



Patient Education / Self Management Programmes for People with Long Term Conditions (2021/22)





Reader Information

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Target Audience Commissioners of programmes for long term conditions,

Chief Executives of HSC Board and Trusts in Northern Ireland, voluntary care organisations, health care professionals, academics and social care stakeholders.

Programme for Government commitment, to inform and monitor related policy and to respond to ad-hoc queries and parliamentary/ assembly questions. The bulletin is also used by the Long Term Conditions Alliance Northern Ireland, academics/ researchers, the voluntary sector and those with an interest in long term conditions.

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The statisticians within IAD are outposted from the Northern Ireland Statistics & Research Agency (NISRA) and the statistics are produced in accordance with the principles and protocols set out in the <u>Code of Practice</u> for Official Statistics.

https://www.healthni.gov.uk/topics/doh-statisticsand-research IAD comprises four statistical sections: Hospital Information, Community Information, Public Health Information & Research and Project SupportAnalysis.

This publication is produced by Community Information Branch.

Our Vision and Values

- Provide up-to-date, quality information on children and adult social services and community health;
- To disseminate findings widely with a view to stimulating debate, promoting effective decisionmaking and improvement in service provision; and
- Be an expert voice on social care information.

About Community Information Branch

The purpose of Community Information Branch (CIB) is to promote effective decision making in children and adult social services by providing quality information and analysis.

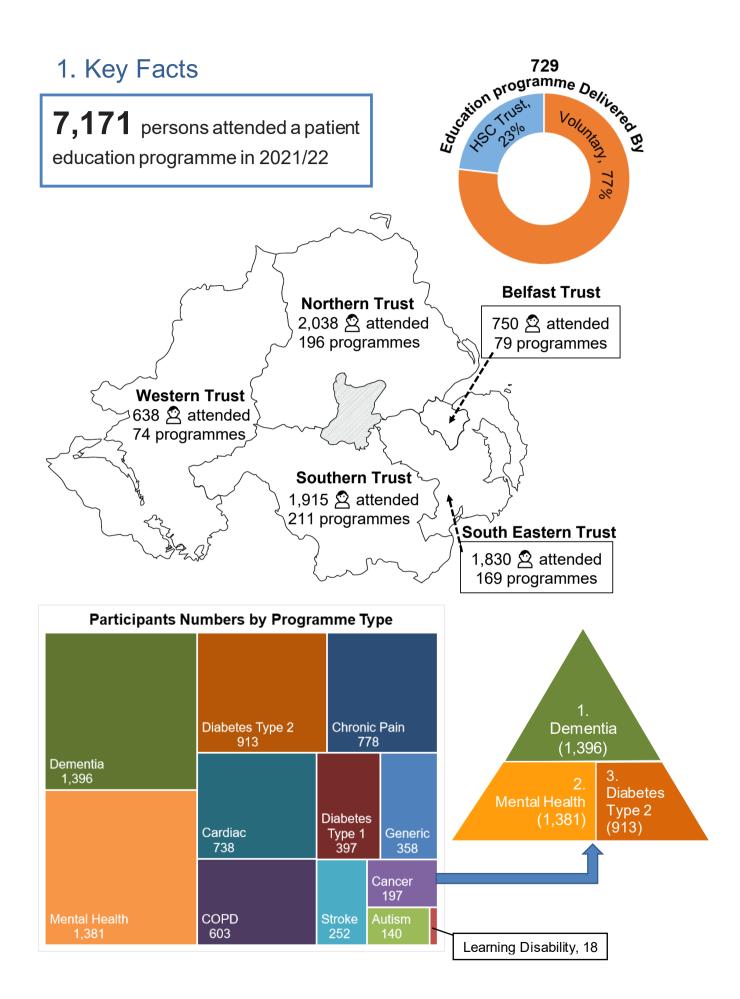
We collect, analyse, and publish a wide range of community information that is used to help monitor the delivery of personal social services policy. Information collected by CIB is used to assess HSC Trust performance, for corporate monitoring, policy evaluation, and to respond to parliamentary/assembly questions.

Information is widely disseminated through a number of regular key statistical publications and ad hoc reports, details of which are available online.

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2. Programmes

COVID-19 impact on Patient Education / Self Management Programmes

Health & Social Care (HSC) Trusts and community and voluntary organisations have reported changes to their provision of Patient Education / Self Management Programmes from 2020 onward due to the impact of COVID-19. The following points indicate the background to these changes and may apply to all, or only a single HSC Trust or community/voluntary organisation. It is not possible to apportion specific issues to specific changes in reported provision, unless specified.

- A number of organisations advised of disruption to programmes due to the impact of COVID-19. Particular issues in programme provision, or data submission include;
 - Belfast HSC Trust figures for 2019/20 figures were imputed based on their 2018/19 return, as a completed 2019/20 return was not received ahead of publication. Belfast HSC Trust did not complete a return ahead of publication in 2020/21 or 2021/22, and due to the likely impact of COVID-19 on programme provision in these years, imputing figures based on prior years would have likely been inaccurate. **Therefore**, **Belfast HSC Trust data is unavailable for 2020/21 and 2021/22**.
 - AWARE was unable to provide a 2019/20 or 2020/21 return, Cancer Focus and Macmillan were unable to provide a 2020/21 or 2021/22 return. Cancer Lifeline was unable to submit a 2020/21 return. This was likely due to COVID-19 pressures.
- Face-to-face patient education / self management programmes were suspended at various points to reduce the risk of contact and transmission of the virus.
- While many patient education / self management programmes continued to be provided virtually during the COVID-19 pandemic, some programmes were less able to continue for various reasons e.g.
 - Staff were redeployed to other areas.
 - Due to staff sickness and absence.
 - Voluntary and community sector programme delivery were impacted by the effect of the COVID-19 pandemic on resources, and fundraising.
 - Some programmes were less suited to virtual attendance than others.
- Some programmes which were previously provided face-to-face in different HSC
 Trust areas, moved to a regional online format. Resultantly, the sum of figures
 presented by HSC Trust area in this publication may not match the total figures
 presented for Northern Ireland.
- There was variation in the number of virtual programmes able to be provided and participants able to attend. In some cases it was recommended that the number of participants per session should be capped, according to the type of programme offered. For other programmes where the number of participants did

not have a limit, a greater number of participants could attend than in previous face-to-face sessions.

- Some programme providers detailed the following reasons for low uptake of virtual patient education / self management programmes:
 - People without suitable internet access or familiarity with technology may not have been able to access the online programmes.
 - Some older people that would usually attend face to face programmes did not engage online.
 - For some programmes, setting up online programme provision took time, and programmes were not available until towards the end of the year.
 - Some people preferred to wait until a face-to-face session was offered in the future
- Some programme providers indicated that their programmes may continue to be run online in the future, even after the restrictions due to the COVID-19 pandemic have eased, if the format has been successful, and if this suits the structure of the programme. Some programme providers noted in 2021/22 that they have incorporated a hybrid structure of online and face to face delivery.

3. Programmes

Programme Frequency by HSC Trust Area

In 2021/22 there were 75 different patient education / self management programmes in place across Northern Ireland. These programmes ran a total of 729 times throughout the year ranging from 211 in the Southern HSC Trust area to 74 in the Western HSC Trust area (Figure 1).

