

# **National Assembly for Wales Cross Party Group on Diabetes**

Minutes of ordinary meeting held on Tuesday 19 May 2015 Conference Room 21, Ty Hywel

## **Attendees**

Jenny Rathbone AM (Chair)  
Jeff Cuthbert AM  
John Griffiths (lay Member)  
Julia Platts (National Clinical Lead)  
Jason Harding (Diabetes UK Cymru)  
Jonathan Hudson (Astrazeneca)  
Becky Reeve (Sanofi)  
Katy Edwards (Roche Diabetes Care)  
Ken Irwin (Roche Diabetes Care)  
Jason Harding (Diabetes UK Cymru)  
Penny Griffiths (Diabetes Peer Support)  
Dr Lindsay George (Clinical Lead, Diabetes, Llandough Hospital)  
Scott Cawley (All Wales Podiatry)  
Yvonne Johns (Diabetes North Wales Reference Groups)  
Paul Coker (Input Patient Advocacy)  
David Chapman (Representing Medtronic)  
Ros Meek (Medtronic)  
Robert Wright (Lay Member)  
Helen Cunningham (Office of Jenny Rathbone AM)  
Lesley Jordan (Input)  
Mike Russell (MSD)

## **Apologies**

Dai Williams (Diabetes UK Cymru)  
Dr Sarah Davies (Woodlands Medical Centre, Cardiff)  
Julia Coffey (Johnson & Johnson)  
Alex Locke (Johnson & Johnson)  
Wendy Gane (Diabetes Peer Support)  
Bethan Jenkins AM  
Jackie Dent  
Hugh Thomas (Community Pharmacy Wales)  
Pippa Ford (Chartered Institute of Physiotherapy)

### **1) Minutes of last meeting and matters arising**

The minutes of the last meeting were agreed as a true record and there were no matters arising that were not on the agenda

### **2) Scrutiny of Health Boards (Julia Platts / Jason Harding)**

Helen Cunningham gave an update on responses received from Health Boards in response to the requests about their Diabetes Delivery Plan Annual Reports. Nearly all had published or were in the process of publishing them. A holding response had been received from Abertawe Bro Morgannwg. Jenny confirmed that she had made Julie James AM for Swansea West aware of the response. Jason said he would look at all Delivery Plans / Annual Reports and collate summaries for the next meeting and it was agreed it would be useful for the CPG to return to the issue of variability across health boards

Action: Helen to copy ABM response to Julie James

Action: Jason to compare Health Board delivery plans for next meeting

Jason distributed copies of the care indicators that Health Boards have been directed to use. A discussion took place and it was agreed that they are a key way to assess performance. Jenny Rathbone commented that it's important that users can see in a user friendly way so they know the best questions to ask. Lesley Jordan noted that insulin pump training wasn't on the list. Julia added that there was a limit as to what could be included, and as indicators, the detail will continue to be added as the process continues.

### **3) State of the Nation – 2015 Report (Jason Harding)**

Jason provided the group with an overview of State of the Nation; Diabetes UK's annual report on diabetes in Wales. The report presented progress in a red, amber, green traffic light system. A key theme was the Health and Social Care Committee's Inquiry into Diabetes, as well as accessing tests in primary care, and collaboration between management boards. Jason told the group that one of the slowest areas for progress has been prevention, and it's an area that would benefit from looking at what Public Health England are doing on this agenda. A discussion took place about whether the group should write to the Health and Social Care Committee Chair about re-visiting the enquiry. Yvonne Johns said that it may be worth waiting until NICE has published its guidance which is due out in August.

A discussion also took place about funding and health care spending being protected. Jenny Rathbone raised the cost of non-implementation. Lindsay George also pointed out the relevance of reconfiguration of services.

Robert Wright raised the matter of Diabetes Patient Delivery Groups (DPDGs) and felt it important for them to be in the brief of the implementation group. Julia Platts said she was aware of some of the patient engagement issues in Powys in particular and that

there's no clinical lead there and informed the group that she would be meeting the new Chief Executive of Powys Teaching Health Board soon.

#### **4) All Wales Diabetes Implementation Group update (Julia Platts)**

The implementation group met at the end of March. The group has been allocated £1 million, ring-fenced to help deliver the Diabetes Delivery Plan. Julia informed the group of the draft plans, which have not yet been approved by WG, but which include:

Three health areas; CVD, stroke and diabetes have each put in £100,000 (£300,000 in total) to create a prevention programme in primary care, which will start in the most deprived areas. Best practice from Carmarthen has been looked at, as has the role of screening in pharmacies.

Paediatrics – The clinical network is in place and peer reviews have been done in all Health Boards which has already led to action being taken over risks and concerns. It has been noted that structured education has been developed for adults but not for children

Transitional Care – This appears to be a weak area and the proposal is for a transition co-ordinator. Best practice includes “Just Duck it” and “Diabetes Uncut”. John Griffiths also mentioned that Ash Wales’s filter project, designed to target young people at risk of taking up smoking, contained some useful practice.

IT / SCI DC - The group have found that SCI DC is not easily transferable, and that disease specific registers are not appropriate. £150,000 provisionally allocated for NHS Wales Informatics Service (NWIS) but Julia pointed out that they are wary that it must be time limited and not turn into a bottomless pit

Inpatient Care – Think Glucose training has already started. On 18 June there is a national inpatient meeting which is a chance for hospitals to form action plans to deal with issues arising from the inpatient audit.

Footcare – All hospitals in Wales except Aneurin Bevan Health Board have registered for foot-care audit. There is a proposal for a part-time foot champion who would pull that data together and target how to avoid amputations. Peer review may happen in foot care but need to make sure that it's effective.

Structured Education – The proposal is for £200,000 to employ a full-time education co-ordinator across Wales to improve provision and uptake of education courses (DAFNE for type 1 diabetes and Xpert for type 2 diabetes) and explore new ways of providing education alongside these accredited programmes).

Primary Care – £300,000 is proposed for a primary care support unit which will target the lowest performing quartile of GPs so they have support from community specialist diabetes nurses. Julia stressed that this will not replace what should already be there, and will not be “back funding” for Health Boards. A prototype will be developed. Lindsay

George commented that this is a good proposal, as often in Cardiff there is consultant input for GPs but the lowest quartile of surgeries disengage.

#### **5) Inpatient Care and Insulin Pumps update (Jason Harding)**

Jason updated the group that there will be no further prosecutions in Abertawe Bro Morgannwg related to the wilful neglect of Lillian Williams. Prosecution of two nurses expected this summer. Once the trials are finished, Jason said that Diabetes UK will be writing to Welsh Government about Patient Safety.

Jason said that there are various pieces of work ongoing in the sub groups and asked members to get in touch with him if they want further information.

#### **Any Other Business including date of next meeting**

The group discussed the annual Diabetes Stakeholder event and options for dates. It was agreed that to maximise the chances of patients meeting their AM, it should be held on a date avoiding AM committee visits. Provisional date of 17 June agreed

Date of next CPG meeting: Tuesday 22 September at 12pm