

## PE1404/AA

Petitioner Letter of 13 May 2013

### Public Petitions Committee Meeting 14/5/13

#### PE01404: Access to Insulin Pump Therapy

##### Missed Targets:

Diabetes UK Scotland welcomes the announcement by Scottish Government of a further £3 million to help achieve the target of 25% uptake by people under 18 with Type 1 diabetes. There has been a lot of hard work carried out to try and achieve these targets but only three Health Boards have reached the commitment for 31 March of 25% of people under 18 that have Type 1 diabetes: NHS Borders, NHS Shetland and NHS Tayside.

**Table 1: Current distribution and deficit to meet paediatric target (25% of children on insulin pump therapy)**

NHS Board	Number of people < 18 with T1DM (as of March 2013)	Number and percentage of pumps as of March 2013		Number of extra pumps and percentage increase still required to meet 25% provision for <18s	
NHS Ayrshire and Arran	257	47	18.29%	17	6.71%
NHS Borders	70	21	30.00%	0	0
NHS Dumfries and Galloway	80	16	20.00%	4	5.00%
NHS Fife	199	36	18.09%	14	6.91%
NHS Forth Valley	192	30	15.63%	18	9.38%
NHS Grampian	339	43	12.68%	42	12.31%
NHS Greater Glasgow and Clyde	534	104	19.48%	30	5.32%
NHS Highland	205	6	2.93%	45	22.07%
NHS Lanarkshire	399	33	8.27%	67	16.73%
NHS Lothian	378	66	17.46%	29	7.54%
NHS Orkney	15	3	20.00%	1	5.00%
NHS Shetland	14	4	28.57%	0	0
NHS Tayside	202	57	28.22%	0	0
NHS Western Isles	20	0	0.00%	5	25.00%
<b>Scotland</b>	<b>2904</b>	<b>465</b>	<b>16.05%</b>	<b>271</b>	<b>9.31%</b>

(Source: Scottish Government)

As the majority of NHS Health Boards have missed their targets, Scottish Government has extended this by 1 year to ensure that all Health Boards will have achieved the goal. There are two Health Boards that must be highlighted, in their efforts which have meant that they have missed the targets by some way - NHS Highland and NHS Lanarkshire. Even with this new deadline Diabetes UK Scotland has strong reservations of their ability to reach this extended objective as there is concern the issues are as much cultural as resource based. As the target has extended by one year there are implications for the delay in young people missing out on this life changing resource.

The Scottish Government have estimated that all Health Boards apart from Lanarkshire will have reached the 25% target for under 18s by March 2014. With almost two thirds of the expected young people who might be allocated a pump, receiving one, the effort will now be placed on adult services to deliver an estimated 660 insulin pumps across Health Boards that are showing dramatic variations of between 0.75% in Greater Glasgow and Clyde and 6.4% in Fife. There are no publically available updates planned from the Scottish Government apart from the annual Scottish Diabetes Survey which will release data for 2012 as far as we understand.

### **Conclusion:**

Diabetes UK Scotland appreciates the efforts the Scottish Government and Health Boards have strived to achieve this target. The committee's work has been invaluable in highlighting and holding to account Scottish Government and Health Boards.

However, there is more work that needs to be done once the target has been achieved; there must be a commitment to ensure that there is a maintenance of supply to meet the demand. For adults, insulin pump services substantially differ between Health Boards who have accepted the need for insulin pumps and have interpreted NICE and SIGN guidance positively compared to other Health Boards who are not so convinced by the evidence.

The petition contained a focus on equity of delivery and it is clear from the data that this is still an issue. We would ask the committee to consider keeping the petition open and that six monthly update reports from the Scottish Government are requested to establish progress for children and adult services.

### **The Questions Uppermost in Our Minds Are:**

- Given the slippage experienced to date, how confident can we be about the new deadline being met?

- What mechanisms are in place to monitor and support Health Boards towards meeting their targets?
- What assurances can be given to parents that, once their child has gone through the initial transition on to a pump, there will be accessible and ongoing support?
- What is the national position on how families can access pump consumables – we have heard of parents being told they can only have one or three month supplies that they will need to fund the batteries themselves, and that while the devices are owned by health boards families must incur the cost of insuring the pumps themselves?
- There are concerns in the number of people not accepting pumps, particularly the high number of rejections. What are the reasons for this?