

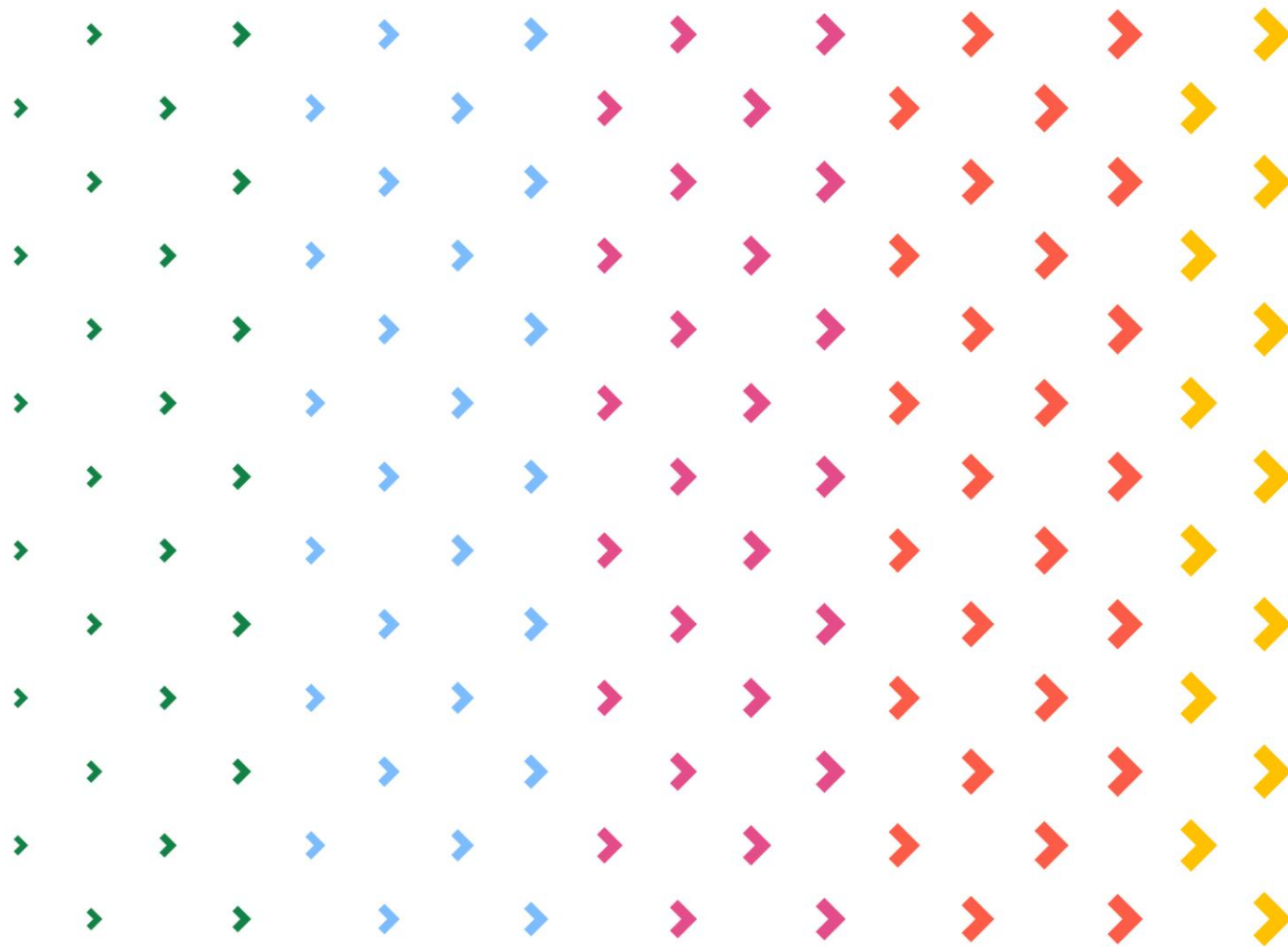


**National Children & Young People's  
Diabetes Network**

# **Transition and Young Adult T2 Diabetes care – NHSE TYA Pilots**

- 1) King's Health Partners**
- 2) Barts Health**

# Services for 18-24yr olds with Type 2 Diabetes in Lambeth and Southwark



# Outline

1. Why support for young adults with type 2 diabetes is important
2. Young people with type 2 diabetes in Lambeth and Southwark
3. The Lambeth and Southwark Young Persons Type 2 Diabetes Community clinics.
  - This work is funded as part of the NHS England Transition and Young Adult Diabetes pilot, for which King's Health Partners are a pilot site.
4. Type 2 Take 2: a new education and support programme for young adults with type 2 diabetes
  - This work is funded through health inequalities funding from Lambeth and Southwark

