

**WRITTEN QUESTION TO THE MINISTER FOR HEALTH AND SOCIAL SERVICES  
BY DEPUTY M.R. LE HEGARAT OF ST. HELIER  
ANSWER TO BE TABLED ON TUESDAY 22nd OCTOBER 2019**

**Question**

Will the Minister advise –

- (a) how many diabetes-specialist dietitians there are;
- (b) how these posts are funded;
- (c) how these posts are allocated between Type 1 and Type 2 diabetes;
- (d) whether it is his assessment that there is sufficient resourcing within this service for the number of people who suffer with diabetes;
- (e) if it is his assessment that there is insufficient resourcing, what immediate action, if any, will be taken to rectify the position; and
- (f) when the strategy for the diabetes service will be published?

**Answer**

- (a) There are 1.6 WTE [whole-time equivalents] (2 staff members)
- (b) There is 1.0 WTE for Type 1 diabetes – funded for 3 years by Diabetes Jersey; the remaining 0.6 WTE post is funded by HCS (Health and Community Services).
- (c) WTE for Type 1 diabetes (paediatric, adolescent and adults).

0.6 WTE for Type 2 diabetes, secondary diabetes, gestational diabetes and MODY (maturity onset diabetes of the young).

This activity is undertaken on an out-patient basis in the Diabetes Centre at Overdale Hospital, apart from when children are diagnosed with Type 1 diabetes when they are initially seen on a ward.

- (d) The British Dietetic Association recommendations on ‘Safe Caseload, Safe Staffing’, published in 2016, state a safe caseload as a maximum of 1,027 patient contacts for 1 WTE.

The UK Insulin Pump Audit 2013 showed that there were 0.05 WTE dietitians per 10 adult patients and 0.16 WTE dietitians per 10 children/adolescents undergoing intensive insulin treatment.

Based on approximate current numbers of patients with Type 1 diabetes, it is estimated that for staffing levels in Jersey to be equivalent to recommended levels in the UK for patients with Type 1 diabetes undergoing intensive insulin management and requiring carbohydrate counting education, would require 2.0 WTE for adults and 0.7 WTE for children and adolescents.

The service is aware that it does not currently meet these recommendations. It is looking at the needs of the Island’s population and will look to respond accordingly to that needs profile.

- (e) A response will be drawn up based on clinical and professional advice and informed by the diabetes strategy that is currently being developed.
- (f) The aspiration is to complete the strategy in 2020 and colleagues in primary and secondary care are now engaged in the early stages of its development.