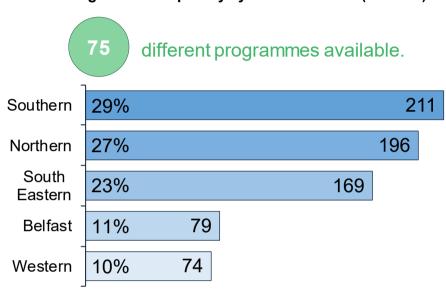


Figure 1 Programme Frequency by HSC Trust Area (2021/22)*

Programme Frequency

Programme Frequency by Programme Type

Between 2017/18 and 2019/20 the frequency of programmes regionally decreased by 10%, reflecting decreases across most HSC Trust areas. Belfast HSC Trust were unable to provide data for the 2020/21 and 2021/22 publications, however some programmes were run in this HSC Trust by other providers. Across the HSC Trusts, reduction in programme frequency reflects the impact of COVID-19 on the services and some programmes returning in person and online in recent years. Regional programme frequency increased in 2021/22 by 56% (263) compared to the prior year. However, due to the impact of COVID-19 on programme scheduling in 2019/20 and 2020/21, and subsequent resource issues experienced by organisations in submitting complete returns, extreme caution should be taken when comparing 2019/20 to 2021/22 data against previous trend data, with the below figures included for illustrative purposes. Please note that ongoing refinement and validation of data in this area may account for some of the annual change displayed in the below trend lines (Figure 2) (Table 1).

^{*} Data should be interpreted with care due to impact of COVID-19 pandemic, please see 'COVID-19 impact on Patient Education / Self Management Programmes' and 'Appendix B Technical Notes' for detail.

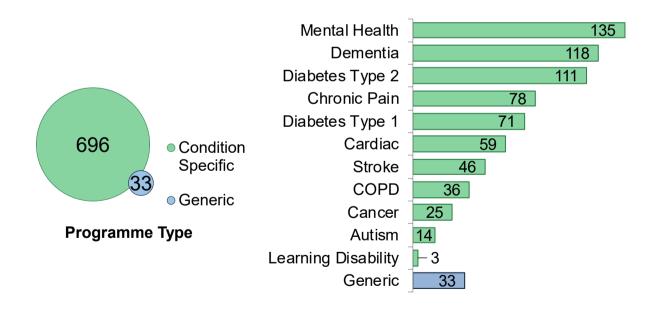
Programmes
400
300
200
100
2017/18 2018/19 2019/20 2020/21 2021/22
Belfast Northern South Eastern Southern Western

Figure 2 Programme Frequency by HSC Trust Area (2017/18 – 2021/22)*

Programme Frequency by Provider Organisation

During 2021/22, of the 729 times that programmes ran, 95% were condition specific and 5% were generic. In comparison to 2020/21 where the most frequent programme was diabetes type 1, the most frequent programme in 2021/22 was mental health (135), accounting for almost one fifth (19%) of all programmes run (Figure 3) (Table 2).

Figure 3 Programme Frequency by Programme Type (2021/22)*



^{*} Data should be interpreted with care due to impact of COVID-19 pandemic, please see 'COVID-19 impact on Patient Education / Self Management Programmes' and 'Appendix B Technical Notes' for detail.

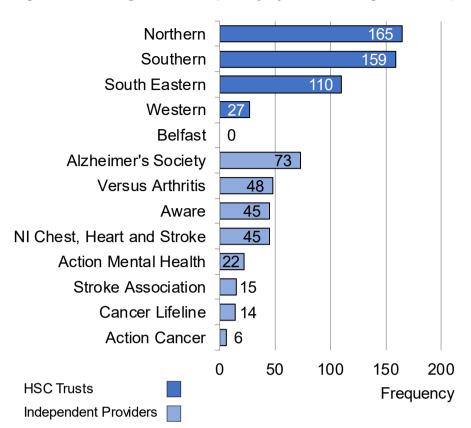


Figure 4 Programme Frequency by Provider Organisation (2021/22)*

Just under two thirds (63%) of programmes run during 2021/22 were provided by HSC Trusts (Figure 4). Of those programmes run by independent providers, Alzheimer's Society provided the most (73) (Table 4).

* Data should be interpreted with care due to impact of COVID-19 pandemic, please see 'COVID-19 impact on Patient Education / Self Management Programmes' and 'Appendix B Technical

Notes' for detail.

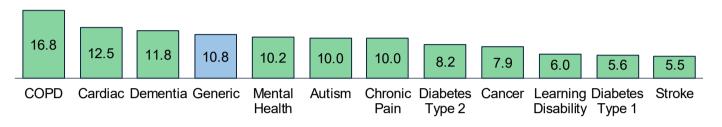
Patient Education / Self Management Programmes for People with Long Term Conditions (2021/22)

4. Conditions

Average Number of Participants per Programme by Condition

The average number of participants per programme, by condition, ranged from almost 17 for those attending COPD programmes, to over 5 for stroke programmes (Figure 5). The overall regional average number of participants per programme was 9.8.

Figure 5 Average Number of Participants per Programme by Condition (2021/22)*



Just under 1 in 5 participants at a patient education / self management programme in 2021/22 attended a mental health specific programme (the most frequent programme in 2021/22).



Number of Participants by Programme Type

Over the last 5 years, large numbers of participants have been continually accessing programmes related to diabetes type 2, cardiac, COPD, and dementia as shown in (Figure 6) (Table 7). However, across the programme types, the reduction in participants reflects the impact of COVID-19 on these services. Due to the impact of COVID-19 on programme scheduling in 2019/20, 2020/21, and also likely in 2021/22, and subsequent resource issues experienced by organisations in submitting complete returns, extreme caution should be taken when comparing 2019/20 to 2021/22 against previous trend data, with the below figures included for illustrative purposes.

^{*} Data should be interpreted with care due to impact of COVID-19 pandemic, please see 'COVID-19 impact on Patient Education / Self Management Programmes' and 'Appendix B Technical Notes' for detail.

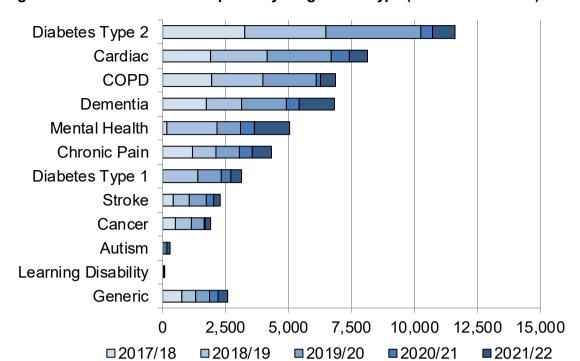


Figure 6 Number of Participants by Programme Type (2017/18 – 2021/22)*1

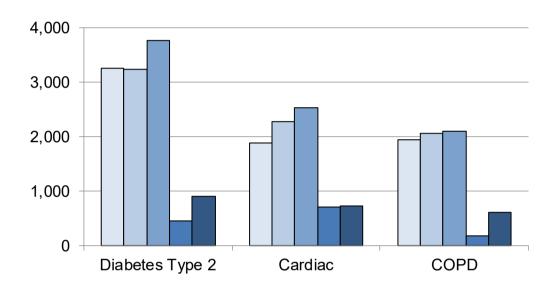
^{*} Data should be interpreted with care due to impact of COVID-19 pandemic, please see 'COVID-19 impact on Patient Education / Self Management Programmes' and 'Appendix B Technical Notes' for detail.

¹ Due to ongoing data validation, figures from 2018/19 were revised in 2019/20. Further information can be found in the Data Presentation section of Appendix B.

Number of Participants by Condition

The annual number of participants attending chronic condition education programmes had remained high in previous years, with ongoing refinement and validation of data in this area accounting for some of the annual variance. Figure 7 shows the regular high attendance in Diabetes Type 2, Cardiac and COPD programmes since 2017/18. However, due to the impact of COVID-19 on programme scheduling in 2019/20, 2020/21, and also likely in 2021/22, and subsequent resource issues experienced by organisations in submitting complete returns, extreme caution should be taken when comparing data from 2019/20 to 2021/22 against previous trend data, with the below figures included for illustrative purposes.



