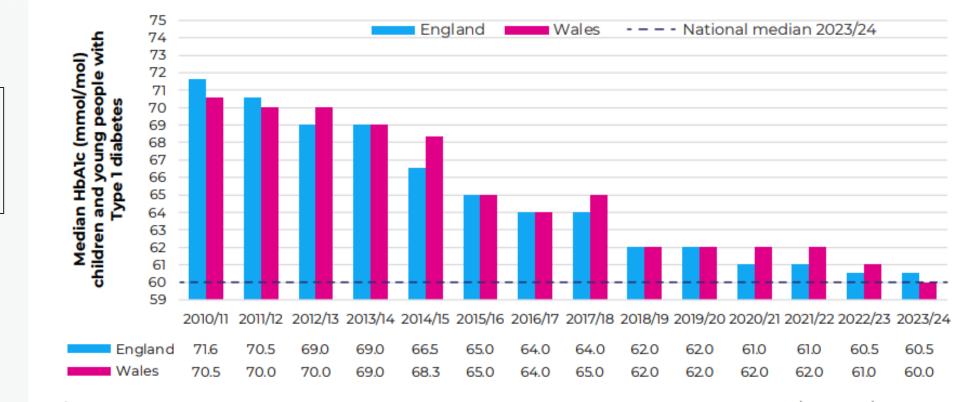
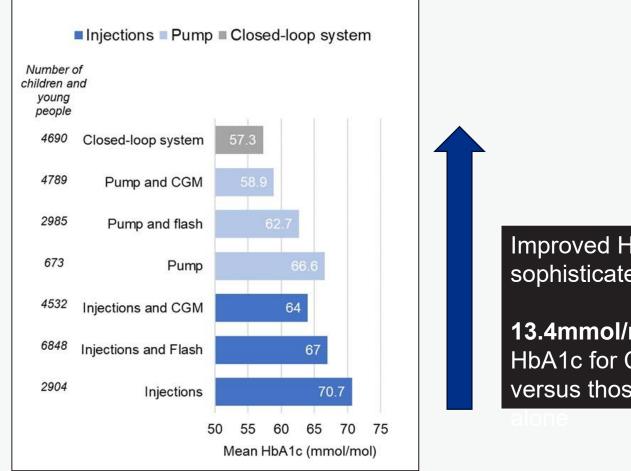


Figure 5: Median HbAlc for children and young people with Type 1 diabetes in England and Wales, 2010/11 to 2023/24

Mean HbA1c for CYP with Type 1 diabetes using different combinations of diabetes treatment technology NPDA 2022/23



Improved HbA1c outcomes with more sophisticated treatment technologies

13.4mmol/mol difference in mean HbA1c for CYP on HCL systems versus those using injection therapy Hybrid closed loop systems for managing blood glucose levels in type 1 diabetes

Technology appraisal guidance Published: 19 December 2023

NICE National Institute for Health and Care Excellence

ww.nice.org.uk/guidance/ta943

National HCL update

2025/26 Funding: The national funding available for ICBs this year has been confirmed at £59.5m, and indicative allocations for each ICB were shared in March 2025. This funding is 'SDF' which means it is ringfenced to support the roll out of HCL.

Updated HCL reimbursement guidance (shared 9th May via FutureNHS): Key updates included:

