Health and Social Care Committee

HSC(4)-30-12(p2) – 15 November 2012

Inquiry into the implementation of the National Service Framework for diabetes in Wales and its future direction – Evidence from the Royal College of Physicians and the Association of British Clinical Diabetologists (ABCD)

The Royal College of Physicians (RCP) plays a leading role in the delivery of high quality patient care by setting standards of medical practice and promoting clinical excellence. We provide physicians in the United Kingdom and overseas with education, training and support throughout their careers. As an independent body representing over 26,000 Fellows and Members worldwide, we advise and work with government, the public, patients and other professions to improve health and healthcare.

The RCP is grateful for the opportunity to respond to the above call for evidence. In so doing, we have liaised with the Association of British Clinical Diabetologists (ABCD) and would like to make the following joint submission.

We strongly believe that the inquiry should result in action. Data on the implementation of the NSF is available to the Welsh Government but deficiencies in implementation persist.

Diabetes teams in the hospital and community are able to implement most of the care outlined in the NSF. However, they are under considerable pressure from their provision of acute general medicine cover to unscheduled care.

Dear Sir or Madam

Re: Inquiry into the implementation of the National Service Framework (NSF) for diabetes in Wales and its future direction

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From The Registrar
Patrick Cadigan MD FRCP
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20 September 2012
The Welsh Government places great emphasis on empowering patients to manage their own conditions, and make decisions about their care. However, to this end, the lack of availability of structured education in diabetes in many areas of Wales is very unhelpful. Screening for diabetes also appears to be difficult to provide currently.

The deficiencies in implementation of the NSF share similar themes across the Welsh UHBs. For instance, most UHBs are not able to offer a psychology service specifically for people with diabetes.

More patients in Wales are likely to benefit from Insulin pump therapy and structures to address this should be supported, particularly at a time when funding in all areas of the NHS is being squeezed.

The quality of diabetes inpatient services in Welsh hospitals is variable, and should be addressed.

Diabetes teams should be empowered to deliver the NSF. The integration of primary and secondary care in Welsh UHBs should facilitate an integrated approach to Diabetes care for individuals with diabetes.

Yours faithfully


Dr Patrick Cadigan
Registrar