

Ein cyf/Our ref: CEO.1685.0817

Eich cyf/Your ref: Kelly Sursona

Gofynnwch am/Please ask for: 01267 239581

Rhif Ffôn /Telephone: 01267 239579

Ffacs/Facsimile:

E-bost/E-mail: Kelly.sursona@wales.nhs.uk

Dyddiad/Date: 29 September 2017

Swyddfeydd Corfforaethol, Adeilad Ystwyth
Hafan Derwen, Parc Dewi Sant, Heol Ffynnon Job
Caerfyrddin, Sir Gaerfyrddin, SA31 3BB

Corporate Offices, Ystwyth Building
Hafan Derwen, St Davids Park, Job's Well Road,
Carmarthen, Carmarthenshire, SA31 3BB

David J Rowlands AC/AM
Chair
National Assembly for Wales
Petitions Committee
Cardiff Bay
Cardiff

Dear David

RE: Petition P-04-682 Routine Screening for Type 1 Diabetes in Children and Young People

Thank you for your letter of 4 August 2017. I apologise for not providing a response from the Health Board to your letter of 23 February 2017 which requested our diagnosis and referral pathways for type 1 diabetes and diabetic ketoacidosis (DKA) in children and young people.

Within the Health Board area, since January 2017, 17 children with a new diagnosis of type 1 diabetes have attended appointments with the Hywel Dda paediatric service. Six patients were admitted as inpatients with DKA. Once diagnosed all children and young people remain under the care of the multidisciplinary team (MDT) within the Hywel Dda secondary care service.

- The Health Board Point of Care Testing Policy is linked to the Welsh Scientific Advisory Committee's Policy on the management of Point of Care Testing (POCT). "What, When and How?" (May 2017). The Health Board policy is available to all staff via the intranet, and in order to inform all Health Board staff of this a global email was issued to all directorate leads, general managers, medical and nursing staff and primary care practice managers. There is currently a training programme in progress on POCT for all relevant staff. Within the POCT policy there is information on

standard operating procedures and instructions to ensure quality assurance.

- Blood glucose testing equipment should be available in all primary care practices. Health professionals in primary care will undertake a blood glucose test if there is clinical evidence indicating the need.
- There is a POCT subcommittee within the Health Board, and included in this committee is primary care representation. The subcommittee reports into the Health Board Medical Devices Committee.

The paediatric secondary care team utilise the primary care newsletters to educate primary care colleagues on late diagnosis.

The Health Board has a newly appointed Paediatric Consultant due to take up post in the Autumn of this year. There has, until this time, been no capacity within the Health Board to undertake formal case reviews, however with the addition of the Paediatric Consultant the paediatrics team has planned the development of a guide on the management of late diagnosis. In addition, there is an annual diabetes update study day held locally each year.

Whilst it is difficult to hear of a young person dying from a treatable illness it is unclear what introducing routine screening for Type 1 diabetes in children and young people would accomplish. Several questions would have to be answered including what age at which this would be carried out, when would this be done and how? The provision of this would place additional demand on an already challenged primary care service with no clear evidence to suggest that this would prevent a similar incident.

The Health Board would welcome support and I suggest that the way forward is to raise the profile and further educate all health professionals in understanding the signs and symptoms of Type 1 diabetes across primary care, community and secondary care.

Yours sincerely

A handwritten signature in black ink that reads "Steve Moore". The signature is written in a cursive, flowing style.

Steve Moore
Chief Executive