



Chair's bulletin, June 2015

Election 2015

Well the electorate has spoken and..... the new ABCD Secretary is Dinesh Nagi, fresh from his stint as Manpower Co-ordinator. He takes over from Patrick Sharp who has kindly agreed to stay on the committee to lead our Type 1 work stream and to co-ordinate our contribution to 'Medical Care', RCP London's web-based guide to medical specialties. The executive was determined not to let talent slip through its fingers and I am pleased to announce that Karen Adamson has been co-opted to assist Dev Singh in implementing the ABCD Consultant Mentorship Scheme in Scotland, and contributing to our education and development programme; she will also liaise with the Scottish Colleges. We have two new committee members, Marc Atkin and Allison Gallagher, who are most welcome.

There will be a Committee Time Out at RCGP in London on Monday 7th September. This is an important chance to discuss our priority work streams in detail. We will be meeting corporate supporters to brief them about achievements in 2015 and plans for 2016.

Apparently there was another election in May, which has resulted in some changes to the team at the Department of Health. One noteworthy casualty was Adrian Sanders who lost his seat. He was an informed and supportive Chair of the All Party Parliamentary Group for Diabetes. We will soon learn who is to take over this important role.

I waited with bated breath for the announcement of the next top down reorganisation of the English NHS in the Queen's Speech (you can't always believe what is in the manifesto), but it seems as though Simon Stevens' Five Year Forward View has prevailed. Our National Clinical Director has been involved with the Diabetes Prevention Programme, which will eventually do all of us out of jobs for the best possible reason, whereby 100,000 people at high risk of developing type 2 diabetes will be recruited into prevention schemes. The reaction of some people with type 1 diabetes to this announcement demonstrates how marginalised they feel, and how much they resent being lumped together with the stereotypical picture of someone with type 2 diabetes. ABCD continues to champion specialist care for people with type 1 diabetes, and ultimately wants to see the prevention or cure of *all* diabetes, but I do not think that castigating Simon Stevens for sloppy terminology would be helpful.

An initiative that ABCD members should get involved with is the transformational work in 29 Vanguard sites, most notably Greater Manchester. To see if your area is on the list check <http://www.england.nhs.uk/ourwork/futurenhs/5yfv-ch3/new-care-models/>. Transforming care for people with diabetes, often with multiple co-morbidities is a priority, and who better placed to lead on this than you? Even if your area is not yet a vanguard site you may want to contribute to an application by your trust to be an Urgent and Emergency Care vanguard (deadline 15 July).

The other commitment that will impact on us is to a 24/7 NHS. I don't know about you, but I thought I was contributing to this by being physically present all day on the medical admissions units when rostered for weekends, and until 9pm in the evenings and being on-call overnight. Furthermore physicians in my trust

have been volunteered to take on an extra weekend per year to boost ward cover and help with the flow – apparently physician recruitment is particularly difficult at the moment! While this may not sound a big deal I guarantee the managers who dreamed up the scheme do not play cricket. Last weekend -play abandoned, rain; next weekend -not available for selection, dry! Diabetologists do need to consider the paradox of providing more GIM time at the expense of time in the specialty. Specialty in-reach by consultants is still a comparative rarity, although much needed. Patrick Sharp's group will be addressing this in our chapter in 'Medical Care', and I am in discussion with colleagues in Diabetes UK about a combined approach. We will also need to try to define key performance indicators for a diabetes service – not as easy as you might think.

ABCD Meetings

The Joint ABCD-WEDS meeting in Cardiff was a successful venture and an enjoyable event. Unusually for our spring meetings it generated a modest profit, which has been shared. Thanks to the WEDS executive team for their hospitality and support. A record number of abstracts were submitted and the best will be published in BJDVD. In future the best abstracts will be selected for oral presentation at the meeting instead of the winners of the SpR Training Award, who will still receive a prize for their presentation at the annual SpR Meeting. Our next conference is the autumn meeting at RCP London on 5-6th November. Russell Drummond has put together an excellent programme, and registration will open soon. It will again feature the presentation of the Rowan Hillson Safety Award. This year it is for the best UK initiative aimed at preventing hypoglycaemia in hospital. The closing date for entries is 1st September <http://www.diabetologists-abcd.org.uk/Lists/Announcements/DispForm.htm?ID=172&Source=http%3a%2f%2fwww%2ediabetologists%2dabcd%2eorg%2euk%2fhome%2ehtm>

We noted that the Society for Endocrinology Meeting has now been moved to early November. Although it will be in Edinburgh this year we will explore the possibility of a back-to-back meeting for November 2016 to facilitate attendance at both events. Although the timescale proved too ambitious to launch our regionally-based ABCD Post ADA meeting this year, we intend to evaluate the technology in the autumn meeting and go ahead for June 2016. Finally Peter Winocour and I have arranged a joint RCPL meeting 'Managing Multimorbidity' on 18th February 2016, so put that date in your diary too.

