DSN Forum newsletter – June 2020

ello everyone! I am Vicki, one of the new DSN Forum admin team members, and this is my first Forum newsletter. I have been a DSN since 2005 and have worked across secondary care in outpatient clinical settings and also as a dedicated inpatient DSN, as well as being a diabetes research nurse for a period of time. I then ventured into primary care and my current role is Community DSN within Liverpool Diabetes Partnership. This is an integrated diabetes team in Liverpool which became fully operational as a new service in 2015.

I'm so excited to be part this amazing team and would like to thank the existing team members for asking me to come on board. I'm very much looking forward to lots of exciting plans over the next few months.

What's been happening over the last month?

Well, as we continue trying to get used to the "new normal" way of working, the DSN Forum team has tried to keep spirits up and bring some fun into the world of diabetes nursing. Of course, this meant we posted our first ever TikTok video on Global Hand Hygiene Day on 5th May. This was done all in the name of education (and maybe a little fun along the way). It was put together to promote and raise awareness about the importance of hand hygiene and hand washing by us all taking part in the #SafeHandsChallenge. Our chief video editor, Amanda, did such a good job that we couldn't resist another fun video on 12th May for International Nurses Day. This involved all six of us magically changing from civvies into nurse uniforms in the blink of an eye! You can view our videos on our social media pages or alternatively follow us on

In all seriousness though, with 2020 being the year of the nurse and the midwife, and in such difficult and unprecedented times, we are all so



proud to be nurses. I'm sure you will all join me in recognising the amazing work that nurses all around the world are doing and especially remembering those who sadly have been taken too soon.

The team also celebrated International Nurses Day by getting involved in posting yellow selfies on the day with the hashtags #IND2020 and #YearOfTheNurseAndMidwife.

Diabetes 101

Over on the <u>@ diabetes101</u> Twitter account, Tamsin, Amanda, Beth and I have been continually working. There have been weekly education sessions on topics including eye health, blood pressure and cholesterol, virtual consultations, mental health and kidney health. I also did my first ever tweet education session on type 2 diabetes medication and treatment options.

As a team, we ran three bank holiday quizzes, which were both fun and educational. The account has had over 4 million impressions over a 2-month period. It is fantastic that we have managed to reach so many people and hopefully helped and offered support during the COVID-19 lockdown. It truly has been an amazing experience to be part of this team, pure teamwork all the way through. We are taking a short virtual holiday to re-charge the batteries,



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but we aim to continue running the account, with more plans to come. In the meantime, we have circulated a survey to evaluate how the team has been received, and this will help to shape future plans.

NHS England data

There was a media focus on 14th May following the release of data from the Office for National Statistics showing that 26% of people who had died from COVID-19 had diabetes. People with dementia and respiratory disease were also among those most at risk of poor outcomes after contracting the disease. This understandably caused a lot of anxiety for all those living with diabetes, and at the time there was no specific breakdown about type of diabetes, age, glycaemic control or other comorbidities.

Following that, on 20th May, NHS England released the data surrounding diabetes and COVID-19, which can be accessed at https://bit.ly/3dnNIMj. The main points were:

- 1. People living with diabetes face a significantly higher risk of dying with COVID-19, with type 1 diabetes having a higher risk than type 2 diabetes.
- 2. The strongest risk factor for dying with

- COVID-19 is age, and people with type 1 diabetes on average are younger than those with type 2 diabetes.
- **3.** The risk of death remains very low under the age of 40, with no recorded death below the age of 20 in the data set analysed.
- **4.** Higher blood glucose levels and obesity are linked with higher risk.
- **5.** Too tight glycaemic control and obesity are also linked to higher risk.
- **6.** The overall death rate for people with diabetes doubled during the early stage of the pandemic.
- 7. In both type 1 and type 2 diabetes, men, people of black or Asian ethnicity, and people living in more deprived communities were at higher risk.
- **8.** In both type 1 and type 2 diabetes, those with pre-existing kidney disease, heart failure and previous stroke were also at higher risk.

In response to this, the Diabetes 101 team put together a very comprehensive FAQ document, which was shared widely on Twitter and also with many diabetes teams nationally to support their patients. The document can be found here.

Also in response to this big news, a new national diabetes advice line has been launched for people living with diabetes if they are unable to contact their local team. This is a joint venture between the NHS Diabetes Programme and Diabetes UK, with support from industry partners using the medCrowd messenger platform. The advice line is available via the Diabetes UK support line on 0345 123 2399, Monday to Friday, 9 AM to 6 PM. As many diabetes teams still have staff redeployed to other areas, although some are now slowly returning, this is a welcome alternative, I'm sure, for anyone living with diabetes who has not been able to seek advice locally.

Towards the new normal

Some Trusts, including my own, are now starting to reopen outpatient services in a stepwise approach, still with a lot of emphasis on telephone consultations and virtual clinics using specified software, and also focusing on self-management by those living with diabetes in addition to the support from community services.

I'm sure we are all concerned about how we are



going to "catch up" with the backlog of cancelled appointments, particularly with structured group education programmes and new referrals. One thing we can all assume is that the way we will work in the future is likely to be different from before. I think it's important to take the positives from this situation, as it will help shape our services in the future.

One thing I can say from experience, working for an integrated community team with a secondary care background, is that strong links and relationships with primary care are vital to succeed with any future changes. Ultimately, we all need to work together as one team to continue providing the much-needed support to all those living with diabetes.

Diabetes Specialist Nurse Forum UK

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