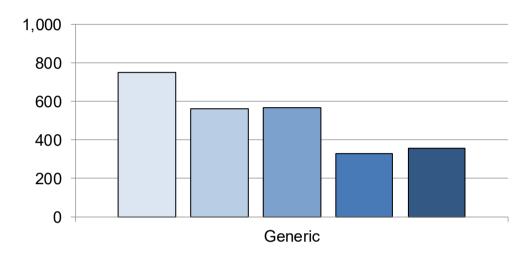


^{*} Data should be interpreted with care due to impact of COVID-19 pandemic, please see 'COVID-19 impact on Patient Education / Self Management Programmes' and 'Appendix B Technical Notes' for detail.

² Due to ongoing data validation, figures from 2018/19 were revised in 2019/20. Further information can be found in the Data Presentation section of Appendix B.

Over the last 5 years, an average of 513 participants have attended generic education programmes (Figure 8) (Table 7). Likely reasons for this may include greater derived benefit from tailored educational programmes. As before, due to the impact of COVID-19 on programme scheduling in 2019/20, 2020/21, and also likely in 2021/22, and subsequent resource issues experienced by organisations in submitting complete returns, extreme caution should be taken when comparing data from 2019/20 to 2021/22 against previous trend data, with the below figures included for illustrative purposes.





Data should be interpreted with care due to impact of COVID-19 pandemic, please see 'COVID-19 impact on Patient Education / Self Management Programmes' and 'Appendix B Technical Notes' for detail.

³ Due to ongoing data validation, figures from 2018/19 were revised in 2019/20. Further information can be found in the Data Presentation section of Appendix B.

5. Participants

Participant Numbers by HSC Trust Area

In 2021/22, 7,171 participants attended a patient education / self management programme ranging from 2,038 in the Northern HSC Trust area to 638 in the Western HSC Trust area (Figure 9) (Table 5). Belfast HSC Trust were unable to provide data for the 2021/22 publication, however some programmes were run in this HSC Trust by other providers. Data should be interpreted with care due to impact of COVID-19 pandemic, please see Technical Guidance for detail.

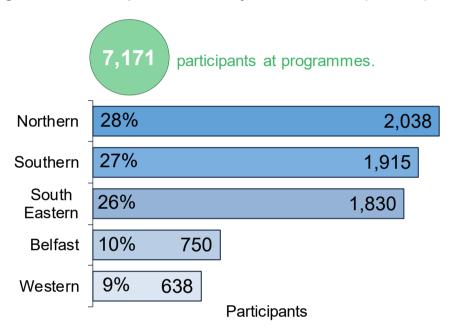


Figure 9 Participant Numbers by HSC Trust Area (2021/22)*

Approximately 1 in 4 of all participants attended a patient education / self management programme in the Northern Trust area in 2021/22



Between 2017/18 and 2019/20 participant numbers regionally increased by 16% (2,025), reflecting small increases across all HSC Trust areas, apart from Northern HSC Trust which recorded a decrease of 7% (-250). Belfast HSC Trust were unable to provide data for the 2020/21 and 2021/22 publications, however some programmes were run in this HSC Trust by other providers. Across the HSC Trusts, reduction in participant numbers reflects the impact of COVID-19 on the services. Regional participant numbers increased in 2021/22 by 74% (3,050) compared to the prior year. However, due to the impact of COVID-19 on programme scheduling from 2019/20 to 2021/22, and subsequent resource issues experienced by organisations in submitting complete returns, as well as the introduction of more online programmes, extreme caution should be taken when comparing 2019/20 to 2021/22 against previous trend data, with the below figures

^{*} Data should be interpreted with care due to impact of COVID-19 pandemic, please see 'COVID-19 impact on Patient Education / Self Management Programmes' and 'Appendix B Technical Notes' for detail.

included for illustrative purposes. Please note that ongoing refinement and validation of data in this area may account for some of the annual change displayed in the below trend lines. (Figure 10) (Table 6).

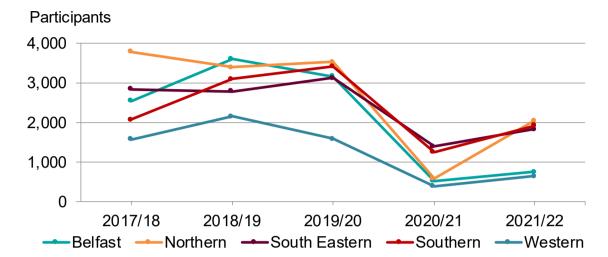


Figure 10 Participant Numbers by HSC Trust Area (2017/18 – 2021/22)*4

Participant Numbers by HSC Provider

Of the 7,171 participants, 80% were attending a programme delivered by HSC Trusts and 20% a programme by independent sector organisations. In 2021/22, participant numbers at programmes provided by HSC Trusts (1,411) showed a 48% (-1,287) decrease over the number of participants in 2020/21 (2,698). The Northern Trust had the greatest number of participants (1,481), of all the HSC Trust providers, and 21% of the total regional participant numbers. Although data should be interpreted with care due to impact of COVID-19 pandemic, please see Technical Guidance for detail. In addition, Belfast HSC Trust were unable to provide data for the 2021/22 publication.

While the Alzheimer's Society had the greatest number of participants (941), of all the independent sector providers, and 13% of the total regional participant numbers (Figure 11) (Table 9), it should be noted that some of the Alzheimer's Society programmes are public facing, with multiple members of the same family attending, resulting in higher attendance. Some fluctuation in participant numbers since 2016/17 can be attributed to the reporting lag/data validation in capturing the spectrum of emerging educational programmes.

^{*} Data should be interpreted with care due to impact of COVID-19 pandemic, please see 'COVID-19 impact on Patient Education / Self Management Programmes' and 'Appendix B Technical Notes' for detail.

⁴ Due to ongoing data validation, figures from 2018/19 were revised in 2019/20. Further information can be found in the Data Presentation section of Appendix B.

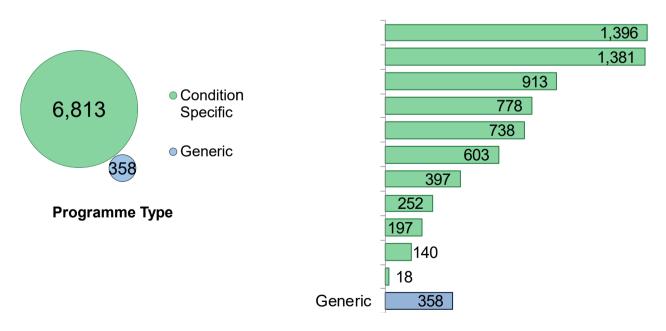
Northern 1 481 Southern HSC Trusts South Eastern 382 Western 262 Belfast 5.760 Independent Alzheimer's Society 941 Providers Versus Arthritis 538 NI Chest. Heart and Stroke 396 369 Aware **Programme Provider** Action Mental Health 162 Cancer Lifeline 100 Action Cancer 61 Stroke Association 127 0 500 1,000 1,500 Frequency

Figure 11 Participant Numbers by Provider Organisation (2021/22)*

Participant Numbers by Programme Type

Of the 7,171 participants at programmes, 95% were attending a condition specific programme with 5% attending a generic programme. Figure 12 shows that the programme types with the most participants were demential programmes (19%) and mental health programmes (19%).





^{*} Data should be interpreted with care due to impact of COVID-19 pandemic, please see 'COVID-19 impact on Patient Education / Self Management Programmes' and 'Appendix B Technical Notes' for detail.