# Case Study: Diagnosis

- Diagnosed 2017 – age 18
  - HbA1c 124 mmol/mol (13.5%) 22/03/2017
  - BMI 36.5 kg/m<sup>2</sup>
  - Ethnicity White British
- 
- Appointments at GSTT 2017-2019
  - Re-referred in 2022



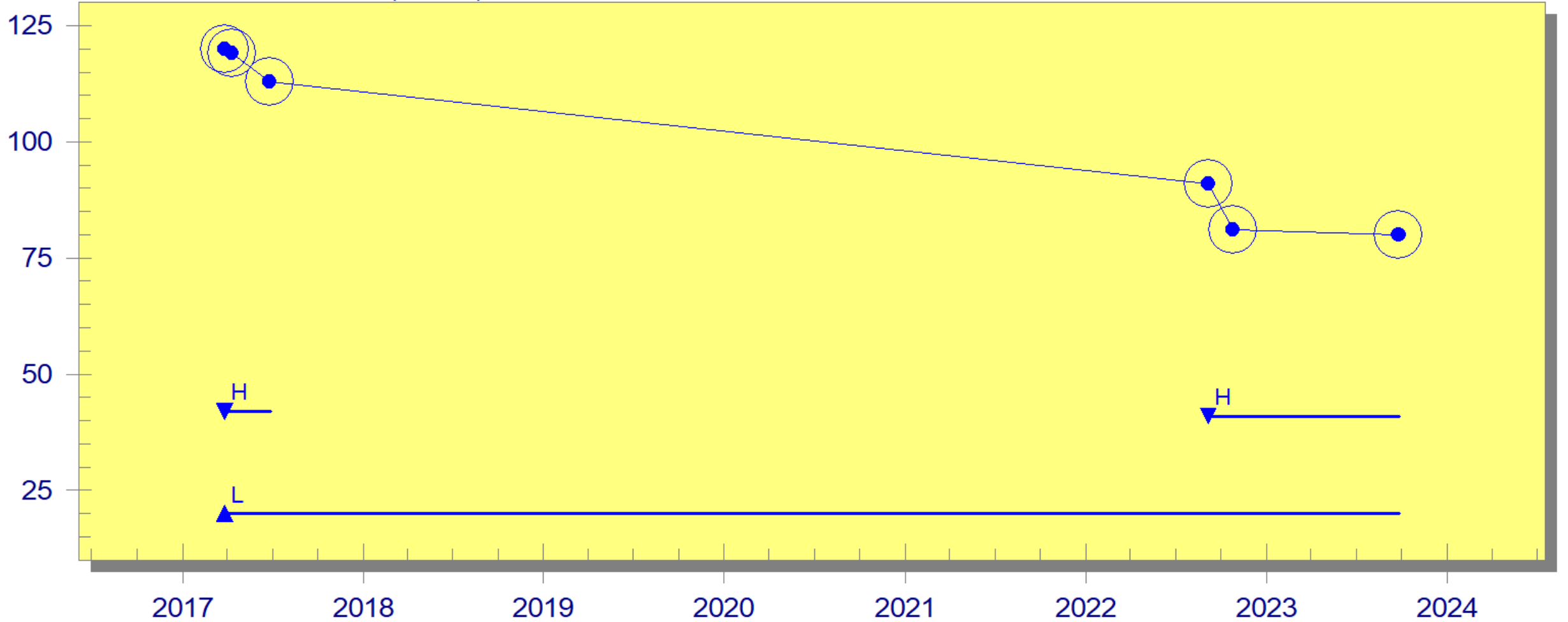
# Case Study: LCR Problem List

Date	Problem / Detail
26-Jun-2024	Ulcer of lower extremity
26-Jun-2024	Ulcer of lower extremity
18-Mar-2024	Benign paroxysmal positional vertigo
27-Aug-2023	Haemorrhoids
03-Aug-2023	Falls
27-Jul-2023	Chronic diarrhoea
17-Jul-2023	Abscess
15-Jul-2023	Non proliferative diabetic retinopathy
12-Jun-2023	Non proliferative diabetic retinopathy
25-May-2023	Non proliferative diabetic retinopathy
07-Mar-2023	Chronic diarrhoea
12-Nov-2022	Macular oedema
12-Nov-2022	Non proliferative diabetic retinopathy
10-Aug-2022	Type II diabetes mellitus uncontrolled
14-Jul-2022	Diabetic retinopathy
14-Jul-2022	Diabetic macular oedema
14-Jul-2022	Non proliferative diabetic retinopathy
05-Jul-2022	Polycythaemia
01-Jul-2022	Vulnerable adult
01-Jul-2022	Needle phobia
25-Mar-2022	Acute anterior uveitis
15-Feb-2021	High risk category for developing complication from COVID-19 infection
22-May-2019	Hypertensive disease
26-Jan-2018	[D]Raised blood pressure reading
24-Mar-2017	Type 2 diabetes mellitus
24-Mar-2017	Vitamin D deficiency
23-Mar-2017	[D]Raised blood pressure reading
23-Mar-2017	Primary polycythaemia
22-Mar-2017	[D]Nausea and vomiting
09-Aug-2016	Tonsillitis
04-May-2012	Obesity
15-Dec-2010	Flu like illness
16-Nov-2010	Sore throat symptom



# Temporarily Selected

HbA1c New Units (mM/M)



# Case Study: November 2024

- PC: DKA and right foot cellulitis in foot wound with collection
- PMH: T2DM, obesity
- Pip-taz
- Vasc: palpable pulses
- Foot X-ray: No OM
- MRI-foot : There is no evidence of osteomyelitis. No collections.
- 17/11/24 2nd Toe amputation on priority
- 21/11/24- tissue shows Group B strep and MSSA - so original coamox (and one day flucloxacillin) would have been appropriate
- He was not stepped down from piptaz post-op and needs to be
- 21/11/24: switch current piptaz to high dose flucloxacillin please (2g qds)
- 26.11.2024 MDM Flucloxacillin 2g
- 28/11/2024- Forefoot amputation.

