

<p>Non-Executive Report of the:</p> <p><b>Health and Adults Scrutiny Sub-Committee</b></p> <p>2 September 2019</p>	 <p><b>TOWER HAMLETS</b></p>
<p><b>Report of:</b> Somen Banerjee, Director of Public Health</p>	<p><b>Classification:</b> Unrestricted</p>
<p><b>Report Title: Type 2 Diabetes – Update from Challenge Session</b></p>	

<b>Originating Officer(s)</b>	Chris Lovitt, Associate Director of Public Health Ibrahim Khan, Programme Lead Public Health
<b>Wards affected</b>	All wards

### Executive Summary

Health Overview and Scrutiny undertook a challenge session on type 2 diabetes on the 21<sup>st</sup> March 2019. This report, and attached presentation, updates on progress on the areas that were identified:-

- Prevention
- Early Detection
- Improving treatment outcomes
- Communication and awareness.

### Recommendations:

Health Overview and Scrutiny is recommended to:

1. Note work underway or planned to address the four priorities identified.
2. Comment on any areas which are felt to need additional actions or a different approach.

### 1. REASONS FOR THE DECISIONS

- 1.1 Health Overview and Scrutiny requested a challenge session to review the issue of high levels of type 2 diabetes and actions that can be taken to improve prevention, early detection and treatment outcomes.
- 1.2 The challenge session was undertaken on the 21<sup>st</sup> March 2019. Background information was provided on the issues that had been identified as of interest to the committee, see appendix 1.
- 1.3 Additional work has been undertaken across the council, CCG and NHS to

address the areas identified at the challenge session. This report and associated presentation, appendix 2, presents a summary of the proposed work programme.

## **2. ALTERNATIVE OPTIONS**

- 2.1 Not accept the progress update.
- 2.2 Request amendments to the report.
- 2.3 Request a different approach is taken.

## **3. DETAILS OF THE REPORT**

- 3.1 Health Overview and Scrutiny requested a challenge session on type 2 diabetes having identified this as an issue that particularly affects a large number of Tower Hamlets residents.
- 3.2 The challenge session took place the 21<sup>st</sup> March 2019 and was attended by Dr Chowdhury (Consultant and lead for Diabetes and Metabolism, Barts Health), Diane Barham (Healthwatch Tower Hamlets), Chris Lovitt (Consultant in Public Health, LBTH) and Luise Dawson (Public Health Programme Lead, LBTH).
- 3.3 The challenge session looked at: - a) patient experience from Healthwatch reports b) why there are high rates of type 2 diabetes in Tower Hamlets b) the treatment outcomes that are achieved through effective partnership working and c) what can be undertaken to either put diabetes into remission or prevent the disease.
- 3.4 Although all residents who are obese and/or have a family history of type diabetes are at risk of developing diabetes it was noted that the south Asian community is at significantly higher risk of developing type 2 diabetes.
- 3.5 The committee requested additional information on a) how can diabetes be prevented b) how can diabetes be put into remission and c) how can the estimated 2,000- 3,000 undiagnosed people living with diabetes be diagnosed earlier.
- 3.6 The committee also asked for further enquires to be made into the reported high rate of diabetic emergency admission. Additional analysis was undertaken on this issue which did confirm the discussion on the 21<sup>st</sup> March. The reported high rates are predominately due to better data recording of underlying diabetes in primary care rather than the emergency admission relating to poor clinical management of diabetes.
- 3.7 Following the challenge session additional work has been undertaken to develop local intervention, see appendix 2 for more details s to:-
  - a) improve early diagnosis of diabetes

b) develop proposals for implementing very low calorie diets for diabetes remission.

- 3.8 These proposals are being jointly developed by LBTH Public Health, secondary and primary care leads reporting to the Living Well Tower Hamlets Together work stream.
- 3.9 The additional work being proposed to address diabetes is anticipated to be cost saving in terms of reducing subsequent prescribing costs and associated medical complications. However it can be not be guaranteed that funding will be secured for implementation from the NHS as this will depend on both other priorities, strength of evidence presented and sufficient confidence in the invest to save methodology. A phased implementation may also be proposed with a pilot of the new interventions in 2020/21 pending learning and full implementation in the preceding year.
- 3.10 The committee also requested more information on what actions are being taken to improve treatment outcomes for type 2 diabetes. Appendix 2 give further details the national and regional programmes to improve treatment outcomes for diabetic foot health, retinopathy screening and access to physiological therapies.