Participants by Programme Delivery

Prior to 2020/21, the top 6 conditions by participant numbers had programmes available across all 5 HSC Trust areas with the exception of cardiac specific programmes reported in the Western HSC Trust area. However, due to the impact of the COVID-19 pandemic, this year the only conditions of the 2021/22 top 6 with a programme available in all HSC Trusts were mental health and chronic pain. Cardiac programmes were only recorded in South Eastern HSC Trust⁵. There were no autism, chronic pain, dementia, learning disability or mental health programmes were recorded for Western HSC Trust. Programmes for the other top 6 programmes ran across in other HSC Trusts, with the exception of Belfast HSC Trust, where no COPD or Diabetes Type 2 programmes were recorded. (Table 6).

Data should be interpreted with care due to impact of COVID-19 pandemic, please see Technical Guidance for detail. Belfast HSC Trust were unable to provide data for the 2021/22 publication, however some programmes were run in this HSC Trust by other providers.

In 2021/22, 63% (4,486) of participants attended a programme that was either clinically or professionally led; this was higher than the proportion in 2020/21 (58%). Participants at jointly led programmes accounted for 27% (1,897) of the total, with the remaining 11% (788) of participants attending a programme that was peer led.

Of the participants at clinically or professionally led programmes in 2021/22, 96% (4,305) were attending a condition specific programme. 97% (1,841) of those at a jointly led programme and 85% (121) at a peer led programme (Table 9) were attending condition specific programmes.

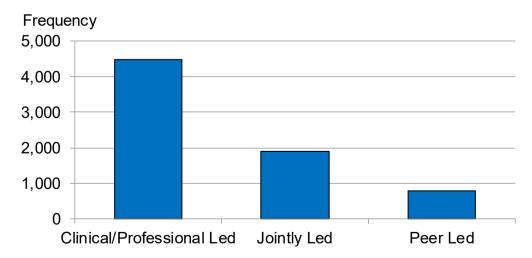


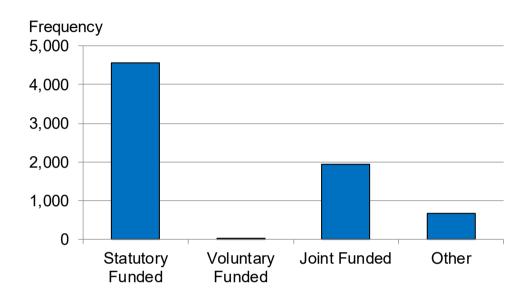
Figure 13 Number of Participants by Programme Delivery (2021/22)*

⁵ Northern HSC Trust cardiac programmes were not included in 2021/22 as they were delivered on a one-to-one basis. This type of programme delivery is typically not included in the patient education programme criteria.

Participants by Funding Arrangement

In 2021/22, 64% (4,557) of participants attended a programme that was statutory funded, a percentage decrease of 1% (-45) since the previous year. Jointly funded programmes were provided for 27% of participants; with <1% of participants each attending voluntary funded programmes and 10% at programmes utilising other funding arrangements⁵ (Table 10).





^{*} Data should be interpreted with care due to impact of COVID-19 pandemic, please see 'COVID-19 impact on Patient Education / Self Management Programmes' and 'Appendix B Technical Notes' for detail.

⁶ Funding may be provided through other sources such as Cooperation and Working Together (CAWT) - a partnership between the Health and Social Care Services in Northern Ireland and the Republic of Ireland which facilitates cross border collaborative working in health and social care.

6. Tables

Table 1: Programme Frequency by HSC Trust Area (2017/18 -2021/22)1, 2

HSC Trust	2017/18	2018/19	2019/20	2020/21	2021/22
Belfast	306	317	305	63	79
Northern	368	267	249	76	196
South Eastern	291	260	288	138	169
Southern	227	221	240	135	211
Western	197	169	163	54	74
Northern Ireland	1,389	1,234	1,245	466	729

¹ Please note that a number of organisations advised of disruption to programmes due to the impact of COVID-19.

⁻ Belfast HSC Trust figures for 2019/20 figures were imputed based on their 2018/19 return, as a completed 2019/20 return was not received ahead of publication. Belfast HSC Trust did not complete a return ahead of publication in 2020/21 and 2021/22, and due to the likely impact of COVID-19 on programme provision in these years, imputing figures based on prior years would have been inappropriate. Therefore, Belfast HSC Trust data is unavailable for 2020/21 and 2021/22; however some programmes were run in this HSC Trust by other providers.

⁻ In 2019/20, it wasn't possible for WHSCT to submit a validated return ahead of the publication deadline so their diabetes programmes were estimated based on previous returns.

⁻ AWARE was unable to provide a 2019/20 return. AWARE, Cancer Focus, Cancer Lifeline and Macmillan Cancer Support were unable to submit a 2020/21 return due to COVID-19 pressures, and Cancer Focus, and Macmillan Cancer Support were unable to submit a return in 2021/22.

⁻ Northern HSC Trust cardiac programmes were not included in 2021/22 as they were delivered on a one-to-one basis. This type of programme delivery is typically not included in the patient education programme criteria.

⁻ South Eastern HSC Trust did not record programme numbers for their pulmonary rehabilitation programmes in 2021/22.

⁻ A number of organisations advised of disruption to programmes due to the impact of COVID-19. For many organisations there was a reduction in the number of programmes provided and participants attending. Please see 'COVID-19 impact on Patient Education / Self Management Programmes' and 'Appendix B Technical Notes' for detail.

² As some information was not available by HSC Trust area, or programmes have been provided regionally, the sum of HSC Trust area figures may not match the total figure for Northern Ireland. Further information can be found in the Data Presentation section of Appendix B.

Table 2: Programme Frequency by Programme Type and HSC Trust Area (2021/22)³

Programme Type	Belfast	Northern	South Eastern	Southern	Western	Total
Condition Specific	78	191	167	196	64	696
Autism	-	6	8	-	-	14
Cancer	17	5	1	1	1	25
Cardiac	-	-	59	-	-	59
Chronic Pain	18	16	12	16	16	78
COPD	-	5	-	25	6	36
Dementia	24	49	31	14	-	118
Diabetes Type 1	-	27	11	18	15	71
Diabetes Type 2	-	49	32	24	6	111
Learning Disability	-	-	-	3	-	3
Mental Health	11	25	7	79	13	135
Stroke	8	9	6	16	7	46
Generic	1	5	2	15	10	33
Total	79	196	169	211	74	729

³ Please note that a number of organisations advised of disruption to programmes due to the impact of COVID-19.

 $Please\ see\ `COVID-19\ impact\ on\ Patient\ Education\ /\ Self\ Management\ Programmes'\ and\ `Appendix\ B\ Technical\ Notes'\ for\ detail.$

⁻ Belfast HSC Trust figures for 2019/20 figures were imputed based on their 2018/19 return, as a completed 2019/20 return was not received ahead of publication. Belfast HSC Trust did not complete a return ahead of publication in 2020/21 and 2021/22, and due to the likely impact of COVID-19 on programme provision in these years, imputing figures based on prior years would have been inappropriate. Therefore, Belfast HSC Trust data is unavailable for 2020/21 and 2021/22; however some programmes were run in this HSC Trust by other providers.

⁻ In 2019/20, it wasn't possible for WHSCT to submit a validated return ahead of the publication deadline so their diabetes programmes were estimated based on previous returns.

⁻ AWARE was unable to provide a 2019/20 return. AWARE, Cancer Focus, Cancer Lifeline and Macmillan Cancer Support were unable to submit a 2020/21 return due to COVID-19 pressures, and Cancer Focus, and Macmillan Cancer Support were unable to submit a return in 2021/22.

⁻ Northern HSC Trust cardiac programmes were not included in 2021/22 as they were delivered on a one-to-one basis. This type of programme delivery is typically not included in the patient education programme criteria.

⁻ South Eastern HSC Trust did not record programme numbers for their pulmonary rehabilitation programmes in 2021/22.