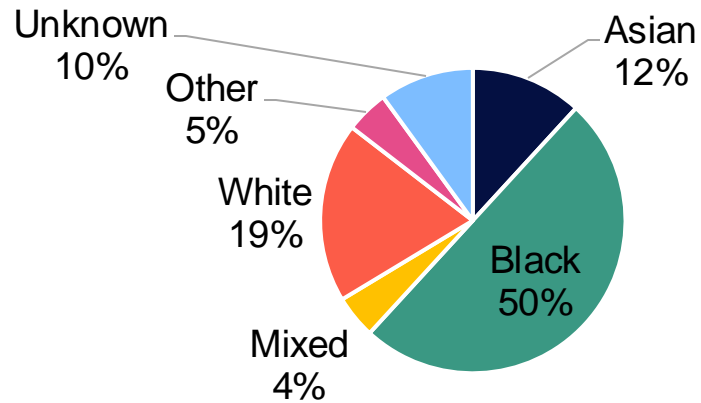


# Young People with T2DM in Lambeth & Southwark

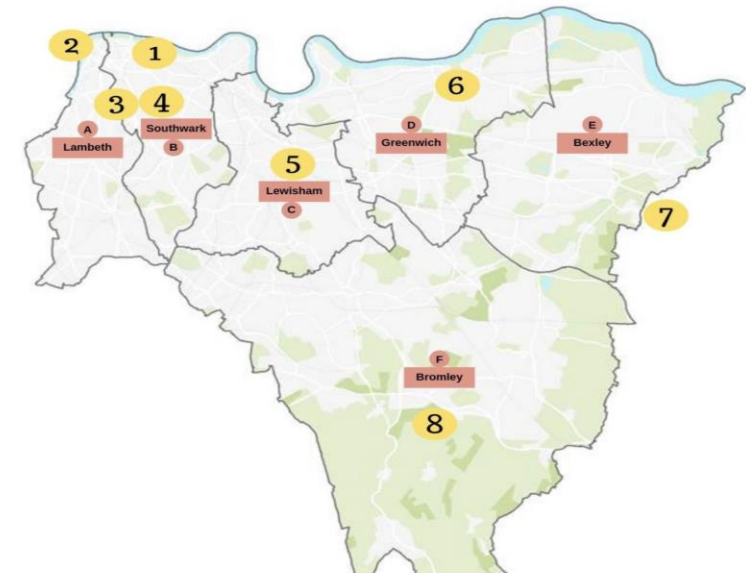
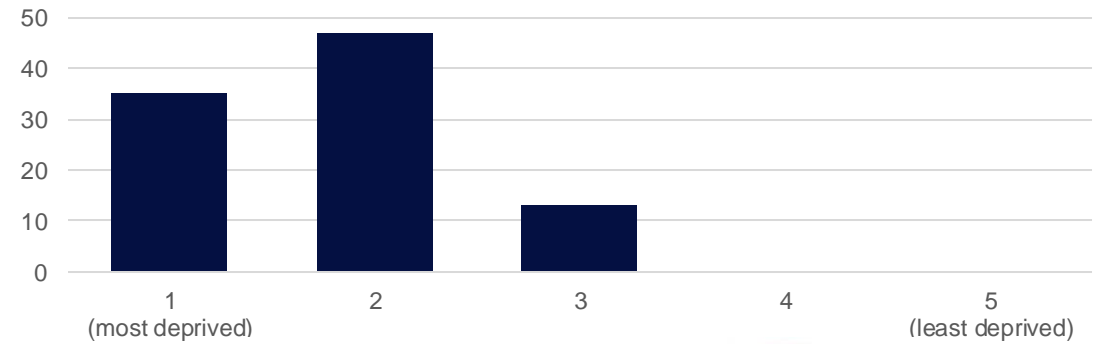
Total number of 19-24yr olds with T2DM by borough

Borough	2021-22	2022-23	2023-24
Lambeth	44	46	63
Southwark	41	42	47
<b>Total</b>	<b>85</b>	<b>88</b>	<b>110</b>

Ethnicities of 19-24yr-olds with T2DM living in Lambeth & Southwark (2023-24)



Deprivation Quintile of 19-24yr with T2DM olds living in Lambeth & Southwark (2023-24)



**Key**

1	Guy's	2	St Thomas'	3	King's College Hosp.	4	South London and Maudsley	5	University Hosp. Lewisham
6	Queen Elizabeth Hosp.	7	Oxleas	8	Princess Royal University Hosp.	9	Darent Valley Hosp.		



# Young People (18-24yrs) with T2DM in Lambeth and Southwark

## At the start of the pilot (Feb 2023):

- 34 young adults living in Lambeth/ Southwark were known to secondary care:
  - Mean HbA1c: 71mmol/mol (34)
  - BMI: 36kg/m<sup>2</sup> (10)
  - Retinopathy: 10 young adults with more than R2
  - Positive ACR: 6 young adults with persistently high ACR

## For Lambeth specifically:

- Retinal screening attendance: 48%
- 27% were on anti-depressant/antipsychotics



# What is available for this population?

- Same clinical care that is available for an older population
- Same support systems and education programmes like DESMOND, Tier 2 weight management programmes.

# Experience of diabetes in young adults



## Healthcare

- Felt I had failed, was told off
- Lack of support and information
- Very medical, focus largely on medication