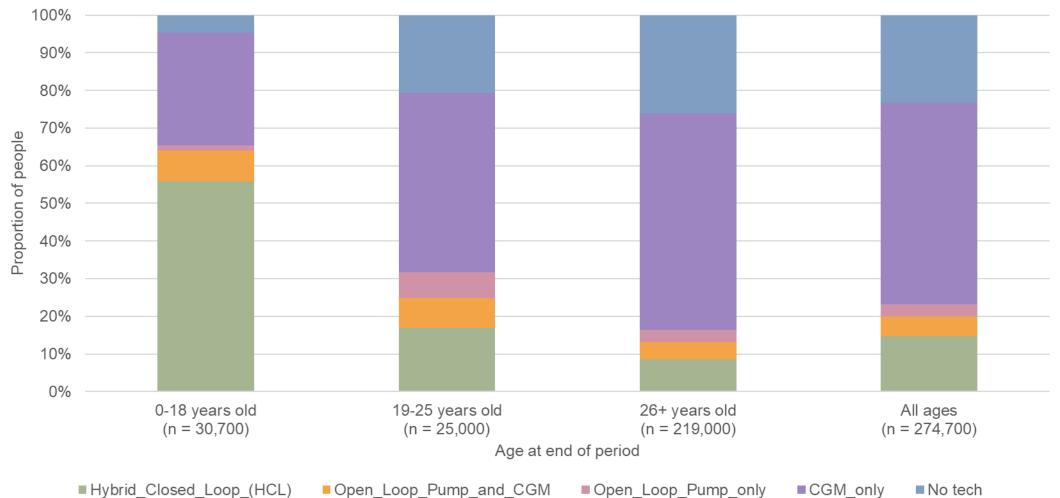
- An overview of the national funding available for 2025/26
- An explanation of the fixed allocation transferred to ICBs in May
- More detail on the original modelling used to calculate the national funding contributions
- How the reimbursement funding for each HCL start will be allocated
- Key dates for data submissions and payments

HCL has been included within the Saving Babies Lives Care bundle V3.2: To comply with the Clinical Negligence Scheme for Trusts Maternity Incentive Scheme (CNST MIS). Services should aim for >60% of pregnant women to be offered HCL in 2025/26 and >95% from 2026/27.

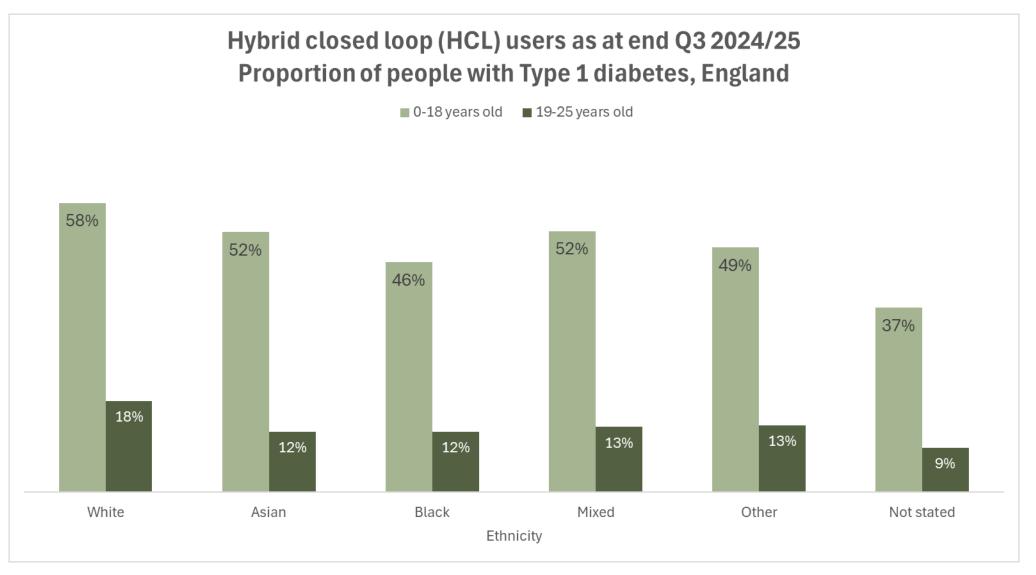
Data:

- ICBs and trusts will receive reports with Q4 activity data in June.
- The NPDA quarterly dashboard will be updated in June.
- £100 per patient per year for administrative support

