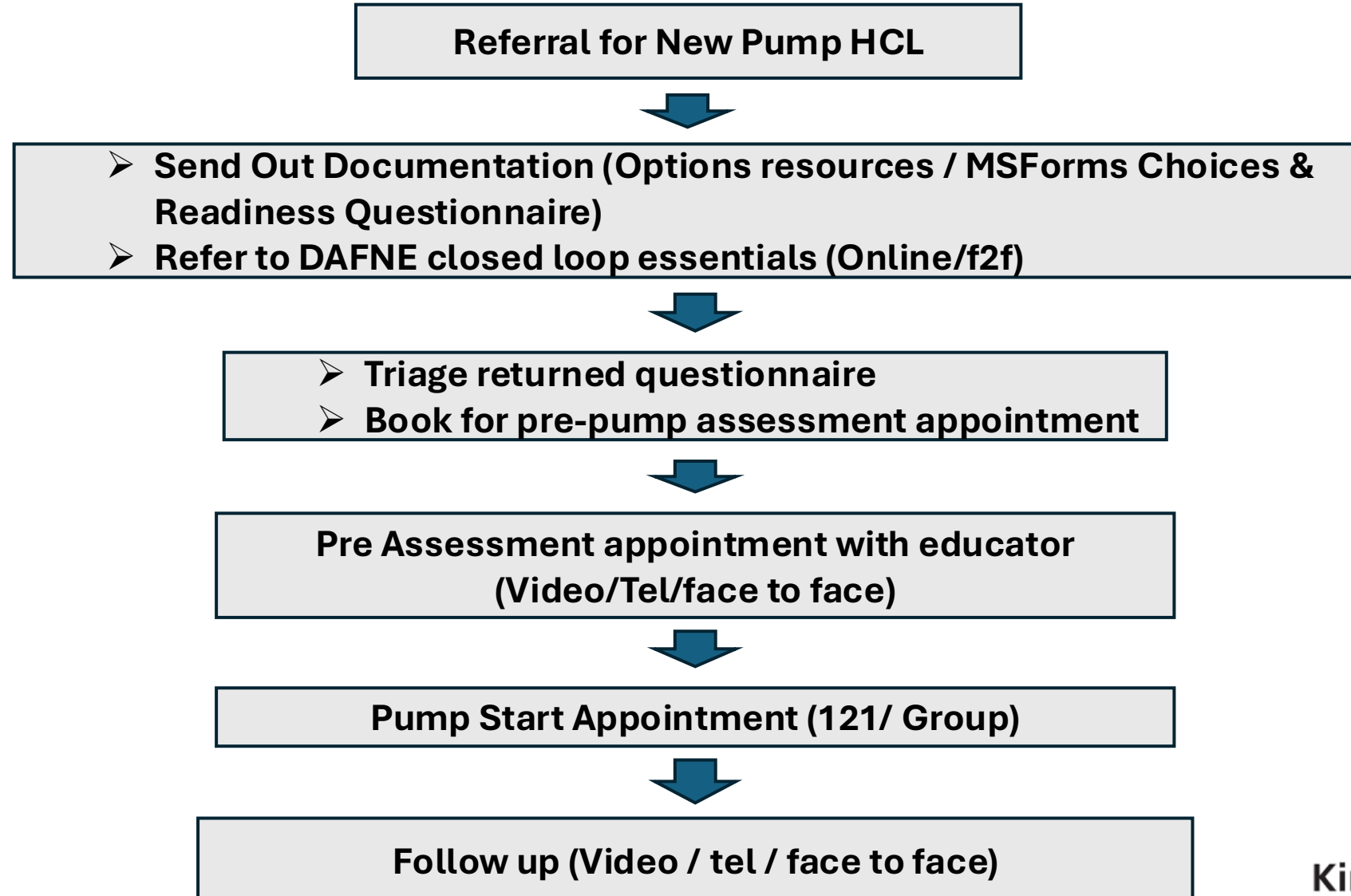


# Type 1 Diabetes Adult Services – Kings College Hospital

T1DM population at Kings- **2300- 2600** (coding)

- **>1100** people using insulin pumps (>90% HCL)
- **134** on active waiting list- paused onboarding 2025
- Capacity to do **20-40** pump starts per month
- Challenges = Follow ups, upgrades and admin
- Use HIN mapping and capacity tool to plan
- Highlighted those with raised HbA1c using CGM software- awareness events
- Upgrades = 80% industry
- News = 100% Kings
- Everyone encouraged to complete DAFNE HCL- auditing now

# Example HCL Pump Referral Pathway - KCH



# Pump Start Appointment - Options

- Face to face, one to one (20%)
  - Additional needs / complexity



- Small group face to face
  - Capacity / staffing
  - Patient connections made



- Large group face to face (10-20)
  - Venue
  - Staffing
  - Rep support
  - Consider follow up review and support arrangements/capacity



- Virtual (Educator / Rep)



# Follow Up

- Educator data review – when / frequency / patient aware
- Telephone / email/ Telemedicine
- Face to face if needed
- Standard schedule (non-complex), adapted for individual and clinical need (example below)
- Team contacts for concerns / issues

		Format	Clinic Codes		
Contacts post pump & HCL start	Clinician		Telephone call	Telemed	F2F
Follow up 2 days post pump start	Educator	Telephone call			
Follow up 1 week post start	Educator	Telephone call			
Follow up 1 month post last review	Educator	Telephone call/ Telemedicine			
Follow up 3 months	Educator	Telemedicine (unless f2f apt already booked)			
Routine follow up as indicated/appropriate in general T1 DM service	Educator / Dr routine	Telemedicine or f2f			
<b>NB If require more intensive or f2f for all follow up contact, to be arranged on individual basis as appropriate for that patient.</b>					