I have been a Consultant for the last 14 years so not sure if I am able to apply for the Niru Goenka Lecture but I am passionate about Education and better Diabetes care from the word go so hope I might qualify on that front. I really believe that **'The Diabetes Education Roadshow'** is the way forward – the outline below is just a snippet of what I might have to say in a lecture slot. I would really welcome the chance to inspire my fellow UK Diabetologists to do something similar in their patch to help transform Community Diabetes Care.

## **Outline of lecture (500 words)**

10% of the NHS Budget is spent on Diabetes (80% on treating the complications). It does not have to be this way. By the time these patients reach secondary care it is too late.

The Diabetes Education Roadshow (DER) was all about 'Reaching the hard to reach', GPs and Practice nurses who are not the Practice Diabetes lead. In 2022 we were emerging from the Covid Pandemic. Our Primary Care colleagues were feeling particularly hard pressed. Completion rates for the 8 Care processes in Diabetes had fallen. Perhaps too much choice has contributed to prescribing uncertainty. QOF targets don't encourage individualised care. All too often the majority of Diabetes care is left to a solitary practice nurse or GP. It is too prevalent a problem for this to continue to be the case. All at the practice need to be confident in providing pro active care for individuals with Type 2 Diabetes. I am a Secondary Care Consultant with a life long passion for Education and strongly believe that we should make it as easy as possible for people to do the right thing. With this in mind I came up with the idea of a 'Diabetes Education Roadshow'.

The intention of the Diabetes Education Roadshow was to upskill as many Primary Care based HCPs as possible in the basics of good diabetes care. We feel very strongly that there is something very powerful about everyone at the practice hearing the same message. For those 'Hamilton' fans amongst you think back to that song 'the room where it happens'. Frimley South ICB contains 26 practices. All were invited to sign up for the Roadshow at a time, day and date that was convenient for them. Flexibility was key. We did shows at 7.30am, 1pm and multiple times in between to encourage the greatest possible attendance. We kept the message simple and we provided something tangible as a reminder (GP crib card).

We had 100% engagement - all 26 practices signed up for the Roadshow.

300 HCPs attended in total of which 49% GPs, 24% PNs, 5% Pharmacists, 22% allied HCPs.

100% of attendees found it a useful session. The attendees were asked to list their key take home messages with the majority citing 'cannot afford to wait, the first 12 months are key' and 'fat is not inert, weight loss is key'. All of which bodes well for improved future outcomes for our local population with Type 2 Diabetes.

This approach is system working at its best - an hour of transformative education within the practice for all HCPs plus a crib card reminder of what to do and when. We even had a practice secretary attend one roadshow and she is now going to make sure HbA1cs are mentioned in all referral letters to the surgeons! Something for everyone. It has the power to transform Diabetes care. 'Can other specialist teams use the same model' said one GP.

## Inspiration-Ideation-Innovation











Thank you very much for considering my application.