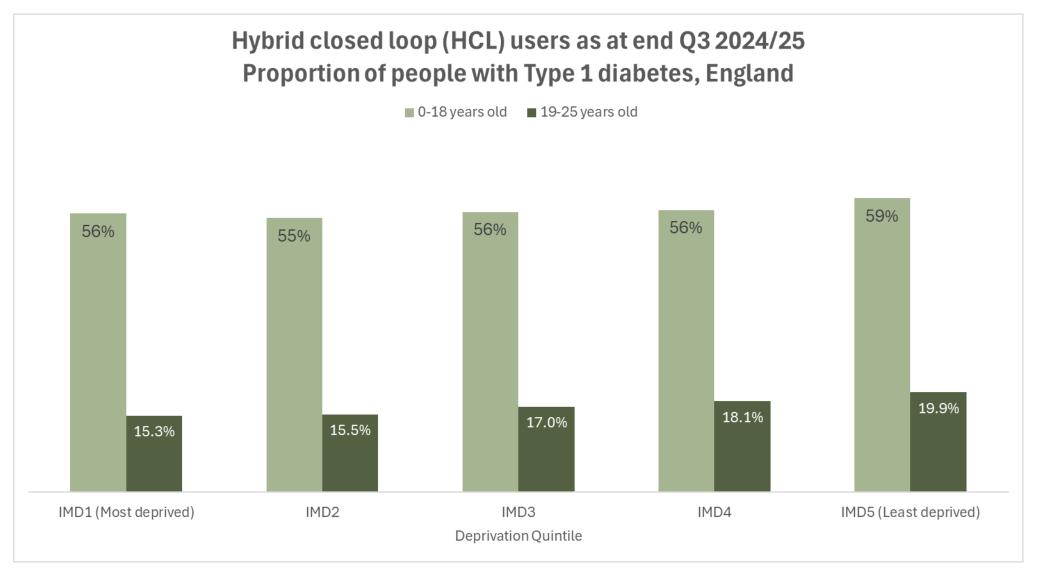
Tech usage as at end Q3 2024/25 Proportion of people with Type 1 diabetes, England



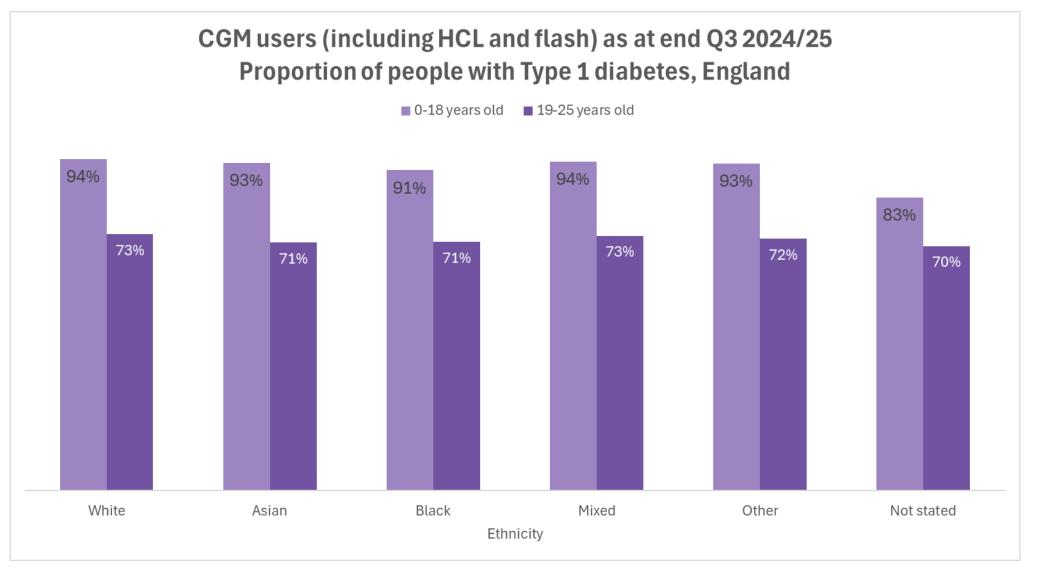
Source: GIRFT analysis of NDA and NPDA data Excludes those where tech status is unknown



Source: GIRFT analysis of NDA and NPDA data Excludes those where tech status or ethnicity is unknown



