

Introduction

Patient uptake of diabetes structured education (DSE) programmes has been historically low in the UK.

Digitally-enabled programmes have the potential to improve accessibility to such education.

Aims

The aim of this evaluation is to assess weight loss, uptake and retention of a digital structured education programme for adults living with type 2 diabetes.

Methods

Data from adults with type 2 diabetes following digitally-enabled diabetes structured а were collected education programme and to determine weight analysed OSS and engagement over a 12 week programme.

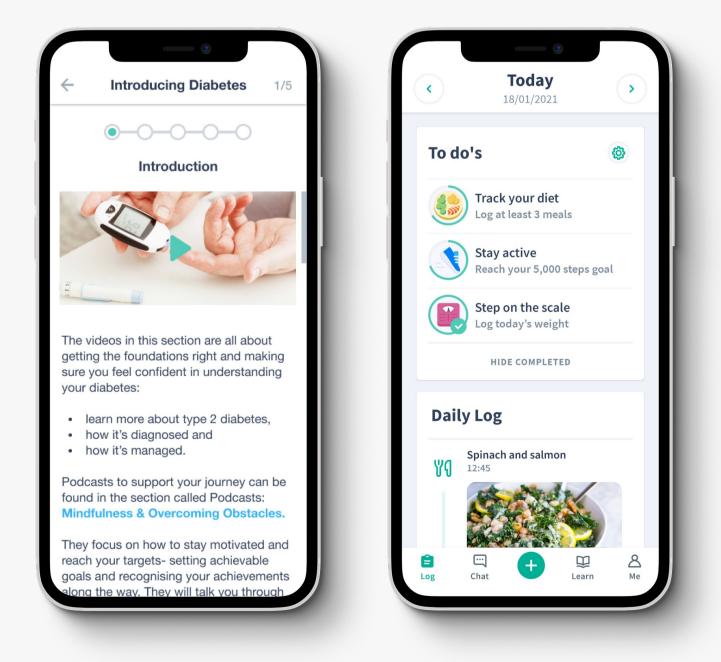


Figure 1 The app encourages self-monitoring, supported by a dietitian. The online Learn portal can be accessed via smartphone, tablet, or desktop.

Service evaluation of Diabetes Structured Education in Kent and Medway

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All patients had access to a smartphone app to monitor their food and fluid intake, activity levels and clinical changes such as weight loss, and access to digital learning materials, had supported through the programme coach.



Figure 2: Bar chart showing the percentage of patients who started the programme and the percentage that completed the programme.

73% of referrals (n=598) started the programme. 73% of starters completed the programme. Average weight loss at 12 weeks is 3.62kg (3.68%)(n=188).

There was an average increase in confidence score (related to diabetes self-management) from 6/10 at baseline to 8/10 at 12 weeks.

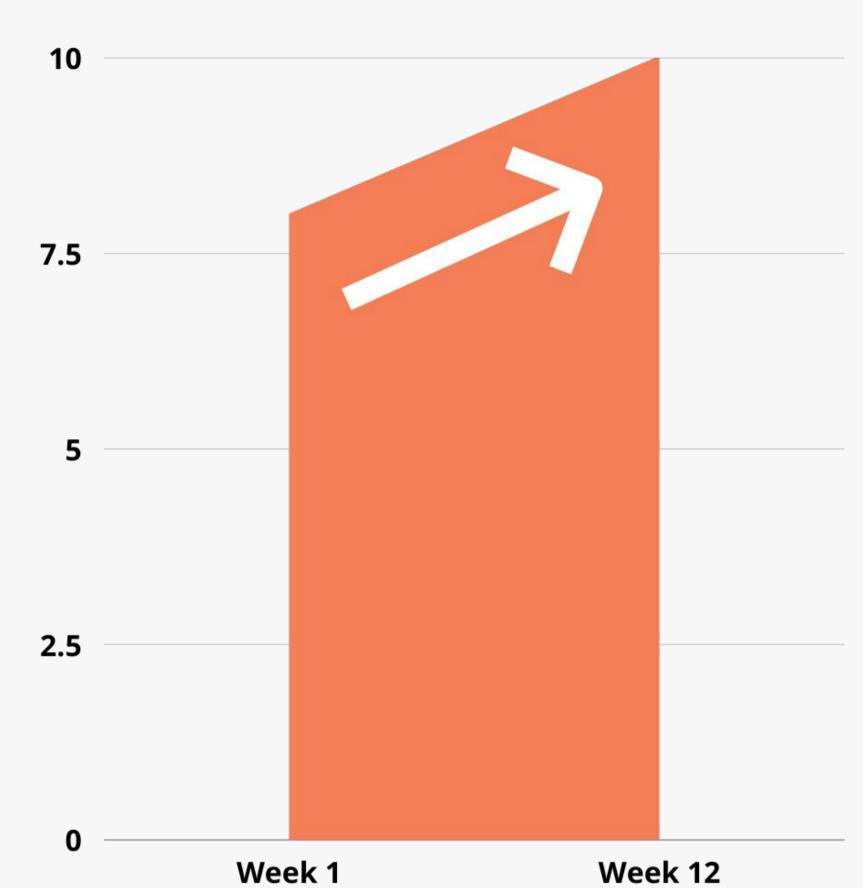


Figure 3: Bar chart to show the average increase in confidence score (related to diabetes self-management) across the course of the programme (12 weeks).

> 528 participants were of working age, demonstrating greater access in those who are usually under-represented at structured education.

A fully remote digitally-enabled type 2 diabetes structured education and behaviour change programme is clinically effective, accessible and engaging and is able to increase confidence in self-management of type 2 diabetes.



Conclusions