#### **4. EQUALITIES IMPLICATIONS**

- 4.1 Diabetes disproportionately affects specific black and minority ethnic groups especially those from a south Asian or black background. Improving treatment outcomes, early diagnosis and remission will help to reduce mortality and morbidity in already disadvantaged communities and so help meet the objectives of One Tower Hamlets and reduce health inequalities.
- 4.2 Residents with advanced diabetes may also have additional morbidity such as limited mobility which is likely to be considered protected characteristics due to long term disability. The proposed early detection and improved treatment outcomes will help to reduce morbidity and hep to reduce the number of residents with a disability.

#### **5. OTHER STATUTORY IMPLICATIONS**

- 5.1 None identified

#### **6. COMMENTS OF THE CHIEF FINANCE OFFICER**

- 6.1 The commissioning of health services for residents with diabetes is the responsibility of the local NHS Clinical Commissioning Group. The proposals contained within this report for additional activities will need to be considered as part of the 2019/20 Tower Hamlets Together commissioning intentions. There can be no guarantee that the proposals will be funded in full or part and will need to be considered against other national and local priorities.

- 6.2 The London Borough of Tower Hamlets' Public Health grant includes funding for the provision of the NHS Health Check programme. This programme already makes significant contribution to diagnosing diabetes but is restricted, by national guidance, to residents aged 40 years to 74 years. Work is taking place locally and nationally to review the local HealthCheck programmes to ensure they continue to be effective at reducing cardio vascular risk, identifying diabetes and refer residents for healthy lifestyle referrals including smoking, weight management etc.
- 6.3 The proposals for additional communications and community activities to raise awareness will to be funded within existing public health budgets or through savings made elsewhere within Public Health.
- 6.4 The prevention and remission proposals contained within this report have significant potential to help reduce medium and long term social care costs associated with the morbidity associated with diabetes and disability.

## **7. COMMENTS OF LEGAL SERVICES**

- 7.1. Sections 244-247 of the National Health Service Act 2006 govern the council's health scrutiny function. It is appropriate for Health Scrutiny Committee to review the work undertaken in response to the diabetes challenge session, to ensure that it is consistent with the council and its health partners' statutory duties. This includes the council's duties under section 2B of the under the National Health Service Act 2006 to take such steps as they consider appropriate for improving the health of the people in their areas.

## **Linked Reports, Appendices and Background Documents**

### **Linked Report**

- Minutes of the 30<sup>th</sup> April 2019 Health Overview and Scrutiny Committee
- <https://democracy.towerhamlets.gov.uk/documents/g8895/Printed%20minutes%2030th-Apr-2019%2018.30%20Health%20Adults%20Scrutiny%20Sub-Committee.pdf?T=1>
- Director of Public Health's Annual Report on Healthy Life Expectancy 2019  
[https://www.towerhamlets.gov.uk/Documents/Public-Health/Tower\\_Hamlets\\_Public\\_Health\\_Report\\_2018.pdf](https://www.towerhamlets.gov.uk/Documents/Public-Health/Tower_Hamlets_Public_Health_Report_2018.pdf)

### **Appendices**

- Appendix 1- Background presentation on Diabetes for 21<sup>st</sup> March 2019 challenge session

## Living with Type 2 diabetes in Tower Hamlets

The best of London in one borough

- Appendix 2- Update summary presentation on diabetes improvement work programme.



## Type 2 Diabetes care and prevention in Tower Hamlets

### Update for the Health Scrutiny Sub Committee

August 2019

Chris Lovitt & Ibrahim Khan

The best of London in one borough

### Local Government Act, 1972 Section 100D (As amended) List of “Background Papers” used in the preparation of this report

- NONE

**Officer contact details for documents:**  
N/A