

Summary report on 2023/24 data – Results at a Glance

The National Paediatric Diabetes Audit measures care outcomes for children and young people with diabetes in England and Wales. It drives quality of care by highlighting areas in need of improvement to local health teams and informs policy makers.

This poster summarises the results reported in the 2023/24 national report, and is based on data from April 2023 to March 2024

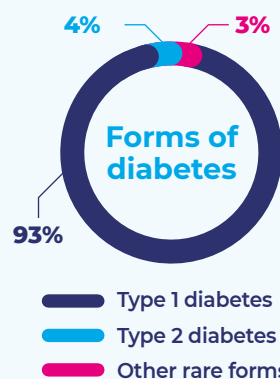
Care from paediatric diabetes services



35,122

children and young people with diabetes were being managed by paediatric diabetes services in England and Wales.

There has been a **16% increase in the number of children and young people with diabetes** receiving care from a paediatric diabetes unit (PDU), compared to before the COVID-19 pandemic in 2019/20.



There were

3233

new diagnoses of **Type 1 diabetes** and

292

new diagnoses of **Type 2 diabetes** being managed in paediatric diabetes clinics.

Care at diagnosis of Type 1 diabetes

88%



received **level three carbohydrate counting education** within a fortnight of diagnosis, compared to 85% in 2022/23.

92%



received **screening for thyroid disease** within three months of diagnosis, compared to 92% in 2022/23.

87%



received **screening for coeliac disease** within three months of diagnosis, compared to 88% in 2022/23.

Completion of recommended health checks[†]



Percentage of young people aged 12 and above who received **all required health checks**:

Type 1 Diabetes

66% (63% in 2022/23)

Type 2 Diabetes

37% (36% in 2022/23)

[†] Please see the full report for details of the outcomes of these health checks.

Average HbA1c

There was an **improvement** (reduction) in national average HbA1c for children and young people with Type 1 diabetes. However, the national average HbA1c for children and young people with Type 2 diabetes **increased**.



Type 1 Diabetes

60.0 mmol/mol (60.5 mmol/mol in 2022/23)

The median HbA1c at PDU level ranged from 55.0 mmol/mol to 70.5 mmol/mol.

Type 2 Diabetes

50.0 mmol/mol (49.3 mmol/mol in 2022/23)

These reductions continue the trend for annual improvements (reductions) in HbA1c for children and young people with Type 1 diabetes, meaning fewer children are at risk of developing diabetes-related complications. However, the mean HbA1c is higher amongst black children and young people, and those living in deprived areas.

Use of diabetes-related technologies (Type 1 diabetes)



55%

were using an **insulin pump**, compared to 45% in 2022/23.



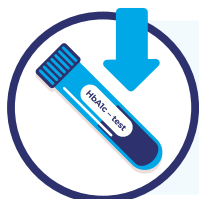
36%

were using a **hybrid closed loop system**, compared to 15% in 2022/23.

79%

were using a **real time continuous glucose monitor (rtCGM)**; either combined with insulin injections or a pump, compared to 49% in 2022/23.

Only 15% were using a **flash glucose monitor** in 2023/24, compared to 37% in 2022/23.



Lower HbA1c was associated with use of a rtCGM or hybrid closed loop. Technology usage is less prevalent amongst ethnic minority groups and those living in deprived areas.

NPDA

National Paediatric Diabetes Audit

Further information and resources

NPDA national reports and recommendations:

The NPDA State of the Nation report for 2023-24, which includes key messages and recommendations based on the data submitted this year, is available at: www.rcpch.ac.uk/resources/npda-annual-reports

Service and region level reporting:

Paediatric diabetes teams can access detailed PDF reports and posters to show their results for this year at: www.rcpch.ac.uk/resources/npda-annual-reports

The NPDA provides quarterly updates on key metrics at PDU, regional network, NHSE region, local health board, ICB and country level.

www.rcpch.ac.uk/resources/NPDA-dashboard

How we use information:



To find out more about how we use data submitted to the NPDA, please see our privacy notice. Please visit: www.rcpch.ac.uk/resources/national-paediatric-diabetes-audit-transparency-open-data or scan the QR code with your phone.