- Spoken about not to, directive
- Supportive, cared for, able to open up, understanding, helpful (mostly related to the transition clinic)



## Physical Activity

- Too daunting to go to the gym
- Not enough time or energy to exercise



## Feelings

- Hard to accept diabetes
- Annoyed, frustrated and upset
- Helpless
- Unsupported
- Isolated
- Shocked
- Confused
- Exhausted



## Socialising

- Can't always go out depending on blood sugars
- "Diabetes has made me reclusive"



## Eating/Food

- Binge- or overeating
- Worry about food impacting blood sugar
- Difficult to adjust diet (especially with unhelpful or culturally inappropriate diet advice)
- Gain weight whatever I eat
- Others control my eating



## Openness & Judgement

- Struggled to tell people about diabetes
- Others judge me



# Aim of our Work

- Need to do something different.
- Develop a system that will address the needs of this population.
  - To engage with disadvantaged young adults from minority ethnic groups- culturally and age-appropriate intervention and clinical service.
  - Work with other partners – mental health , youth charities, health and wellbeing practitioners and young people
- 2 projects:
  - A tailored outpatient service for young adults with T2DM in Lambeth (and Southwark)
  - Type 2 Take 2 education and support programme for young adults with T2DM
- After the development and feasibility stage to be able to deliver this for our local population of young people with T2DM as part of their routine care.



