



If you are a member of a local, national or international group that has a special interest in the care of people with diabetes and wish to notify our readers of your activities then please email submissions to:

louise@sbcommunicationsgroup.com

T: 020 7627 1510

F: 020 7627 1570

(Please include your name, title, position in the group and full contact details)

INTERNATIONAL ASSOCIATION FOR THE STUDY OF OBESITY

The International Association for the Study of Obesity (IASO) launched a new internet-based programme aimed at improving the management of people with weight problems and obesity-related co-morbidities (such as type 2 diabetes and cardiovascular disease) at the European Congress on Obesity in Budapest at the end of April. This new web course is a supplement to existing accredited continuing professional development courses which are a part of the Specialist Certification in Obesity Professional Education (SCOPE) scheme run by the IASO.

In the UK the scheme has been adopted by the Association for the Study of Obesity whose next training course in June will have SCOPE accreditation, enabling participants to acquire half the eight credits they need to accumulate to be granted member status. The course will be held at Liverpool Medical Institution, Liverpool on June 27–29 2007 (see www.aso.org.uk for more information).

While the SCOPE training programme is aimed at physicians, it is designed to be extended to allied health professionals including practice nurses in the near

future. Developed originally by the International Obesity Taskforce (IOTF) with a panel of clinical obesity experts, the course provides a set of teaching modules with a simplified overlay and an array of in-depth background materials, linked to additional online resources.

The IASO SCOPE programme is overseen by a steering group of international experts, with a scrutiny process at national and regional level to ensure that the highest standards are maintained. The programme is due to be extended worldwide, with the next phase introducing a SCOPE programme for Latin America, followed by Asia and other regions.

The SCOPE website can be found at: www.scope-online.org (accessed 14.05.2007)

Neville Rigby

*Director of Policy and Public Affairs,
International Obesity Taskforce*

NATIONAL DIABETES SUPPORT TEAM

New success stories, case studies and innovative work in diabetes are being showcased in an updated section of the National Diabetes Support Team (NDST) website (www.diabetes.nhs.uk [accessed 14.05.2007]). This is a space where examples of practice can be shared through Infopoints.

Infopoints are snapshots of work

happening all over the country to improve diabetes care. They cover many different topics, and the ones newly added include work areas such as:

- diabetes screening
- weight management
- diabetes and learning disabilities
- medicines management
- reducing emergency DKA admissions.

Infopoints are being added to the website all the time and if you think there is a piece of work that should go on the website, you can fill in a simple online form and we will follow it up. See: www.diabetes.nhs.uk/infopoints (accessed 14.05.2007)

A central part of the NDST's role is to help diabetes networks share information and Infopoints are providing a great means of doing this. There is great work going on in diabetes care all over the country and the NDST wants to hear from people out there on the ground so even more Infopoints can be added to the website.

Many of the new Infopoints were featured in the recent Department of Health (DoH) publication *The Way Ahead: The Local Challenge*, charting the progress of diabetes care nationally four years on from the NSF Delivery Strategy. This can be found at: www.diabetes.nhs.uk/downloads/the_way_ahead_the_local_challenge.pdf (accessed 14.05.2007).

The NDST has also supported the DoH in the development of two other



major documents published recently:

- *Insulin Pump Services* – report of the Insulin Pumps Working Group.
- *Making Every Young Person With Diabetes Matter – Report of the Children and Young People with Diabetes Working Group.*

For more information about any of these topics, please contact Sally Brooks: sally.brooks@diabetes.nhs.uk

Sally Brooks,
Writer,
NDST

DIABETES UK

We held our Annual Professional Conference (APC) at the SECC in Glasgow in March. It was a hugely successful event attended by over 3000 healthcare professionals.

A report launched at the APC called *Cuts in Diabetes Specialist Services* highlighted our concerns that specialist diabetes teams, staff, training and budgets are being cut. Diabetes UK called for action to be taken immediately as the loss of skills in specialist services has already impacted on the quality of care for people with diabetes. More than one in four (29%) specialist healthcare professionals reported funding cuts to the diabetes team in the last 12 months, 18% said posts have been made redundant and 43% said vacant posts have been frozen.

Diabetes UK InfoBank

The Diabetes UK InfoBank was launched on our website earlier this year. This tool provides you with information on diabetes healthcare services in your area, comparisons with other areas and measures progress

towards meeting National Service Framework targets. For information on your local services, simply visit www.diabetes.org.uk/infobank (in development; accessed 14.05.2007)

Making every young person matter

A report released last month by the Children and Young People with Diabetes Working Group shows that current diabetes care does not meet the needs of children and young people and calls for a major change in the way services for this specific group are delivered.

The report, *Making Every Young Person with Diabetes Matter – Report of the Children and Young People with Diabetes Working Group*, looks into the current standards of children's diabetes services and makes recommendations and guidance in a number of areas.

Recommendations include the need to involve children and young people when designing services as well as taking into account local community needs and encouraging school staff to be more involved in helping young people manage their diabetes. The report is also calling for an improved transition between young people's and adult services.

Diabetes UK welcomes the fact that, to follow up on the report findings, Dr Sheila Shribman – National Clinical Director for Children, Young People and Maternity – will now be leading an implementation group to ensure the report's recommendations get translated into improvement on the frontline.

The full report can be downloaded from: www.dh.gov.uk (accessed 14.05.2007).

