

**Report from the visit to the Diabetes & Endocrinology Care Clinique Pédiatrique (DECCP) of the  
Centre Hospitalier de Luxembourg (CHL) under the auspices of ISPAD.  
(Allan Drash Clinical Fellowship)**

It is with great satisfaction and a sense of fulfilment that I have come to complete my clinical fellowship in the DECCP of CHL with the support of ISPAD's Allan Drash Clinical Fellowship grant.

The complete duration of the visit was 5 weeks and took place from the 25<sup>th</sup> January to the 26<sup>th</sup> February 2016, under the supervision of Dr. Michael Witsch.

The initial scope of the visit was to familiarize myself and train in the use of the DPV system, a system that we have recently introduced in our centre as part of our collaboration within the SWEET network of diabetes centres. Dr Witsch was the one that had us guide us through the special requirements of transferring and collecting all necessary data from our previous system and he is the one responsible for the benchmarking of all SWEET centers. During my visit, we have greatly surpassed the scope of the visit as we had the chance to scrupulously go through all greek data, visit by visit, patient by patient, exploring the possibilities and drawbacks of the system, in direct communication with the University of Ulm and the team of Dr Reinhard Holl, that are programming DPV, who have been more than helpful. During my visit, two new updates of the program were released containing repairs for system errors and further improvements are on the way. Dr Witsch has also had the opportunity to get acquainted with the differences of DPV for SWEET version from the classic DPV system they are currently using, so as to be able to better organize the upcoming introduction of the new version in their clinical practice, as well. More than that, he has introduced me to the possibilities of local data analysis by DPV, through queries already integrated in the system. We also went forward to exporting the data in external databases and performing much more complex queries that can provide us with a complete picture of our patients' data and thus can immensely help us with the quantitative and qualitative evaluation of our center. This procedure has inevitably led to comparisons between the two centers with regards to the data completion rate, data accuracy and results, but also to the revealing of misconceptions regarding the completion of specific fields and finally, and most importantly, to the unfolding of differences in clinical practice (i.e rate of pump use, treatment, follow-up etc.) and-mainly-in the infrastructure and organization of the two centers.

The DECCP in the CHL is a highly esteemed Center of Excellence within the ISPAD Network and a Center of Reference for the SWEET project, with great experience in integrating electronic registration and evaluation of data in clinical practice, on the one hand, but also in the extended use of technology in diabetes care. During my visit, I gained valuable experience in evaluating glucometer reports from the diasend system (for the time being we only rely on self-control diaries) and in the setting of the pump and the adaptation of pump treatment, even immediately after diagnosis. I have had the chance the chance to participate in all stages of diabetes education, with the tremendous generosity and patience of the Diabetes nurses, Muriel, Rita and Yasmina, from the bedside of newly diagnosed babies to the intensive re-education of poorly controlled adolescents. I got acquainted with the use of the iport and a variety of consumables aimed at improving the child's experience with the diabetes treatment, as well as with the new Medtronic G640 pump and the glucose Monitoring by Abbott Freestyle libre. I have participated in the consultations of all 3 doctors of the clinic, Dr Carine de Beaufort, Dr. Ulrike Schierloh and Dr Michael Witsch, who kindly shared

their knowledge and experience with me, but also engaged in a fruitful dialogue with me, almost after every patient. Moreover, I have joined their weekly staff meetings (attended also by the team's psychologists and dieticians) and their joint meeting with the adult diabetology department for the organization of transition care. During the visit, I was asked to write a report that compared the two centres and reach a proposal for the improvement of both. This opportunity to stand as a critical observer and come up with useful, but also feasible solutions was indeed extremely enlightening, and it is now with great enthusiasm that I am going back to Athens in order to suggest and hopefully implement these changes.

Finally, it was during my visit that the author teams for the Diabetes Care Supplement on the SWEET experience were determined, giving me the opportunity to join the team of Dr. Witsch that will be dealing with the topic of benchmarking. Actually, this visit is actually a "live" example of benchmarking itself, both from a qualitative and a quantitative point of view.

In conclusion, my visit to the DECCP in Luxembourg has been a targeted and fruitful-in all its targets-experience. I am going back to Athens with the aspiration to change some structural issues that may drastically improve the quality of care, discuss changes that may improve the effectiveness of care in terms of glycemic control, compliance with treatment and expansion of the use of technology. I am going back with improved knowledge and skills. What is more important I am going back with the ability to make the best of the DPV system, give answers regarding the performance of our centre, analyse our data and enhance the role of our centre within the SWEET network by providing good quality data on the one hand and improving diabetes care on the other.

For all these, I would like to express my gratitude to ISPAD and the Allan Drash Clinical Fellowship grant that have provided me with the possibility to spend these past five weeks in Luxembourg. Then, to Dr De Beaufort, General Secretary of ISPAD, who has kindly accepted my application and warmly welcomed me, sharing her experience with me in numerous occasions. To all the members of the DECCP-secretaries, psychologists, dieticians, nurses and doctors- that have shared their knowledge, always willing to answer my questions and show me new things. To the administration of CHL that has accommodated my visit, providing me with everyday services.

Finally, my warmest gratitude goes to Michael Witch, who has generously offered me his time and his wisdom, with admirable patience, kindness, but also with a very concise and structured approach. He has introduced me to the team and integrated me in his everyday work and very busy schedule, providing me with all the necessary skills to achieve my goals, starting almost from scratch!