

Question	Response
Reasons for/scope of the proposed change	
Is there a service closure if significant reduction in the service?	No
Is there a service change driven primarily by financial, staffing or managerial factors?	No
Does the service change play a part in improving patient experience?	Yes
Does the service change play a part in improving patient outcomes?	Yes
Does the service change play a part in improving clinical quality?	Yes
Does the service change play a part in reducing risk or improving safety?	Yes
Is there a new or additional service to improve health and wellbeing outcomes?	Yes
Is there a service improvement or enhancement?	Yes
Is the change temporary?	Yes
Accessibility and delivery of services	
Is there a change to the location of services?	Yes
Will service relocation improve patient outcomes and experience?	Yes
Will patients and families have further to travel to access services?	No
Is there public transport to relocated services?	N/A
Is there appropriate parking facilities at the relocated service?	N/A
Is there a change to the opening times of the service?	N/A
Will the service be co-located with other health and social care services?	Yes
Will there be a change in access to the service? Will this effect specific sections of the community?	Yes

Will services be delivered using new technology?	Yes
Will additional transport be provided?	N/A
Have the needs of families and carers been taken in to account?	Yes
The effect on patients	
Will more than 25% of patients be negatively affected by the service change?	No
Will the change affect the whole population of the service's catchment area?	N/A
Are a small number of patients affected which represent all the users of the service?	No
Will the service become more viable and accessible?	Yes
Have affected patient's needs been fully taken into account including alternative service provisions which will meet their needs?	N/A
Impact on the wider community and other services	
Will there be a negative impact on the economy and environment of the locality?	N/A
Will there be a significant additional demand on the local transport infrastructure?	N/A
Will other health and social care services will be required to meet additional need due to the service change?	N/A
Will outlying areas be disproportionately affected?	N/A
Have other services have been consulted and support the service change?	Yes
Will there be little local impact as a result of the service change?	N/A
The views of key stakeholders	
Is the service change supported by Healthwatch Croydon?	Yes
Is the service change supported by other key stakeholders?	Yes
Has there been substantial patient, family/carers and staff engagement in developing the service?	Yes
Has the patient/staff engagement been positive and timely?	Yes
The Department of Health's Four Tests for service change	

Is there evidence of strengthened public and patient engagement?	Yes
Is there consistency with current and prospective patient choice?	Yes
Is there a clear clinical evidence base?	Yes
Is there support from clinical commissioners for the proposal?	Yes

Justification/ Explanation
Services supporting people with diabetes and those at risk will be enhanced, with a bigger specialist team working in the community and supporting primary care. In addition, social prescribing and other initiatives supporting self-care and management with peer support will be developed.
The focus of the service redesign and business case is to improve the quality of diabetes prevention and care to reduce short and long term complications
The aim is to integrate services to ensure people involved in diabetes care work as a team, as well as working with the community and voluntary sector to provide lifestyle interventions and support. The model of care will support empowerment by embedding a care planning process that puts people with diabetes firmly in the driving seat of their care.
The business case is predicated on reducing the complications of diabetes; improving diagnosis rates and supporting people at risk of diabetes to stay well.
It focusses on reducing variation and improved outcomes
Improved access to specialist support for general practice will reduce variation, helping more people achieve treatment targets with appropriate medication and lifestyle change.
See above
See above
It is a 5 year model of care
It is expected that enhanced diabetes care will be provided in each GP network area within lead practice/s, whereas the current community diabetes service is only delivered in two Croydon locations.
Able to access enhanced diabetes care closer to home in most cases.
This will be kept under review as we develop plans with providers
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Expected that specialist services based in the community will be based in GP practices within each network area.
It should be easier to access services for care and prevention of diabetes.

Providers will move towards shared records, including patient held care plans using apps to help people manage their diabetes where they wish to use them. There will be online/app based structured education options as well as face-to-face.

This will be kept under review as we develop plans with providers

See below.

Business case predicated on improving quality of care.

It is expected that enhanced diabetes care will be provided in each GP network area within lead practice/s, whereas the current community diabetes service is only delivered in two Croydon locations.

This is a model of care for everyone in Croydon with diabetes and those at risk

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Improved access to services expected.

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Considerable engagement with our workforce from across the system who are involved with caring for people with diabetes and those at risk has taken place, including IAPTS, podiatry,

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Considerable engagement has taken place to develop the model of care, including events with Healthwatch, BME Forum, Diabetes UK as well as workshops with workforce from across the system.

See above

See above

See above

Considerable engagement has taken place to develop the model of care, including events with Healthwatch, BME Forum, Diabetes UK
We have drawn on evidence of reduced complications / improved outcomes from similar models
Model of care agreed at CLG (October)

Please ensure you complete all sections of this form and mark 'N/A' where responses and comments are not appropriate. Please ensure you read the notes on cells marked with a red flag by hovering over the cell.