⁻ A number of organisations advised of disruption to programmes due to the impact of COVID-19. For many organisations there was a reduction in the number of programmes provided and participants attending.

Table 3: Frequency of Programmes by Type and HSC Trust Area (2017/18-2022/22) – Condition Specific⁴, ⁵

HSC Trust	2017/18	2018/19	2019/20	2020/21	2021/22
Belfast	298	312	301	58	78
Northern	361	267	247	71	191
South Eastern	288	257	286	136	167
Southern	200	206	220	120	196
Western	171	147	152	46	64
Northern Ireland	1,318	1,189	1,206	431	696

⁴ Please note that a number of organisations advised of disruption to programmes due to the impact of COVID-19.

⁻ Belfast HSC Trust figures for 2019/20 figures were imputed based on their 2018/19 return, as a completed 2019/20 return was not received ahead of publication. Belfast HSC Trust did not complete a return ahead of publication in 2020/21 and 2021/22, and due to the likely impact of COVID-19 on programme provision in these years, imputing figures based on prior years would have been inappropriate. Therefore, Belfast HSC Trust data is unavailable for 2020/21 and 2021/22; however some programmes were run in this HSC Trust by other providers.

⁻ SEHSCT were unable to provide a complete data return of cardiac programmes ahead of publication in 2019/20, however in 2020/21 a full cardiac return was completed.

⁻ In 2019/20, it wasn't possible for WHSCT to submit a validated return ahead of the publication deadline so their diabetes programmes were estimated based on previous returns.

⁻ AWARE was unable to provide a 2019/20 return. AWARE, Cancer Focus, Cancer Lifeline and Macmillan Cancer Support were unable to submit a 2020/21 return due to COVID-19 pressures, and Cancer Focus, and Macmillan Cancer Support were unable to submit a return in 2021/22.

⁻ Northern HSC Trust cardiac programmes were not included in 2021/22 as they were delivered on a one-to-one basis. This type of programme delivery is typically not included in the patient education programme criteria.

⁻ South Eastern HSC Trust did not record programme numbers for their pulmonary rehabilitation programmes in 2021/22.

⁻ A number of organisations advised of disruption to programmes due to the impact of COVID-19. For many organisations there was a reduction in the number of programmes provided and participants attending. Please see 'COVID-19 impact on Patient Education / Self Management Programmes' and 'Appendix B Technical Notes' for detail.

⁵ As some information was not available by HSC Trust area, or programmes have been provided regionally, the sum of HSC Trust area figures may not match the total figure for Northern Ireland. Further information can be found in the Data Presentation section of Appendix B.

Table 4: Frequency of Programmes by Type and HSC Trust Area (2017/18-2021/22) – Generic⁷

HSC Trust	2017/18	2018/19	2019/20	2020/21	2021/22
Belfast	8	5	4	5	5
Northern	7	-	2	5	5
South Eastern	3	3	2	2	2
Southern	27	15	20	15	15
Western	26	22	11	8	8
Northern Ireland	71	45	39	35	35

⁷ Please note that a number of organisations advised of disruption to programmes due to the impact of COVID-19

⁻ Belfast HSC Trust figures for 2019/20 figures were imputed based on their 2018/19 return, as a completed 2019/20 return was not received ahead of publication. Belfast HSC Trust did not complete a return ahead of publication in 2020/21 and 2021/22, and due to the likely impact of COVID-19 on programme provision in these years, imputing figures based on prior years would have been inappropriate. Therefore, Belfast HSC Trust data is unavailable for 2020/21 and 2021/22; however some programmes were run in this HSC Trust by other providers.

⁻ A number of organisations advised of disruption to programmes due to the impact of COVID-19. For many organisations there was a reduction in the number of programmes provided and participants attending. Please see 'COVID-19 impact on Patient Education / Self Management Programmes' and 'Appendix B Technical Notes' for detail.

Table 5: Programme Frequency by Provider Organisation (2021/22)8

Provider Organisation	2021/22
Action Cancer	6
Action Mental Health	22
Alzheimer's Society	73
Aware	45
Cancer Lifeline	14
NI Chest, Heart and Stroke	45
Stroke Association	15
Versus Arthritis	48
NHSCT	165
SEHSCT	110
SHSCT	159
WHSCT	27
Total	729

⁸ Please note that a number of organisations advised of disruption to programmes due to the impact of COVID-19.

⁻ Belfast HSC Trust figures for 2019/20 figures were imputed based on their 2018/19 return, as a completed 2019/20 return was not received ahead of publication. Belfast HSC Trust did not complete a return ahead of publication in 2020/21 and 2021/22, and due to the likely impact of COVID-19 on programme provision in these years, imputing figures based on prior years would have been inappropriate. Therefore, Belfast HSC Trust data is unavailable for 2020/21 and 2021/22; however some programmes were run in this HSC Trust by other providers.

⁻ AWARE was unable to provide a 2019/20 return. AWARE, Cancer Focus, Cancer Lifeline and Macmillan Cancer Support were unable to submit a 2020/21 return due to COVID-19 pressures, and Cancer Focus, and Macmillan Cancer Support were unable to submit a return in 2021/22.

⁻ Northern HSC Trust cardiac programmes were not included in 2021/22 as they were delivered on a one-to-one basis. This type of programme delivery is typically not included in the patient education programme criteria

⁻ South Eastern HSC Trust did not record programme numbers for their pulmonary rehabilitation programmes in 2021/22.

⁻ A number of organisations advised of disruption to programmes due to the impact of COVID-19. For many organisations there was a reduction in the number of programmes provided and participants attending. Please see 'COVID-19 impact on Patient Education / Self Management Programmes' and 'Appendix B Technical Notes' for detail.

Table 6: Participants Numbers by HSC Trust Area (2017/18-2021/22)9, 10

HSC Trust	2017/18	2018/19	2019/20	2020/21	2021/22
Belfast	2,541	3,602	3,163	515	750
Northern	3,778	3,397	3,528	582	2,038
South Eastern	2,842	2,778	3,128	1,395	1,830
Southern	2,070	3,101	3,414	1,246	1,915
Western	1,566	2,155	1,589	383	638
Northern Ireland	12,797	15,033	14,822	4,121	7,171

⁹ Please note that a number of organisations advised of disruption to programmes due to the impact of COVID-19.

⁻ Belfast HSC Trust figures for 2019/20 figures were imputed based on their 2018/19 return, as a completed 2019/20 return was not received ahead of publication. Belfast HSC Trust did not complete a return ahead of publication in 2020/21 and 2021/22, and due to the likely impact of COVID-19 on programme provision in these years, imputing figures based on prior years would have been inappropriate. Therefore, Belfast HSC Trust data is unavailable for 2020/21 and 2021/22; however some programmes were run in this HSC Trust by other providers.

⁻ SEHSCT were unable to provide a complete data return of cardiac programmes ahead of publication in 2019/20, however in 2020/21 a full cardiac return was completed.

⁻ In 2019/20, it wasn't possible for WHSCT to submit a validated return ahead of the publication deadline so their diabetes programmes were estimated based on previous returns.

⁻ AWARE was unable to provide a 2019/20 return. AWARE, Cancer Focus, Cancer Lifeline and Macmillan Cancer Support were unable to submit a 2020/21 return due to COVID-19 pressures, and Cancer Focus, and Macmillan Cancer Support were unable to submit a return in 2021/22.

⁻ Northern HSC Trust cardiac programmes were not included in 2021/22 as they were delivered on a one-to-one basis. This type of programme delivery is typically not included in the patient education programme criteria.

⁻ Northern HSC Trust did not record participant numbers for their autism programme 'Emotional Regulation' in 2021/22.

⁻ A number of organisations advised of disruption to programmes due to the impact of COVID-19. For many organisations there was a reduction in the number of programmes provided and participants attending. Please see 'COVID-19 impact on Patient Education / Self Management Programmes' and 'Appendix B Technical Notes' for detail.