# New clinical service- TYA pilot

- New Young Person's type 2 clinics set up both in Lambeth and Southwark in February 2023.
- MDT clinics with the Intermediate Care teams.
- Team consist of Consultant, Intermediate Care DSNs, Dietitian, Health and Wellbeing Practitioner.
- Working with IAPT (no psychology within clinics).
- Proactive approach to booking patients to the service.
- High DNA rate but once engaged good feedback and retention rates good.
- Health and Wellbeing Practitioner doing lot of work outside clinics to engage with patients.
- Between clinic support from a diabetes educator



# Outreach progress to date

Proactive outreach to bring 18-24yr olds into the new young person's community clinics:

- Of the 90 18-24yr olds with T2DM on the eye screening register in May 2024 77% are now being seen under specialist young person's services (compared to ~40% at the start of the pilot)
  - 49 (54.4%) are under either the new Lambeth or Southwark community young person's clinics
  - 19 (21.1%) are under the GSTT/KCH Young Persons services
  - 1 (1.1%) is being seen by other young person's specialist services
  - 3 (3.3%) are being seen under other sub-services within GSTT/KCH
  - 16 (19.3%) are not currently receiving any input from specialist diabetes teams. We are reaching out to their GPs to encourage referrals.



# Impact of the new service

For 41 YA who have been under the specialist services for at least 6 months and have attended at least 2 appointments:

	Pre	Post	p value
HbA1c (mmol/mol)	74	65	0.0199
BMI (kg/m <sup>2</sup> )	34.5	33.7	0.199

At their most recent visit (in addition to oral agents):

- Insulin and/ or GLP-1: 19/41 (46.3%)
- Insulin: 16/41 (39%)
- GLP-1: 7/41 (17.1%)