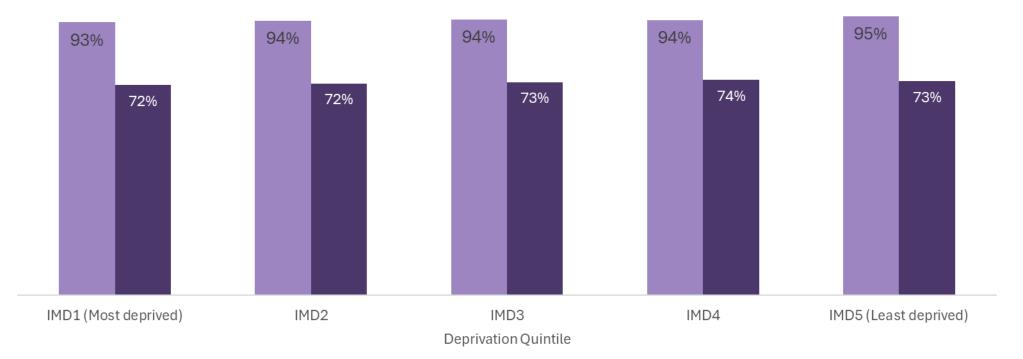
Source: GIRFT analysis of NDA and NPDA data Excludes those where tech status or deprivation is unknown



Source: GIRFT analysis of NDA and NPDA data Excludes those where tech status or ethnicity is unknown

CGM users (including HCL and flash) as at end Q3 2024/25 Proportion of people with Type 1 diabetes, England

■ 0-18 years old ■ 19-25 years old



Source: GIRFT analysis of NDA and NPDA data Excludes those where tech status or deprivation is unknown



HCL implementation learning from CYA GIRFT Diabetes Reviews

May 2025

Dr Nivedita Aswani, GIRFT Clinical Advisor for Children and Young Adults Diabetes Dr Fulya Mehta, NHSE National Clinical Lead for Diabetes in Children and Young Adults Professor Partha Kar, NHSE GIRFT Type 1 Diabetes Technology Clinical Lead Professor Gerry Rayman, NHSE GIRFT Joint Diabetes Clinical Lead Kim Howson, GIRFT Associate Workstream Delivery Manager Sam Watson, GIRFT Workstream Delivery Officer











CYA GIRFT Programme – reducing unwarranted variation between ICBs and PDUs

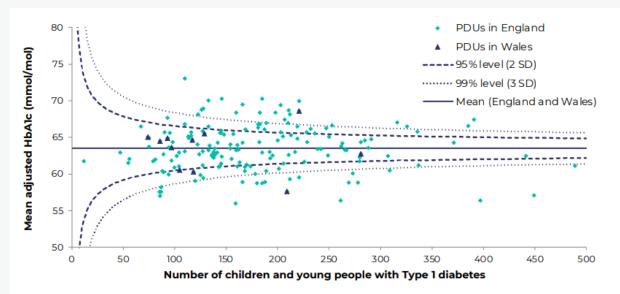
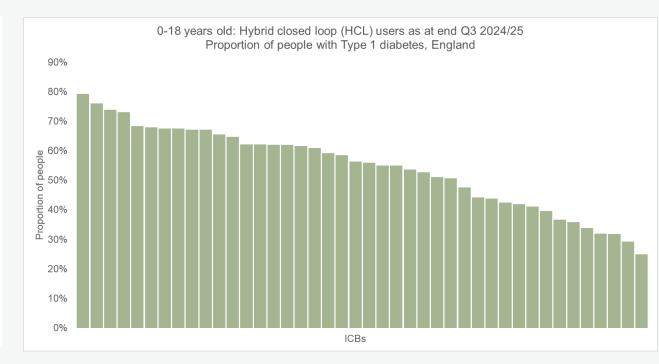


Figure 6: Funnel plot of mean adjusted HbAlc by PDU for those with Type 1 diabetes, 2023/24 ¹Characteristics such as age, duration of diabetes, sex, ethnicity and level of deprivation were utilised in a regression model to adjust HbAlc to take into account different case mixes between PDUs.