Sarah Milsom,
Press Officer,
Diabetes UK

NATIONAL DIABETES INPATIENT SPECIALIST GROUP

Despite initial concerns regarding lack of leave available to group members, the number of DISNs that were able to attend the 7th meeting of the National Diabetes Inpatient Specialist Group was encouraging.

The meeting covered many areas of interest for the group. This included two presentations appertaining to inhaled insulin therapy: the first presentation was from Dawn Havron, Diabetes Research Sister from Plymouth, and the second was from Dr Ian Gallen, Consultant Diabetologist, High Wycombe. Both addressed areas of concern for DISNs regarding inhaled insulin (including dose adjustment, efficacy and patient satisfaction) and gave overviews of the practice in their local areas. Dr Gallen requested that any DSN who works with someone with diabetes who is being treated with inhaled insulin should take part in a national survey that can be accessed via the non-member's component on the Association of British Clinical Diabetologists website: www.diabetologists-abcd.org.uk (accessed 14.05.2007).

Anne Claydon from Newham General Hospital provided an excellent overview of cultural aspects in diabetes including the role of story telling, which the group found fascinating. This was complemented by a presentation from Dr Mohamed Hassanein, Consultant Diabetologist, Glan Clwyd Hospital, who discussed the management of diabetes during Ramadan and how this affects inpatients with diabetes.

Hilary Payne, Diabetes Education Nurse Facilitator, NovoNordisk, gave a talk on needle stick injuries, prevention and disposal. Dr Mike Sampson,



Consultant Diabetologist, Norfolk and Norwich University Hospital, rounded off the day's presentations by talking to us about the Diabetes Inpatient Satisfaction with Treatment Study that has been supported by a grant from Diabetes UK. This study will take place in 40 centres across the UK, 20 of which will have a large ethnic minority population, and the focus will be inpatient treatment satisfaction in different ethnic groups in the UK.

The meeting closed with our all-important work issues discussion session. The main focus appeared to be how to increase the profile of the DISN in certain trusts and how to implement and measure education for healthcare professionals within the hospital setting. The group gave many helpful suggestions including promoting the DISN group locally and highlighting its benefits to encourage appropriate leave to be granted to attend future group meetings.

If you would like any further information about the National DISN Group, please contact the DISN Group Administrator, Christine Jones, by email at Christine.Jones@nnuh.nhs.uk or by telephone on 01603 288 206.

*Debbie Stanisstreet,
DISN, Lister Hospital, Stevenage.*

WARWICK DIABETES USER GROUP

The Warwick Diabetes Research User Group have been recently engaged in a range of activities at both a local and a national level. The group's expertise is increasingly recognised by the national advisory group INVOLVE (see: www.invo.org.uk [accessed 23.05.2007]) and our group secretary, Geoff

Aitchison, has been working with others at INVOLVE on their new public information pack. This is updating and replacing the *Guide for Consumers* which was my absolute resource in the early days of user involvement at Warwick.

Our chair, Ralph Ormerod, has joined the public advocacy group informing the work of the UK Clinical Research Collaboration Diabetes Local Research Network. This is a new venture for us that is already bearing fruit with a good information flow in and out of both organisations, facilitated by Ralph.

Within Warwick Medical School, the Medical Research Council-funded ASKING-D study has been under scrutiny by the user group for some months now. This is a phase I complex intervention study aimed at developing and evaluating the component parts of a primary care consultation process for assessing and addressing the knowledge and confidence for self-care levels for people with type 2 diabetes. The patient-level part of the intervention requires the development of an accessible, non-threatening and feasible questionnaire for self-completion. The content is largely determined by existing questionnaires but there has been a great deal of input necessary with aspects of the language and the design. We aim to design a questionnaire that most people with diabetes are happy to complete so user involvement in this work is fundamental. Issues surrounding its completion have also challenged us with the overwhelming view being that this must be completed ahead of the diabetes review not, for example, in the waiting room.

A very recent challenge in developing this study has involved the choice of appropriate patient-level outcomes for the subsequent trial. As part of the research team infrastructure, the user group listened to anonymised audio-recorded consultations of actual patient–healthcare

professional encounters of the ASKING-D consultation in use. We brainstormed what the appropriate outcomes for measurement should be and included some clinical outcomes, knowledge and self-efficacy but also included goal setting discussions. A number of members said they had never experienced a consultation that involved a goal-setting discussion and that this was key to future behavioural changes.

As the Diabetes Manual randomised controlled trial, involving a one-to-one structured education programme, draws to a close and dissemination gets underway, the research user group are working on the second edition of the manual. It is now 4 years since the work to develop the Diabetes Manual began and aspects of diabetes care have changed in the interim: more people with type 2 diabetes are now having discussions about insulin with their healthcare team, some of the clinical targets have changed and there is more information in the public domain about glycaemic indices. As with the original development, both members of the diabetes team and people with diabetes are contributing to the updating and editing. We hope to have the content for a second edition finalised by summer 2007.

The group continues to meet every 2 months and recent articles in UK diabetes journals have attracted new members. For further information about either the Diabetes Manual or the Warwick Diabetes User Group, please see our web-site: www.diabetescare.warwick.ac.uk (accessed 16.05.2007) or contact geoffaitchison@onetel.com or jackie.sturt@warwick.ac.uk.

*Dr Jackie Sturt
Associate Professor,
University of Warwick,
(In consultation with the Warwick
Diabetes User Group)*