¹⁰ Due to ongoing data validation, figures for 2018/19 have been revised. Further information can be found in the Technical notes in Appendix B.

Table 7: Participants Numbers by Programme Type and HSC Trust Area (2021/22)¹¹

Programme Type	Belfast	Northern	South Eastern	Southern	Western	Total
Condition Specific	737	1,969	1,806	1,765	536	6,813
Autism	-	9	131	-	-	140
Cancer	126	36	11	14	10	197
Cardiac	_	-	738	-	-	738
Chronic Pain	166	211	168	127	106	778
COPD	-	41	216	285	61	603
Dementia	306	778	145	167	-	1,396
Diabetes Type 1	-	134	86	85	92	397
Diabetes Type 2	-	372	211	221	109	913
Learning Disability	-	-	-	18	-	18
Mental Health	99	357	62	757	106	1,381
Stroke	40	31	38	91	52	252
Generic	13	69	24	150	102	358
Total	750	2,038	1,830	1,915	638	7,171

¹¹ Please note that a number of organisations advised of disruption to programmes due to the impact of COVID-19.

⁻ Belfast HSC Trust figures for 2019/20 figures were imputed based on their 2018/19 return, as a completed 2019/20 return was not received ahead of publication. Belfast HSC Trust did not complete a return ahead of publication in 2020/21 and 2021/22, and due to the likely impact of COVID-19 on programme provision in these years, imputing figures based on prior years would have been inappropriate. Therefore, Belfast HSC Trust data is unavailable for 2020/21 and 2021/22; however some programmes were run in this HSC Trust by other providers.

⁻ AWARE was unable to provide a 2019/20 return. AWARE, Cancer Focus, Cancer Lifeline and Macmillan Cancer Support were unable to submit a 2020/21 return due to COVID-19 pressures, and Cancer Focus, and Macmillan Cancer Support were unable to submit a return in 2021/22.

⁻ Northern HSC Trust cardiac programmes were not included in 2021/22 as they were delivered on a one-to-one basis. This type of programme delivery is typically not included in the patient education programme criteria.

⁻ Northern HSC Trust did not record participant numbers for their autism programme 'Emotional Regulation' in 2021/22.

⁻ A number of organisations advised of disruption to programmes due to the impact of COVID-19. For many organisations, there was a reduction in the number of programmes provided and participants attending. Please see 'COVID-19 impact on Patient Education / Self Management Programmes' and 'Appendix B Technical Notes' for detail.

Table 8: Participant Numbers by Condition (2017/18 – 2021/22)¹², ¹³

Programme Type	2017/18	2018/19	2019/20	2020/21	2021/22
Condition Specific	12,047	14,472	14,252	3,793	6,813
Autism	-	-	-	155	140
COPD	1,934	2,057	2,099	185	197
Cancer	526	625	503	57	738
Cardiac	1,894	2,271	2,535	706	778
Chronic Pain	1,204	921	944	473	603
Dementia	1,752	1,369	1,810	500	1,396
Diabetes Type 1	898	1,378	964	390	397
Diabetes Type 2	3,252	3,243	3,761	461	913
Learning Disability	-	-	-	23	18
Mental Health	168	1,974	936	566	1,381
Stroke	419	634	700	277	252
Generic	750	561	570	328	358
Total	12,797	15,033	14,822	4,121	7,171

¹² Please note that a number of organisations advised of disruption to programmes due to the impact of COVID-19.

⁻ Belfast HSC Trust figures for 2019/20 figures were imputed based on their 2018/19 return, as a completed 2019/20 return was not received ahead of publication. Belfast HSC Trust did not complete a return ahead of publication in 2020/21 and 2021/22, and due to the likely impact of COVID-19 on programme provision in these years, imputing figures based on prior years would have been inappropriate. Therefore, Belfast HSC Trust data is unavailable for 2020/21 and 2021/22; however some programmes were run in this HSC Trust by other providers.

⁻ SEHSCT were unable to provide a complete data return of cardiac programmes ahead of publication in 2019/20, however in 2020/21 a full cardiac return was completed.

⁻ In 2019/20, it wasn't possible for WHSCT to submit a validated return ahead of the publication deadline so their diabetes programmes were estimated based on previous returns.

⁻ AWARE was unable to provide a 2019/20 return. AWARE, Cancer Focus, Cancer Lifeline and Macmillan Cancer Support were unable to submit a 2020/21 return due to COVID-19 pressures, and Cancer Focus, and Macmillan Cancer Support were unable to submit a return in 2021/22.

⁻ Northern HSC Trust cardiac programmes were not included in 2021/22 as they were delivered on a one-to-one basis. This type of programme delivery is typically not included in the patient education programme criteria.

⁻ Northern HSC Trust did not record participant numbers for their autism programme 'Emotional Regulation' in 2021/22.

⁻ A number of organisations advised of disruption to programmes due to the impact of COVID-19. For many organisations there was a reduction in the number of programmes provided and participants attending. Please see 'COVID-19 impact on Patient Education / Self Management Programmes' and 'Appendix B Technical Notes' for detail.

¹³ Due to ongoing data validation, figures for 2018/19 have been revised. Further information can be found in the Technical notes in Appendix B.

Table 9: Participants Numbers by Provider Organisation (2017/18-2021/22)¹⁴, ¹⁵

Provider Organisation	2017/18	2018/19	2019/20	2020/21	2021/22
Action Cancer	77	80	97	47	61
Action Mental Health	185	296	318	91	162
Alzheimer's Society	1,752	1,364	1,769	460	941
Aware	-	735	-	-	369
Cancer Focus NI	96	30	17	-	-
Cancer Lifeline	38	22	15	-	100
Macmillan Cancer Support	41	54	37	-	-
NI Chest Heart & Stroke	639	750	868	421	396
Stroke Association	53	85	92	53	27
Versus Arthritis	704	637	614	351	538
BHSCT	1,726	2,552	2,552	-	-
NHSCT	2,919	2,996	2,981	414	1,481
SEHSCT	2,331	2,134	2,362	1,195	1,382
SHSCT	1,447	1,993	2,198	878	1,452
WHSCT	789	1,305	902	211	262
Total	12,797	15,033	14,822	4,121	7,171

¹⁴ Please note that a number of organisations advised of disruption to programmes due to the impact of COVID-19.

⁻ Belfast HSC Trust figures for 2019/20 figures were imputed based on their 2018/19 return, as a completed 2019/20 return was not received ahead of publication. Belfast HSC Trust did not complete a return ahead of publication in 2020/21 and 2021/22, and due to the likely impact of COVID-19 on programme provision in these years, imputing figures based on prior years would have been inappropriate. Therefore, Belfast HSC Trust data is unavailable for 2020/21 and 2021/22; however some programmes were run in this HSC Trust by other providers.

⁻ SEHSCT were unable to provide a complete data return of cardiac programmes ahead of publication in 2019/20, however in 2020/21 a full cardiac return was completed.

⁻ In 2019/20, it wasn't possible for WHSCT to submit a validated return ahead of the publication deadline so their diabetes programmes were estimated based on previous returns.

⁻ AWARE was unable to provide a 2019/20 return. AWARE, Cancer Focus, Cancer Lifeline and Macmillan Cancer Support were unable to submit a 2020/21 return due to COVID-19 pressures, and Cancer Focus, and Macmillan Cancer Support were unable to submit a return in 2021/22.

⁻ Northern HSC Trust cardiac programmes were not included in 2021/22 as they were delivered on a one-to-one basis. This type of programme delivery is typically not included in the patient education programme criteria.

⁻ Northern HSC Trust did not record participant numbers for their autism programme 'Emotional Regulation' in 2021/22.