Source: NPDA report care and outcomes 2023/24



Source: GIRFT analysis of NDA and NPDA data Excludes those where tech status is unknown

Insights from GIRFT reviews and health inequalities technology projects

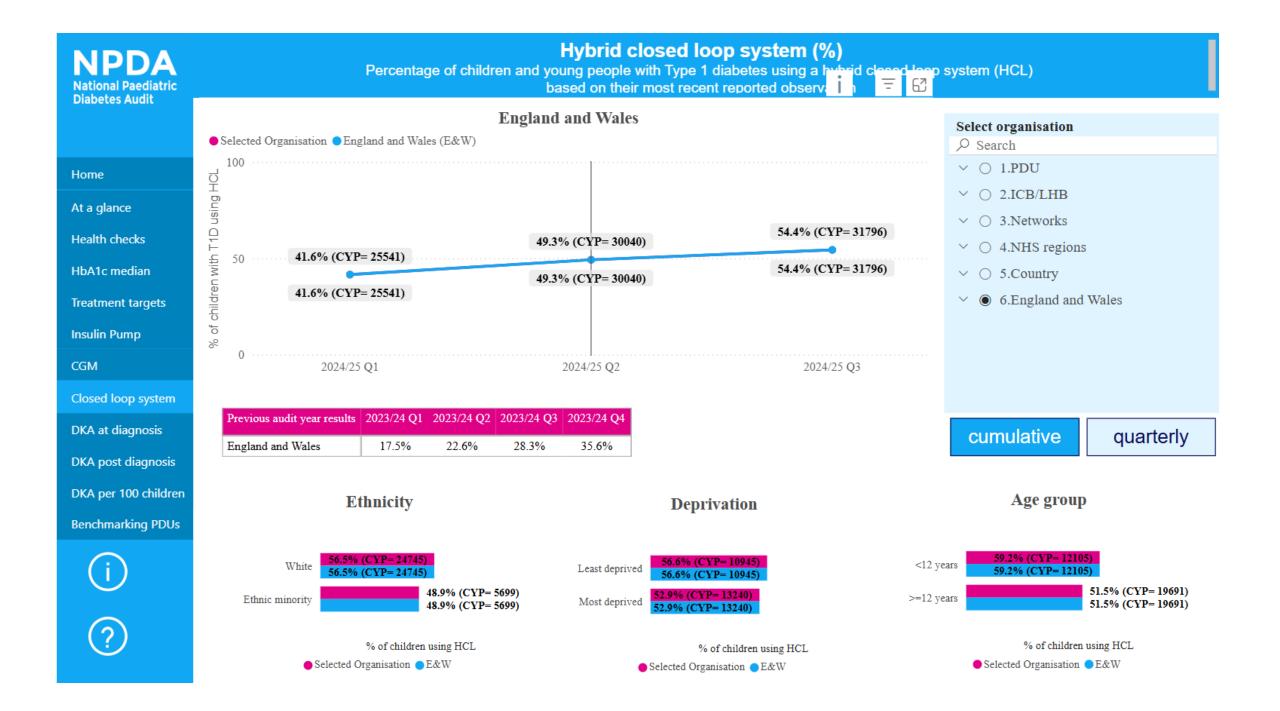
Commissioning, leadership and service structures:

- ICB HCL implementation plan with good clinical involvement and communication
- Funding transparency for diabetes technology
- Transition and young adult care services and pathways
- Standardised streamlined procurement pathways
- Clarity on BPT that enables adequate paediatric diabetes workforce

Insights from GIRFT reviews and health inequalities technology projects

Paediatric diabetes teams:

- Workforce including administrative support
- Data management systems
- Team ethos and culture
- HCP training and education
- Group technology starts
- Working with industry partners
- Virtual pumps starts and reviews (when appropriate)
- Novel roles technology support workers and family support workers
- Optimisation of systems with clear HCL pathways and follow up





Thank you