

Equity of Access: Driving positive change to increase access to glucose sensing technology across Scotland



BREAKING DOWN BARRIERS

For the last five years people living with diabetes using intensive insulin in Scotland have been able to access the FreeStyle Libre system through the NHS. While uptake in the Type 1 population was rapid, concerns were raised by the Scottish Diabetes Group (SDG) about the assumed equity of access across areas with differing levels of deprivation. To understand the barriers to accessibility for people living with diabetes in Scotland, Abbott's local team carried out an audit which combined FreeStyle Libre prescription data with deprivation data from across the Scottish region to validate and quantify the concerns.

FreeStyle Libre prescribing data and deprivation information were combined into a dashboard, which identified data from across all areas with either low uptake against the national average or low uptake in high deprivation areas. High deprivation areas were defined by GP postcodes within quintile 1 of the Scottish Index of Multiple Deprivation (SIMD), and low deprivation as quintile 5. The SIMD is a relative measure of deprivation across 6,976 small areas (called data zones). It looks at the extent to which an area is deprived across seven domains: income, employment, education, health, crime,

housing and access to services. If an area is identified as 'deprived', this can relate to people having a low income, but it can also mean fewer resources or opportunities. The data showed that in 2020 only 49% of people living with diabetes in areas of high deprivation across Scotland had accessed the FreeStyle Libre technology to manage their diabetes, compared with 61% of those living in areas of least deprivation.¹

The Scottish Diabetes Improvement Plan (DIP) 2021-2026 was developed by the Scottish Government through the SDG and NHS Boards, as well as the third sector. This outlines eight priority areas for diabetes care and the SDG and Diabetes Managed Clinical Networks (MCNs), at board level, have been implementing a programme of work to address these priorities, with the aim of improving the quality of care and outcomes for people living with diabetes in Scotland. One of the priority areas is Equity of Access. As such, Abbott worked in conjunction with healthcare professionals to try and support equity of access to glucose sensing technology.

ADDRESSING EQUITY ACCESS CHALLENGES

As part of the vision set out by the Scottish Diabetes Improvement Plan to reduce the impact of deprivation, ethnicity and other factors which can disadvantage diabetes care and outcomes for people, a collaborative approach was needed. This would only be achieved by working alongside NHS Boards, Health and Social Care Partnerships and people living with diabetes to ensure that services evolve to meet the needs of everyone within the Scottish population. This would ensure that diabetes care was at the forefront of developing, delivering and embedding alternative models within everyday clinical practice through integrating pathways with existing services and resources, including social work, mental health services, education and third sector. This progressive integration could address barriers such as digital exclusion, something which improving access to healthcare technology, such as the FreeStyle Libre system, could support.

Images are for illustrative purposes only. Not real patient.
1. Data on file, Abbott Diabetes Care (SIMD 2020).

As a first step towards addressing the Equity of Access challenge, raising awareness was key. The Scottish Diabetes Group presented the data at the bi-annual Scottish Diabetes Managed Clinical Network meeting in May 2021, which included members of each MCN made up of diabetes consultants, diabetes specialist nurses, GPs with a special interest, medicines managers and administration assistants.

In addition, the Abbott team delivered a course of presentations highlighting the existing health inequalities and varied market access issues across the Scottish region from December 2021 to February 2022 to NHS Health Boards across the area, including Glasgow, Lothian, Lanarkshire, Grampian, Ayrshire & Arran, Tayside, Fife, Highland and Forth Valley.

Reasons for deprivation bias such as challenges navigating the healthcare system were discussed with the Health Boards. These could include personal and structural barriers, e.g. financial and transport issues as well as digital exclusion, reinforcing the need for closer collaborative working between the NHS and industry partners.

A FLEXIBLE AND TAILORED APPROACH

To support local healthcare teams in increasing patient access to the FreeStyle Libre system, the local Abbott team tailored patient start-ups in line with each NHS Health Board's needs. These included virtual group starts, face-to-face group starts, individual start-up (if a patient has special needs) and starter packs sent directly to patients' homes.

Following a series of targeted interventions, the data on FreeStyle Libre usage was reanalysed in 2022. This demonstrated a 21% point increase in uptake of the FreeStyle Libre system in people living with diabetes in the most deprived areas of Scotland. This meant that 70% of individuals now had access. For those living in the least deprived areas of Scotland, in 2020 the uptake of the technology was at 61%, and by 2022 this had risen to 64%.¹ This highlights that by improving universal availability and supporting uptake, the initial Equity of Access issue has improved.

The Scottish Diabetes Group said:

“This project is a good example of how collaborative working can help address barriers to accessing healthcare, and in this case diabetes-related technologies. Equity of Access is a key priority for the Scottish diabetes community and working with Abbott allowed us to utilise data on FreeStyle Libre system usage to increase awareness amongst healthcare teams and in turn support localities to implement a number of targeted interventions to increase uptake.

“Diabetes technology increasingly plays a significant role in enabling individuals to better understand the factors that influence their sugars and in turn optimise their diabetes control. This has a positive impact on quality of life and ultimately leads to better health outcomes.”

This example of key partners, including healthcare professionals, working closely together across the healthcare system to identify and address the equity gap within access to diabetes technology highlights the importance of levelling the playing field to ensure those living with diabetes can have access to diabetes care that is personal to them, utilising technology that will ultimately improve their quality of life.



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1. Data on file, Abbott Diabetes Care (SIMD 2020).

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