Young Diabetes  
Empowerment

# Type 2 Take 2

A New Education and Support Programme  
for Young Adults with Type 2 Diabetes



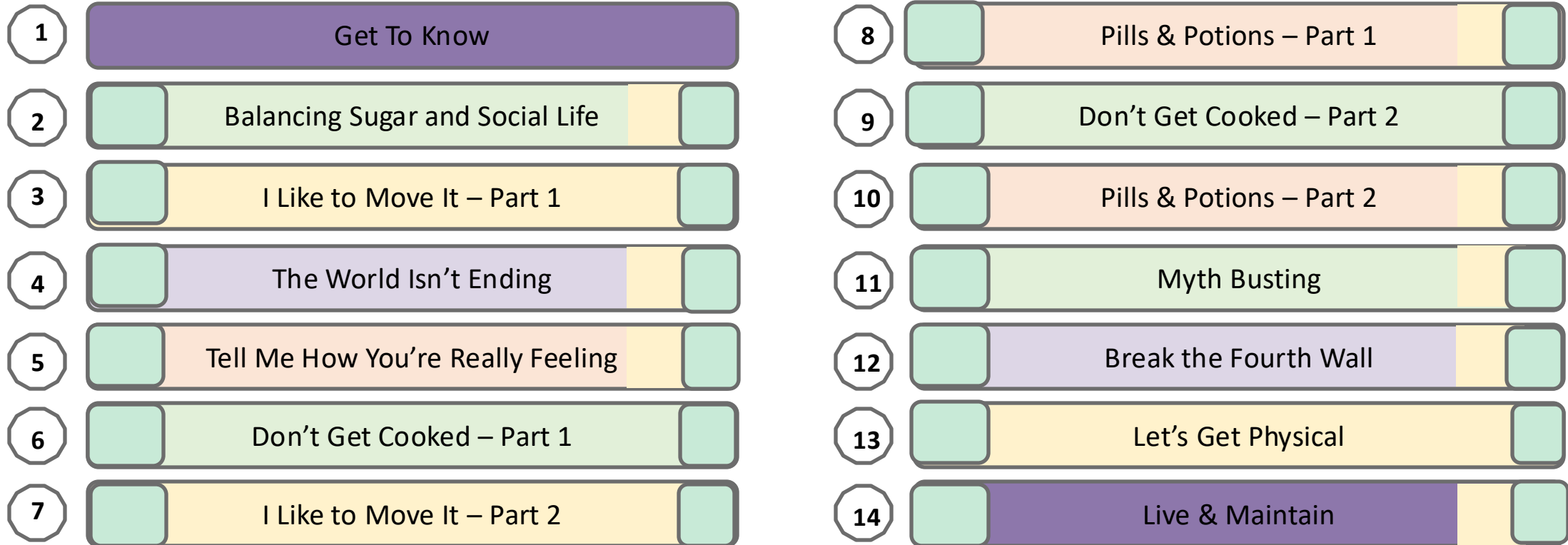


# The Type 2 Take 2 Pilot

- Programme co-designed by young people for young people
- Pilot programme ran from January – July 2024, including 12 participants from Lambeth and Southwark
- Consisted of sessions every 2 weeks run by a multi-disciplinary team, covering nutrition, medication, pregnancy, physical activity and mental wellbeing
- Emphasis on practical sessions, group discussions, goal setting, games, and the use of a step-tracking app – Sweatcoin.
- Funding secured to run a further 2 iterations of the programme in the next year, with the next round due to start in October 2024.



# Outline of the Programme



Goal setting &  
progress reviews  
Sweatcoin

DSN Led Sessions

Psychology

Physical Activity

Nutrition

# Programme Evaluation

- We worked with a research team from King's College London to evaluate the programme.
- This involved a series of qualitative interviews, along with a review of changes in clinic attendance, HbA1c, BMI, blood pressure, and step count.

	Participants who took part in T2T2
Total number of participants	12
Male/female (n)	5 / 7
Age	18-26 years
Co-design/non-codesign (n)	8 / 4

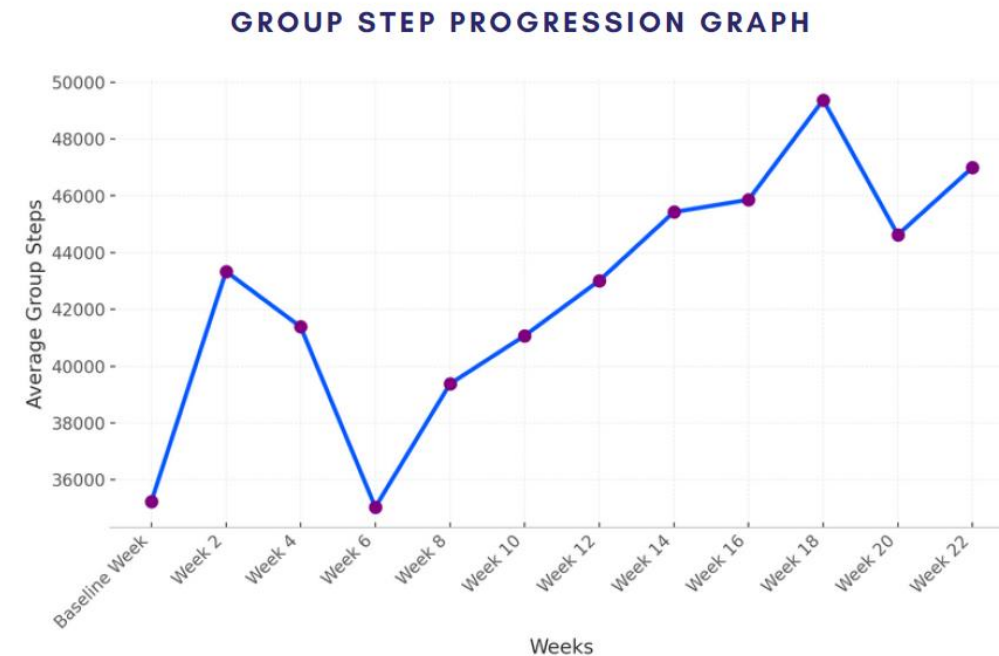
6/12 of the participants attended =>50% of the sessions.