⁻ A number of organisations advised of disruption to programmes due to the impact of COVID-19. For many organisations there was a reduction in the number of programmes provided and participants attending. Please see 'COVID-19 impact on Patient Education / Self Management Programmes' and 'Appendix B Technical Notes' for detail.

¹⁵ Due to ongoing data validation, figures for 2018/19 have been revised. Further information can be found in the Technical notes in Appendix B.

Table 10: Participants Numbers by Programme Type and Programme Delivery (2021/22)¹⁶

Programme Type	Clinical / Professional Led	Peer Led	Jointly Led	Total
Condition Specific	4,305	1,841	667	6,813
Autism	94	46	-	140
Cancer	197	-	-	197
Cardiac	738	-	-	738
Chronic Pain	242	119	417	778
COPD	591	-	12	603
Dementia	455	941	-	1,396
Diabetes Type 1	337	60	-	397
Diabetes Type 2	804	-	109	913
Mental Health	18	-	-	18
Stroke	802	450	129	1,381
Other	27	225	-	252
Generic	181	56	121	358
Total	4,486	1,897	788	7,171

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¹⁶ Please note that a number of organisations advised of disruption to programmes due to the impact of COVID-19

⁻ Belfast HSC Trust figures for 2019/20 figures were imputed based on their 2018/19 return, as a completed 2019/20 return was not received ahead of publication. Belfast HSC Trust did not complete a return ahead of publication in 2020/21 and 2021/22, and due to the likely impact of COVID-19 on programme provision in these years, imputing figures based on prior years would have been inappropriate. Therefore, Belfast HSC Trust data is unavailable for 2020/21 and 2021/22; however some programmes were run in this HSC Trust by other providers.

⁻ AWARE was unable to provide a 2019/20 return. AWARE, Cancer Focus, Cancer Lifeline and Macmillan Cancer Support were unable to submit a 2020/21 return due to COVID-19 pressures, and Cancer Focus, and Macmillan Cancer Support were unable to submit a return in 2021/22.

⁻ Northern HSC Trust cardiac programmes were not included in 2021/22 as they were delivered on a one-to-one basis. This type of programme delivery is typically not included in the patient education programme criteria.

⁻ Northern HSC Trust did not record participant numbers for their autism programme 'Emotional Regulation' in 2021/22.

⁻ A number of organisations advised of disruption to programmes due to the impact of COVID-19. For many organisations, there was a reduction in the number of programmes provided and participants attending. Please see 'COVID-19 impact on Patient Education / Self Management Programmes' and 'Appendix B Technical Notes' for detail.

Table 11: Participants Numbers by Programme Type and Funding Arrangements (2021/22)¹⁷, ¹⁸

Programme Type	Statutory Funded	Voluntary Funded	Joint Funded	Other ¹⁶	Total
Condition Specific	4,370	3	1,758	682	6,813
Autism	140	-	-	-	140
Cancer	171	3	-	23	197
Cardiac	738	-	-	-	738
Chronic Pain	778	-	-	-	778
COPD	603	-	-	-	603
Dementia	455	-	941	-	1,396
Diabetes Type 1	257	-	60	80	397
Diabetes Type 2	408	-	505	-	913
Learning Disability	18	-	-	-	18
Mental Health	802	-	-	579	1,381
Stroke	-	-	252	-	252
Generic	187	-	171	-	358
Total	4,557	3	1,929	682	7,171

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¹⁷ Please note that a number of organisations advised of disruption to programmes due to the impact of COVID-19.

⁻ Belfast HSC Trust figures for 2019/20 figures were imputed based on their 2018/19 return, as a completed 2019/20 return was not received ahead of publication. Belfast HSC Trust did not complete a return ahead of publication in 2020/21 and 2021/22, and due to the likely impact of COVID-19 on programme provision in these years, imputing figures based on prior years would have been inappropriate. Therefore, Belfast HSC Trust data is unavailable for 2020/21 and 2021/22; however some programmes were run in this HSC Trust by other providers.

⁻ AWARE was unable to provide a 2019/20 return. AWARE, Cancer Focus, Cancer Lifeline and Macmillan Cancer Support were unable to submit a 2020/21 return due to COVID-19 pressures, and Cancer Focus, and Macmillan Cancer Support were unable to submit a return in 2021/22.

⁻ A number of organisations advised of disruption to programmes due to the impact of COVID-19. For many organisations, there was a reduction in the number of programmes provided and participants attending. Please see 'COVID-19 impact on Patient Education / Self Management Programmes' and 'Appendix B Technical Notes' for detail.

¹⁸ Funding may be provided through other sources such as Cooperation And Working Together (CAWT) - a partnership between the Health and Social Care Services in Northern Ireland and the Republic of Ireland which facilitates cross border collaborative working in health and social care.

Appendix A: Background

This publication provides statistical information on patient education / self management programmes for long term conditions collected from Health & Social Care (HSC) Trusts and independent programme providers. It details information on the type, provision, frequency and Trust area of the programmes delivered during the year 1 April 2021 to 31 March 2022.

The <u>Programme for Government (PfG) 2011-15</u> included a commitment to enrol people who have a long term (chronic) condition, and who want to be enrolled, in a dedicated chronic condition management programme. The commitment sought to ensure that people who have a long term condition have the information and skills they need to be able to self manage their condition as effectively as possible.

The number of people in Northern Ireland living with one or more long term condition is increasing⁴. The Department is committed to improving the health and well-being and quality of life for people with long term conditions. It has produced a Policy Framework "Living with Long Term Conditions" to provide a strategic direction and driver for the commissioning, planning and delivery of services for adults in Northern Ireland with long term conditions. A key feature of the policy framework will be that people with long term conditions should be supported to self manage their condition effectively in order to maintain or enhance their health and well-being as well as their clinical, emotional and social outcomes.

Central to effective self management is providing information, education, advice and peer support for people with long term conditions in order to ensure they have the knowledge and skills to manage their own conditions more confidently, particularly when variations from the norm may occur, and to make daily decisions to improve their own health and well-being.

An initial data collection exercise was carried out during 2012 to establish a baseline on the number and type of patient education / self management programmes available in each HSC Trust during 2011/12. The original baseline information was produced in September 2013. Since then, arrangements have been put in place to facilitate the ongoing collection of information on the provision of patient education and self management programmes. In July 2014 a regional summary report was published for the 2012/13 information collection and annual publications have continued since.

This report is a regional summary of the information provided on the Patient Education / Self Management Programme questionnaire 2021/22. Information was provided by HSC Trusts and independent sector organisations who delivered programmes during 2021/22. The report summarises the key statistical information provided for the year 2021/22 and how this compares with that collected in previous years.

⁴ Programme for Government 2011 - 2015 | Northern Ireland Executive

Appendix B: Technical Notes

Data Collection

The information presented in this publication derives from the Patient Education / Self Management Programmes for Long Term Conditions questionnaire. Completed questionnaires were provided by each of the five HSC Trusts in Northern Ireland, as well as independent providers, to Community Information Branch (CIB) in the Department of Health.

For this publication, the questionnaire covered the year ending 31 March 2022 and gathered information on the type, provision, frequency and Trust area of patient education / self management programmes delivered during the year. Further details about the scope of this audit can be found in the <u>collection guidance notes along with a copy of the questionnaire</u>.

Data Quality

On receipt of the Patient Education / Self Management Programmes questionnaire, statisticians in CIB conduct internal consistency checks. They also check for variations from the baseline information collated for 2017/18 and the subsequent collections both regionally and across providers. Queries arising from validation checks are presented to the independent organisations or HSC Trusts for clarification and if required returns can be amended and re-submitted. The HSC Trusts are also asked to provide appropriate explanations for any inconsistent or missing information.

