

# National Children and Young People's Diabetes Network National Delivery Plan - Aim 1 Schools and Social Care Subgroup Meeting Minutes 17 November 2021 Via Microsoft Teams



### **Attendees**

Aim 1 Core Group Members	Role	Network/Organisation
Martha Ford Adams (MFA)	Clinical Lead	London/SEC
Margot Carson (MC)	Manager	North West
Janet Soo (JS)	Nursing Lead	North West
Emma Savage (ES)	Manager	Yorkshire and Humber
Jonathan Maiden	Administrator	North West

	Name	Role	Network/Organisation
		Network	
	Kate Wilson* (KW)	Manager	East of England
	Matt Williams* (MW)	PDSN	East of England
	Samantha Costello	Dietitian	North East and North Cumbria
	Yvonne Stone (YS)	PDSN	SEC
	Keya Ali (KA)	Consultant	Thames Valley
	Joanne Summerton	PDSN	Wessex
	Ambika Karthikeyan	Consultant	West Midlands
	Kate Scott (KS)	PDSN	Yorkshire and Humber
	Jane Haest**	PDSN	Lead Nurse
	Adele Swart	Dietitian	Lead Dietitian
	Oliver Stone-Lee		
	(OSL)	Parent Rep	Parent Representative
Apologies	Name	Role	Network/Organisation
	Lesley Drummond**	PDSN	Lead Nurse
	Sharanjit Cheema	PDSN	London – on maternity leave
	Dawn Anderson	PDSN	North West

# Welcome and Introductions – All

## Agenda:

All delegates introduced themselves to the group.

## The Aim of the Subgroup - Martha Ford-Adams

By 2025, we can ensure that every child with diabetes has equal access to the same level of diabetes care and education, that allows effective self-management through the delivery of a national standard programme supported by diabetes teams that include psychologists and social workers.

MC and ES have broken the aim into 6 subgroups.

This subgroup will look at Schools and Social Care Subgroup looking at variation and addressing the gaps in care.



IntroductionSlides.pd

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# Discussion: Updating the existing National E-Learning Module for Schools – All

Used by several units from the group. KS - Used as part of a care package virtually since start Covid. MW/KW the basic module is to give an awareness for staff, where the advanced module is for staff with a



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more hands on role with diabetes care in schools. Widely used across the Country. Developed in 2015 and is now needs to be updated to include technology etc. Subgroup of this group to be set up to look at this. 2 clinical members of the original group are already members of this group (MW and JH) so they will lead the subgroup.

**Action:** MC to set up subgroup and ask virtual college for breakdown of usage so that we can see which areas across the Country are using it and which areas are not.

JS – Teaching needs to be embedded in CYP's care plan. Look at getting teaching association representation to enable us to ratify the teaching process into standardised processes.

**Action:** Look at getting school, parent, and potentially a young person representation for the group. SC has a parent rep who is a teacher to potentially approach

Discussion around EHCP and extra funding obtained by schools when these are in place. MFA – Good opportunity in redesign with school representation to discuss this extra funding and how it is being used. **Action:** Look at a national scoping exercise to see who is using the national module as part their education for schools. Also ask whether teams are using any alternative modules. **Action:** MC and ES to draft some questions for a scoping survey and circulate for comment

Discussion around competencies and issues in certain areas. YS worked on some competencies in Sussex. **Action:** YS to share competencies. Variation in relationships with education societies, with some engaged and mandating competency sign offs as part of training. **Action:** As a group look at legalities surrounding competencies and who is liable if something goes wrong in care of CYP. Approach JDRF & DUK for representation in the group who may be able to support with some of this.

### Discussion: Updating the National Type 1 IHCP in collaboration with the Type 1 subgroup - All

There is a national IHCP that needs updating. The national nurses group did a survey recently to see who is using what. Most teams are either using locally developed plan or the national plan.

KS – Experiences with some schools taking info from a IHCP and putting it into their own documents. Issues with sending plan electronically and file sizes being too big. **Action:** Collate all care plans and competencies available nationally

Action: OSL to approach his CYP's school for some representation on the group

**Action:** KA to get some feedback from RCPCH and patient engagement group and get some anonymised experiences and send through to MC and ES

**A.O.B.** ES and MC noted that it was suggested that a lead nurse should Co-Chair with MA as nurses tend to have a direct involvement with schools rather than the Consultant. **Action:** MC and ES to recruit to this role. Ideally a nurse who is not representing the Lead Nurses on any other subgroup.

### **Actions**

- YS to share competencies
- Look at a national scoping exercise to see who is using the national module as part their education for schools. Also ask whether teams are using any alternative modules
- As a group look at legalities surrounding competencies and who is liable if something goes wrong in care of CYP. Approach JDRF & DUK for representation in the group who may be able to support with some of this.
- Collate all care plans and competencies available nationally
- OSL to approach his CYP's school for some representation on the group
- \* KA to get some feedback from RCPCH and patient engagement group and get some anonymised experiences and send through to MC and ES
- MC and ES to draft some questions for a scoping survey and circulate for comment
- MC to set up subgroup and ask virtual college for breakdown of National E-learning package usage so that we can see which areas across the Country are using it and which areas are not.
- Look at getting school, parent, and potentially a young person representation for the group. SC has a parent rep who is a teacher to potentially approach
- MC and ES to recruit to this role. Ideally a nurse who is not representing the Lead Nurses on any other subgroup

Date and time of

**Time:** 1000-1130 hours **Date:** 9 March 2022



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next Meeting Venue: Virtually - via MSTeams

Minutes kindly taken by Jonathan Maiden

\*& \*\* only one representative from each Network/organisation