Type 2 Take 2 working group unpublished data



**KHP Diabetes, Endocrinology and Obesity**

**30% increase in mean weekly step count over the 22 weeks of the programme**



Diabetes-related challenges	Impacts of T2T2	Example
Eating/food	<ul style="list-style-type: none"> <li>• Cook more, eat better</li> <li>• Understanding of effect of food on sugar levels</li> <li>• Knowledge of alternative cooking methods</li> </ul>	<p><i>“They help me find out the different ways to cook my food and I start to eat a little bit better and I think as a result I was able to stop taking novorapid. So it was really positive and it helped me a lot.”</i></p>
Physical activity	<ul style="list-style-type: none"> <li>• Walking more</li> <li>• Exercising with others from T2T2</li> </ul>	<p><i>“We’ve done the physio, and now I’m outside I feel encouraged to go for a walk”</i></p> <p><i>“We’ll go to a dance thing [or] for a walk...now if I go out with a diabetic friend we’re both keeping each other accountable”</i></p>
Socialising and isolation	<ul style="list-style-type: none"> <li>• Feel supported</li> <li>• Made friends</li> <li>• More social and less alone</li> <li>• T2T2 has created a clinic community</li> </ul>	<p><i>“Yes, I feel like it's made me more social and also it didn't make me feel so alone, because sometimes it's hard to discuss your medical issues with family or friends, but it's easier to discuss with other people that are going through the same.”</i></p> <p><i>“I think it was a very good experience because Type 2 Take 2 sort of created a sense of unity and community”</i></p>
Acceptance of diabetes	<ul style="list-style-type: none"> <li>• More motivated to address diabetes</li> </ul>	<p><i>“My diabetic control as well, like my sugars, it motivated me to want to actually keep them and get them low”</i></p>
Medicalised, directive or unsupportive care	<ul style="list-style-type: none"> <li>• Happier to go to clinic appointments</li> <li>• Received personalised support</li> <li>• Understand that clinicians care</li> </ul>	<p><i>“It's generic, but also specific. It just felt very much like everyone is here for something different, but it is tailored to me and there's people around me that also want me to win within myself.”</i></p> <p><i>“It just felt like, you know when you dread something, but it's not that bad because you know you're gonna be with other people. Like for me, who don't like appointments... So I think it just created a very light, lovely little community vibe and knowing that the people you're gonna see inside like the nutritionist of the doctors or the nurses like you've already met, it's just like ‘This isn't a like a drag like they genuinely care about me because I know we have spent appointments outside of this, like looking at things or me trying to understand things more.”</i></p>
Taking medication	<ul style="list-style-type: none"> <li>• Better understanding of medication</li> <li>• More consistent taking medication</li> </ul>	<p><i>“In terms of medicine, I'm being more consistent now, and when I was at the programme, it really did encourage me to like do these things...it held me accountable to take my medicine.”</i></p>



# DUK Award

Our co-design work has been recognised by with the 'Young Persons Diabetes Service' award at the 2024 Diabetes UK Professional Conference.

# Next steps

- Funding secured from both Lambeth and Southwark to run a further 2 iterations of the Type 2 Take 2 programme
- The second round of the programme started on 17/10/2024 and will run for 3 months (instead of the 6 months of the pilot programme).
- This will focus on implementing the learnings and recommendations from the pilot programme and will involve a new group of young adults not involved in the initial co-design process.

## *Planned Programme Structure for Iteration 2:*



# Sustainability

- This programme links into two national programmes:
  - The NHSE Transition and Young Adult Diabetes pilot – aiming to expand and improve services for young people aged 16-24 with diabetes (KHP are one of 15 pilot sites in a programme running to Mar 2025).
  - T2Day: Type 2 Diabetes in the Young – NHSE programme to improve care for 18-39 yr-olds with type 2 diabetes
- Our aim is to make targeted care for young adults with type 2 diabetes part of usual care. This includes:
  - Lambeth and Southwark Young Adults Type 2 Diabetes Community Service
  - Type 2 Take 2

# Thank you to:

- Lambeth Diabetes Intermediate Care Team
- Southwark Diabetes Intermediate Care Team
- Guy's and St Thomas' Young Persons Team
- King's College Hospital Transition & Young Adults Teams
- King's Health Partners Diabetes, Endocrinology and Obesity Clinical Academic Partnership
- Lambeth Together
- Partnership Southwark
- NHS England Transition & Young Adults Diabetes pilot