The statistics presented in this bulletin were collected as an audit of programme provision and uptake for 2019/20 and are best described as <u>experimental</u>. Any future statistics covering this issue may be subject to revisions in coverage and methodology.

Data Presentation

Any instance of '-' represents either a zero figure or that the information is not available.

The total number of people who attended a patient education / self management programme would include any individuals who attended more than 1 programme during the year – there may therefore be an element of double counting.

As some information was not available by HSC Trust area, or programmes have been provided regionally, the sum of HSC Trust area figures may not match the total figure for Northern Ireland. In addition, there are some instances where data was unavailable but an estimate could be derived. Details of these can be found in the table below.

Data Validation Issues

Aware did not provide figures for 2017/18.

Western HSC Trust have not recorded any cardiac programmes since 2014/15.

In the 2017/18 publication, Action Mental Health's figures for the 'Managing the Challenge' programme were reflected in the WHSCT figures. In the 2019/20 publication this activity was revised to show that 185 participants, attending 23 programme, were delivered by Action Mental Health.

Data Validation Issues

For 2017/18 the Belfast HSC Trust did not provide programme frequency figures, therefore their data has been imputed based on 2016/17. Data estimates for Belfast Trust in 2016/17 are noted above.

In the 2018/19 publication, data pertaining to 'Talking Therapies' and 'Recovery by Discovery' programmes, in BHSCT and SHSCT, respectively, for 2016/17 and 2017/18 were removed from trend analysis. This was a result of further learning on how the programmes were delivered, leading to revised evaluation against the criteria outlined in the questionnaire.

In the revised 2018/19 publication, all activity delivered by Action Mental Health, which had been previously reflected within Western HSC Trust activity, is reported separately.

Please note the following limitations for 2019/20 data

- Please note that a number of organisations advised of disruption to programmes due to the impact of COVID-19.
- BHSCT 2019/20 figures have been imputed based on the 2018/19 return, as a completed 2019/20 return was not received ahead of publication.
- AWARE was unable to provide a 2019/20 return due to COVID-19 impacted staff resources.
- SEHSCT were unable to provide a complete data return of cardiac programmes ahead of publication in 2019/20, but a complete return was provided in 2020/21.
- WHSCT diabetes programmes were estimated based on previous return, as it wasn't possible to submit a validated 2019/20 return ahead of publication deadline.

In the 2019/20 publication the number of participants attending 'Active Minds' delivered by the Northern Health and Social Care Trust (NHSCT) was revised from 25 to 5, as the sum of participants by sessions, rather than programme was submitted in 2018/19. The programme frequently (1) remained the same.

- Belfast HSC Trust did not complete a return ahead of publication in 2020/21 or 2021/22, and due to the likely impact of COVID-19 on programme provision in these years, imputing figures based on prior years would have likely been inaccurate. Therefore, Belfast HSC Trust data is unavailable for 2020/21 and 2021/22.
- A number of organisations advised of disruption to programmes due to the impact of COVID-19. For many organisations there was a reduction in the number of programmes provided and participants attending. Please see 'COVID-19 impact on Patient Education / Self Management Programmes' for detail.
- Cancer Focus, Cancer Lifeline, and Macmillan Cancer Support were unable to submit a return due to COVID-19 pressures in 2020/21.
- Cancer Focus, and Macmillan Cancer Support were unable to submit a return in 2021/22, likely due to COVID-19 pressures.
- Some new programmes could not be validated in time for the 2021/22 publication so were not included, but are part of ongoing data quality work to include all relevant programmes.

In Northern HSC Trust these were new autism, long covid, and cancer programmes. In South Eastern HSC Trust these were new autism programmes.

In 2021/22 Aware and Northern HSC Trust recorded that they had delivered regional online mental health programmes. These are not yet included in the Northern Ireland totals as further data validation work is required to incorporate regional programmes into this publication.

Northern HSC Trust cardiac programmes were not included in 2021/22 as they were delivered on a one-to-one basis. This type of programme delivery is typically not included in the patient education programme criteria.

Northern HSC Trust did not record participant numbers for their autism programme 'Emotional Regulation' in 2021/22.

Data Validation Issues

South Eastern HSC Trust noted that the DESMOND (Virtual) diabetes programme was stood down from January to March 22 due to winter pressures, and there was a reduced ability to deliver the programme in 2021/22, due to staff redeployment related to COVID 19.

South Eastern HSC Trust did not record programme numbers for their pulmonary rehabilitation programmes in 2021/22.

Western HSC Trust noted issues in the provision of their pulmonary rehabilitation programmes in 2021/22 due to issues with technology and participant engagement leading to participant dropout.

Western HSC Trust noted staffing issues in the provision of their diabetes programmes in 2021/22.

Amendments

The cut-off point for amendments to data was 27th January 2023. Any amendments notified by HSC Trusts or independent organisations after this date will not have been included.

Rounding Conventions

Percentages have been rounded to whole numbers and as a consequence some percentages may not sum to 100.0% may reflect rounding down of values under 0.5%

Revisions Policy

These data are revised by exception. If revisions are required, background circumstances are reported and revision dates are noted in subsequent publications of these series of statistics. The general revisions policy for Official Statistics produced by the DoH can be found in the DoH Statistics Charter on our <u>website</u>.

Main Uses of Data

Data presented in this publication helps to meet the information needs of the DoH. Commitment 44 in the Programme for Government (PfG) 2011-2015 is to 'Enrol people who have a long-term (chronic) condition, and who want to be enrolled, in a dedicated chronic condition management programme'. The figures included contribute to the Performance Indicators required to measure the provision of programmes and programme participation as well as identifying any further need of provision.

Contact

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User Feedback

Any comments you have regarding this or any other publication produced by CIB are welcome. Your views help us to improve the service we provide to users of this information and to the wider public.

Please send any comments you have to cib@health-ni.gov.uk.

The scope of collection was agreed between the Public Health Agency and DoH and is summarised in the table below.

This data collection IS covering	This data collection IS NOT covering:	LTCs included in audit:
Programmes for people with long term conditions. Programmes designed for:	Any kind of "Support groups" for either physical or mental health long term conditions. By 'support groups' we mean informal, unstructured groups with no time limit. One-to-one reviews or appointments with health and social care professionals, e.g. GPs or other primary / community care professionals.	LTCs relating to physical health eg: Diabetes; Cardiac; COPD / respiratory; Stroke / dementia / neurological; Chronic Pain; Arthritis / other Musculoskeletal; Cancer. LTCs relating to mental health.

Abbreviations

Abbreviations	Full term
BERTIE	Bournemouth Type 1 Intensive Education
BHSCT	Belfast Health and Social Care Trust
BNF	British National Formulary
BSO	Business Services Organisation
CHOICE	Carbohydrate Insulin Collaborative Education
COPD	Chronic Obstructive Pulmonary Disease

Abbreviations	Full term	
CrISP	Carer Information and Support Programme	
DIP	Dementia Information Programme	
DM	Diabetes Mellitus	
DAFNE	Dose Adjustment for Normal Eating	
DAY	Diabetes And You	
DESMOND	Diabetes Education & Self Management of Ongoing and Newly Diagnosed	
DoH	Department of Health	
HOPE	Help to Overcome Problems Effectively	
IBD	Inflammatory Bowel Disease	
NHSCT	Northern Health and Social Care Trust	
PUMPS	Insulin Pump Education Programme	
SEHSCT	South Eastern Health and Social Care Trust	
SET2	Southern Education Type 2	
SHAIRE	Southern Health Adjusting Insulin Round Eating	
SHSCT	Southern Health and Social Care Trust	
WHSCT	Western Health and Social Care Trust	

This and other statistical bulletins published by Community Information Branch are available to download on the DoH website at: Department of Health (Social care statistics).
This publication can be requested in large print or other formats.