#### PE1404/V

## **Public Health and Planning**

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Anne Peat Clerk to the Public Petitions Committee Public Petitions Clerks Room T3.40 The Scottish Parliament Edinburgh EH99 1SP Date 8 February 2013 Your Ref PE1404 Our Ref

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Dear Ms Peat

## PETITION PE1404 - INSULIN PUMP THERAPY

Thank you for your letter of 14 January 2013. We have enclosed the response from NHS Forth Valley regarding our progress made in delivering the target, our current performance and our local challenges.

If you have any questions, please contact David Munro (Diabetes MCN Manager) david.munro@nhs.net.

Yours sincerely

Dr Anne Maree Wallace Director of Public Health and Planning







# Insulin Pump Therapy in Forth Valley Response to PE1404

#### 1. Introduction

This response provides an overview of the Forth Valley position in relation to CEL(4) 2012. Forth Valley is committed working towards the targets for improving access to insulin pump therapy. Forth Valley has developed an action plan for implementation that covers the development of the service over this three year period. There are a number of challenges and risks identified in the plan, which we have looked to mitigate over the period. These issues are reviewed frequently and the plans changed accordingly.

#### 2. Background, Current Position and Challenges

#### a. Children and Young People

In Forth Valley, the paediatric service supports children from 0 to <16 years. Young adults between >=16 years of age to < 18 years of age are supported by the adult diabetes service.

Table 1 shows the 1 April 212 baseline, the 31 March 2013 target, the current position as at 31 January 2013 and the numbers of additional people actively considering pump therapy.

Table 1 Children and Young People

Age group	1 April 2012 baseline	31 March 2013 target	Current Position (Jan. 2013)	Patients currently actively considering pump therapy
0 to <16 years	11	39	24	12
>=16 years of age to < 18 years	1	8	5	2
Total	12	47	29	14

## i. Local Challenges

Although there are dedicated clinical resources for the children's diabetes service, there were no dedicated paediatric resources covering insulin pump therapy as at 31 March 2012. The development of a children's pump therapy service requires input from specialist paediatric nursing, specialist paediatric dietitians and from the consultant paediatricians/ associate specialist. Forth Valley did start with a low baseline in terms of the paediatric service and the timescales around the target for children and young people were always considered to be a challenge.

Forth Valley had to ensure that the new Team that was assembled was given access to the appropriate training and opportunities to learn from other teams across the country before the new patients were started on pump therapy. This meant that the first 3 months of 2012/13 were taken up with staff training before new starts were initiated.

Furthermore, young adults have always been a difficult group to reach, which has slowed planned progress.



We have found that a number of children and young people approached, have decided not to proceed with insulin pump therapy based on their own personal choices.

#### ii. Progress Made

The paediatric pump service has developed significantly since April 2012 and is working very well. The Team has worked hard to develop local capacity and expertise to improve access to this therapy. Although key staff have developed their knowledge, expertise and practical skills, this capacity is still relatively small. Safety is the key priority for local clinicians and they are operating at a pace they consider clinically safe for the patients and the supporting service. The Team is extremely conscientious, working very hard and is fully committed to providing a high quality service to local patients.

We have engaged with the pump companies to assist us in starting pumps, and this has been extremely useful. However, this has not helped us to further accelerate the pace that children are accessing pump therapy. We have reviewed opportunities to work with other Boards and how this might have been used to support efforts in Forth Valley during 2012/13. However, this has not led to any additional capacity that could be used to support NHS Forth Valley.

We have also found that younger children (under 5 years of age) take longer to go through the start-up process than older children, which has also had an impact on throughput.

Although we are making progress with young adults, we are currently slightly behind our planned trajectory for this group. Our Young Adult Team will continue to engage with this group, highlight the opportunity and assess those who show an interest. We have found that the timing of studying and school exams has had an impact on the timing of when young adults choose to initiate pump therapy.

#### iii. Looking Ahead

The paediatric Team met on 30<sup>th</sup> November 2012 to review the planned pump starts. The clinical team agreed that it was not possible to increase the rate of pump uptake without compromising patient safety.

The target for children and young people (47 by 31 March 2013) has looked increasingly challenging month on month. We are planning to have 28 children and 6 young adults accessing pump therapy by 31 March 2013 (34 in total). Based on the current trajectory, this may take us up to an additional 4 months to complete (i.e. 31 August 2013).

#### b. Adults

The adult service supports young adults from >=16 years of age to < 18 years of age and adults (i.e. >= 18 years of age). There has been a small Forth Valley insulin pump service for adults in place since 2006.

Table 2 shows the 1 April 212 baseline, the 31 March 2013 target, the current position as at 31 January 2013 and the numbers of additional people actively considering pump therapy.



Table 2 Adults

Age gr	oup	1 April 2012 baseline	31 March 2015 target	Current Position (Jan. 2013)	Patients actively considering pump therapy
>=	18	37	88	55	3
years					

## i. Local Challenges

Although trained, skilled and confident staff were already available within Forth Valley at the start of 2012, we needed to make changes to the staffing profile of the general diabetes service, backfilling time for a consultant physician and dietitian to fully support the expansion of the adult insulin pump therapy service.

A number of adults have also decided not to proceed with insulin pump therapy based on their own personal choices. Initial lack of understanding of pump use can be a barrier. Furthermore, when more information is given, some patients still decide that pump therapy is not something they would either be able or willing to do, e.g. frequent blood glucose testing; don't want a pump attached to them 24/7.

#### ii. Progress Made

The resource profile of the adult pump service was extended in April 2012 and the Adult Team continues to work very well against the target. The Team is working very hard and is fully committed to providing a high quality service to local patients. We continue to steadily increase access for adults and remain ahead of our planned trajectory.

## iii. Looking Ahead

The target for adults (88 by 31 March 2015) has always looked more manageable, given the longer timescale. We are planning to have 28 children and 6 young adults accessing pump therapy by 31 March 2013 (34 in total). We are planning to have 57 adults accessing pump therapy by 31 March 2013. Assuming that local people with diabetes continue to want access to pump therapy, it is likely that we will meet the target on schedule (i.e. 31 March 2015). However, we continue to monitor the situation and will amend or future plans where necessary.