

**WRITTEN QUESTION TO THE MINISTER FOR HEALTH AND SOCIAL SERVICES
BY DEPUTY M.R. LE HEGARAT OF ST. HELIER
QUESTION SUBMITTED ON TUESDAY 4th MAY 2021
ANSWER TO BE TABLED ON TUESDAY 11th MAY 2021**

Question

Will the Minister advise members –

- (a) how diabetes services are being refashioned following the grant of £1 million to Diabetes Jersey;
- (b) whether this grant money came from the Jersey Care Model (J.C.M.) funding; and
- (c) why the community diabetes pilot that was instigated before the J.C.M., and that was planned to be the blueprint for future chronic disease monitoring in the community, has not been developed further and expanded to include other long-term conditions?

Answer

- a) £1m has not been granted to Diabetes Jersey; funding has been invested in the HCS Diabetes service as part of an ongoing commitment to invest in the management of long-term conditions.

The funding will enable:

- **Investment in recruitment** to increase the capacity of the staff within the Diabetes Centre to reflect the growing diversity of an ageing population that is living longer with diabetes and other long-term health conditions. The following roles are being recruited to:
 - 2 diabetes specialist nurses
 - 1 paediatric diabetes specialist nurse
 - 2 dieticians
 - 1 podiatrist and 1 podiatry assistant,
 - Retinal screening project manager
 - Diabetes consultant
- **Insulin pumps for children with Type 1 Diabetes** – Health and Community Services is now able to provide a funding mechanism for children with type 1 diabetes to receive insulin pumps following a multidisciplinary criterion. This would assist in regulating blood sugar levels and improve quality of life and ensure equity of care for all children.
- **Continuous glucose monitoring (CGM)** – Funding is not routinely available for patients in Jersey to access new technology relating to CGM. The investment now allows the provision of CGM for clinically appropriate patients to assist self-management and have a positive impact on reducing the need for emergency service and hospital admission.
- **Education** – Three accredited age-specific education packages have been identified to support people with both Type1 and Type 2 diabetes which will be funded through the grant.

Evidence shows that structured education has positive outcomes especially for patients with Type 2 diabetes to reduce complications improve self-management and at times the need for pharmacological interventions.

- **Psychological support** – Funding will contribute towards people diagnosed with diabetes having access to specialist psychological support if they choose to access services.
- b) The funding did not come from the JCM funding.
- c) Insufficient data was collated from the pilot to provide the evidence-based outcome for it to continue. However, aspects of the pilot have continued as part of ongoing professional practice; this includes the Diabetes Nurses working with and supporting the practice nurses in GP surgeries on a regular basis.