

6 September 2017

David J Rowlands AM  
Chair of Petitions Committee  
National Assembly for Wales  
Ty Hywel  
Cardiff  
CF99 1NA

Dear David Rowlands AM

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

Thank you for your letter regarding the above petition and the opportunity for the Royal College of Nursing Wales to provide evidence in relation to the different areas specified in the letter. Please note our responses to the three areas below:

**1. The role of primary care clinicians in improving early diagnosis of type 1 diabetes, and any barriers or opportunities that you identify**

**1.1 Opportunities**

Nurses are key primary care clinicians who provide care across the lifespan of individuals and communities. Midwives are present throughout the antenatal and early post-natal period, where diabetes is pertinent to both mother and baby. Health Visitors are involved with the health and care of children right from the start of their lives and the wider family, whilst School Nurses are involved in the health care of children and young people of school age. Practice Nurses may see people of all ages for a range of interventions, within General Practice. Hence, nurses are uniquely placed to play a role in preventative healthcare and the promotion of public health amongst children and young people.

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Nurses are already involved in a number of existing initiatives and schemes which could be strengthened or enhanced in order to incorporate the principles of early diagnosis. For instance, 'Making Every Contact Count' is centred on using every opportunity to ask individuals the right questions to find out about their underlying health needs and deliver advice to improve health and wellbeing. Health care staff should feel empowered to promote healthy lifestyles, supporting behaviour change and contribute to reducing the risk of chronic disease. The Committee may want to consider the extent to which the 'Making Every Contact Count' initiative is helping to achieve those aspirations. Similarly, an assessment of the Healthy Child Wales Programme and its success in delivering evidence based preventative and early intervention measures, and support on parenting and healthy lifestyle choices, could also be considered.

Over a number of years the care provided for people with diabetes has been quantified via primary care audits, which have consistently highlighted the quality of care and variation in practice across Wales. New initiatives such as the Primary Care Measures are attempting to evaluate patient outcomes within areas such as measuring obesity in children.

The Welsh Government also have the [Diabetes Delivery Plan 2016 – 2020](#) and that has included special considerations for children and young people, including targets for paediatric peer audit and the paediatric diabetes network. The impact and effectiveness of the delivery plan should be monitored carefully, with in-depth consideration of whether or not it is achieving the best possible outcomes from children in Wales.

## **1.2 Barriers**

A fundamental barrier to improving early diagnosis of type 1 diabetes in primary care relates to staffing resource. Workforce planning for this aspect of health care provision has not been robust, with very little data to inform and build a sustainable nursing workforce for the future.

Additionally, the accessibility and opportunity to uptake education and training related to diabetes is hugely variable, as is the financial support for, and release of, General Practice Nurses to undertake education.

Currently, there are no agreed national standards for primary care education relating to diabetes. According to the Welsh Government's Diabetes Delivery Plan, Health Boards should ensure they have appropriate numbers of staff with the right skills set in relation to population health needs assessment and that healthcare professionals are sufficiently knowledgeable to identify, refer and manage, as appropriate, children and young people with diabetes. For General Practice and the independent sector however, there can be significant variation in the identification of the educational

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needs of nursing staff within these settings.

Similarly, the Delivery Plan also states that having the right skills set in relation to population health needs assessment is essential, and that the paediatric diabetes network should work through primary care clusters to raise awareness and support identification of symptoms of type 1 diabetes. However, this is not yet evident within the primary care 'Pace Setter' or 'Emerging Model' programmes.

**2. Whether patients and parents/carers should be routinely asked about the 'Four Ts' symptoms of type 1 diabetes when unwell children present in primary care settings**

The 'Four Ts' should be asked routinely as part of a history taking exercise. However, one or more of them, if present, are symptoms that can be associated with a range of illnesses, especially in children and young people. If these symptoms are presented together then they would be considered red flags and alert the clinician immediately to a diagnosis of diabetes. However, the symptoms rarely present in uniformity and the highly skilled art of history taking during a nurse consultation is imperative in securing an accurate diagnosis.

**3. The scope for point of care blood glucose testing to be carried out more routinely when unwell children present in primary care settings**

In principle, there would be no reason why blood glucose testing of children and young people shouldn't be carried out more routinely in primary care settings, but the feasibility of doing so will depend on the availability of equipment, staff and facilities. Devices are portable which provides flexibility about where the test can be carried out, but staff have to be adequately trained, and the resources available to carry out the test and any follow-ups.

Thank you again for the opportunity for the Royal College of Nursing to provide evidence for this petition. We hope the above is helpful to you and the wider Committee. Please do not hesitate to contact my office if any further information is required.

Kind regards

Yours sincerely



**TINA DONNELLY, CBE, TD, DL, FRCN  
DIRECTOR, RCN WALES**