ABCD Committee highlights

The ABCD committee mandated me to write to the Chair of NICE to request a second consultation for the controversial update on the Type 2 guideline. I sent a letter co-signed by the RCP Registrar, but to date have not had a reply.

We celebrated the success of the association's journal, BJDVD, but acknowledged the need for a more sustainable business model, as the Board of Trustees had been approached to fund a modest shortfall in year 1, and advertising had been disappointing compared with Practical Diabetes (I did an inventory!). We are giving some serious thought to this, but if anyone has any bright ideas, please share them with Paul Grant and the editorial team editorpg@bjdvd.com.

Aled Roberts told us that reorganisation of care in Wales was being translated from the English, except (mercifully) in IT, as they want to use SCI-DC. Johnny McKnight briefed us about the Scottish Diabetes Action Plan, which was already delivering improvements in type 1 outcomes. Look out for an article about this in BJDVD.

Dev Singh presented a comprehensive proposal to replace the current King's Fund Leadership and Management Course for SpRs with a sustainable course accredited by the Institute of Leadership and Management to support whole of career SpR and consultant development, with optional ILM credits. For 2015 there will be a modified Leadership and Management Course designed and delivered by ABCD and YDEF, while work continues on the new course. We debated the need to charge delegates to attend, and committee was asked to provide ideas to mitigate this.

The Academic Sub-committee has agreed that a meeting in Oxford co-ordinated by Jyothis George was precisely what was required for new investigators and will explore co-badging the next one as an ABCD event. We want to encourage researchers to write and submit reviews and original articles to BJDVD. Travel grants of up to £1000 are available for SpR members of ABCD who have had an abstract accepted for presentation at an overseas meeting. It seems that not everyone was aware, so now you are. Details are on the website.

Andy Macklin will be working on modernising ABCD's communication and information systems to support all we do more efficiently and cost-effectively. Committee approved a modest budget for this.

Committee decided that ABCD should support the AllTrials campaign to have all clinical trials registered and all results reported, so we are one of 574 organisations to have signed the petition.

The Joint Specialty Committee for Endocrinology and Diabetes of the RCP had been charged with identifying a replacement for the long-serving Nick Vaughan on the Tariff and Commissioning Group, hereafter known as the Expert Advisory Group on Commissioning. Several ABCD members expressed an interest in this position, and the JSC eventually nominated Garry Tan from Oxford, who has a track record of commissioning integrated models of care.

In conjunction with Emma Willmott and Peter Hammond I have produced a specification for a National Insulin Pump Network to fill the void left by the demise of NHS Diabetes. I hope this will kick off in 2016.

The BMJ Awards 2015

ABCD took up the opportunity to sponsor the Diabetes category for this prestigious award and Russell Drummond (resplendent in kilt) and I attended the awards ceremony last month. The Diabetes Team of the Year was the South Asian Health Foundation from Birmingham for their education programme. Download the winners brochure from http://static.www.bmj.com/sites/default/files/attachments/resources/2015/05/Awards_2015_bro_lores_fi nal.pdf. A Diabetes Preconception Website from Belfast was shortlisted for the Womens' Health category. ABCD is also supporting the QIC Diabetes Awards 2015.

Mortality and Morbidity Project

Thanks to those of you who submitted root cause analyses for cases of hospital-acquired harms. We identified a relatively small number of themes that explained a depressingly large number of harms. The challenge is to address those themes. We have written to Trusts highlighting the number of insulin prescribing, and administration errors resulting in harm. This does not necessarily improve with the adoption of electronic prescribing systems. We have asked them urgently to reassure themselves that the prescribing and administration of insulin in their trust is fit for purpose. If you have been asked about this, now you know why! We commended the award winning prescription charts on our website http://www.diabetologists-abcd.org.uk/JBDS/insulin_chart_winners.pdf. The next step is to ask each participating trust to identify a theme to address, decide for themselves how to address it, implement an action plan and evaluate it. We hope there will be a session dedicated to the project at DUK PC 2016.

ABCD nationwide audits

A nationwide canagliflozin audit will be launched shortly to accompany the ongoing nationwide dapagliflozin audit. Please start collecting data patient names and data of your patients on canagliflozin in readiness. It helpful, forms for data collection can be found at: http://www.diabetologists-abcd.org.uk/SGLT2/ABCD_Canagliflozin_Audit_Visit1_Form.pdf http://www.diabetologists-abcd.org.uk/SGLT2/ABCD_Canagliflozin_Audit_Follow_Up_Form.pdf The two audits give us a unique opportunity to increase our understanding of the new SGLT2 class of agents in real world use. Bob Ryder gave a demonstration in Cardiff of how to use the online tools to analyse your own data and his presentation is available at <http://www.diabetologists-abcd.org.uk/HowToABCDAudits.pdf>. I encourage all members to join the audits and with regard to the

nationwide degludec audit please contribute your patients however few you have – even if only one or two.

<http://www.diabetologists-abcd.org.uk/n3/n3.htm>

I will sign off now with a reminder to complete and submit your CPD diary by 30th June.

Rob Gregory
Leicester