



PE1404/R

Public Petitions Clerks
Room T3 40
The Scottish Parliament
Edinburgh
EH99 1SP

Date: 6 February 2013
Your Ref:
Our Ref:

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Dear Sir or Madam

NHS HIGHLAND RESPONSE TO PETITION PE1404

I am writing further to your letter of 11th January 2013, headed 'Consideration of Petition PE1404' in which you asked for our assessment of the extent to which we expect our target to be met and our reasons for reaching that assessment.

I am able to confirm that NHS Highland's Paediatric Insulin Pump Service will start in April 2013.

For your information, I wrote to Helen Stevens at the Scottish Government on 28th September 2012 enclosing NHS Highland's Action Plan, which described a phased approach to produce a safe, stable and sustainable service for adults and children on Insulin Pumps. The Action Plan notes that there was a requirement to recruit in Dietetics and to a Diabetic Specialist Nurse post. It also states that with the recruitment of these new staff, there was a need to ensure that the team was adequately trained to start a new service from a zero base. The Specialist Nursing post was recruited in January 2013 and the Specialist Dietetics post will be filled in March 2013.

Two of the Diabetic Specialist Nurses (DSNs), and the two Consultant Paediatricians who will have clinical responsibility for the service, have had two days of training from an insulin pump company. One of the Consultants and two of the DSNs are attending a week long insulin pump course in York from the 4th - 8th February 2013. Further training in York will take place in September 2013, for the other DSN plus the other Consultant Paediatrician. It was not possible to send the whole team together due to service commitments.



The first patient is scheduled to start in April 2013. There is a Diabetes Team meeting in the last week of January 2013, to identify the first two patients from the list of those suitable. It is anticipated that there will be 10 patients starting in the first year, and 12 in the subsequent 2 years. This will result in approximately 25% of our 140 patients on pumps. It may be possible to do this earlier, but the clinical priority is to ensure appropriate patient selection and safe delivery of the new service.

We are confident going forward that we will have a safe and sustainable service that meets the requirements laid out in CEL 4 (2012).

Yours sincerely

Dr Margaret Somerville
Director of Public Health

cc Dr Ian Bashford, Medical Director