



**National Children & Young People's
Diabetes Network**

T2 Diabetes in Children & Young People Online Study Day

4 December 2024



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Morning Chair – Dr Pooja Sachdev

Welcome

Dr Pooja Sachdev

**Chair of National T2 Working Group, National CYP
Diabetes Network**



- Introduction
- Purpose of the day

Update from the National Working Group since April

Meetings:

- Continue to meet 3x year
- Adopted as BSPED SIG – representation from 4 Nations
- Wide MDT representation, expanding to include HCP Peer Support Network Core Group members

Topics discussed in 2024:

- NPDA and NDA Young T2 report discussion
- Analysis of PREM responses for CYP with T2 and their parents/carers
- Suggestions for future Spotlight T2
- Presentation from Diabetes UK on the social determinants of health and areas of DUK activity
- Ongoing discussion and support for:
 - HCP Peer Support Networks
 - DigiBete Young T2
 - Elfh Managing T2 Diabetes in CYP Modules
 - National Online Study days
 - Research

HCP Peer Support meetings / Networks

- Well established across England; progress across 4 Nations shared at each meeting
- Common successes:
 - Sharing knowledge and expertise
 - Enthusiasm and participation
 - MDT representation including psychology and pharmacy reps
 - Inclusion of guest speakers / education topics
 - Ability to discuss approaches to areas of care
- Common challenges:
 - Medication availability
 - Prevalence of Neurodiversity / Additional needs / Complex health needs within this cohort
 - Family complexity, safeguarding and communicating risk
 - Engagement with CYP and families
 - Time / service pressures impact availability
- Other comments:
 - Balancing case discussion and practice with operational topics within time
 - Some challenges recruiting Service Champions and Core Group members

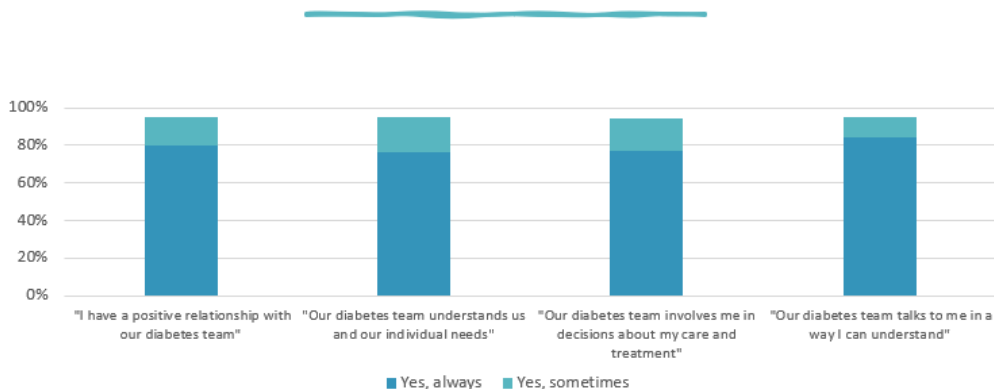
Focus on PREMs responses for CYP & P/C with T2D

- Conducted by Hannah Hickingbotham, Katherine Hawton and Pooja Sachdev
- Analysis of responses to the NPDA PREM 2021 for CYP with T2 Diabetes and their parents / carers
- Aims to listen to the views of CYP to ensure we are meeting their needs
- In view of the known patient characteristics and risk factors for T2D, it is important to consider the socio-economic factors experienced by families that may impact care and engagement with care

Survey Response Rates

- 9.2% of CYP with T2DM (105/1144)
 - 13.2% of CYP with any type of diabetes
- 5.7% of parents and carers of CYP with T2DM (65/1144)
 - 21.5% of parents and carers of CYP with any type of diabetes

Relationship with diabetes team



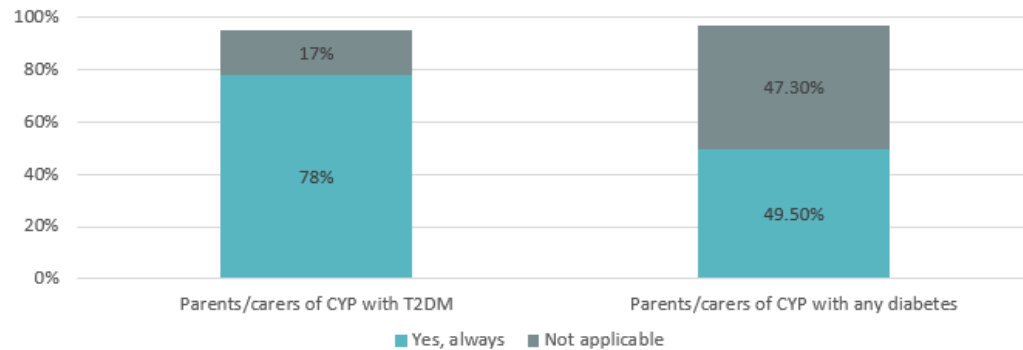
Headlines:

- Proportion of responses from Parents/ Carers from ethnic minority groups was low: maybe due to the age of CYP or could reflect language barriers
- Good access to PDSN and Dietetics, less access to Psychology (for all types of diabetes). However, 48.3% of CYP with T2D assessed as needing additional Psychological support in NPDA – access is crucial
- Relationship with team and how CYP feel after appts. similar to responses from CYP with T1D

Focus on PREMs responses for CYP & P/C with T2D

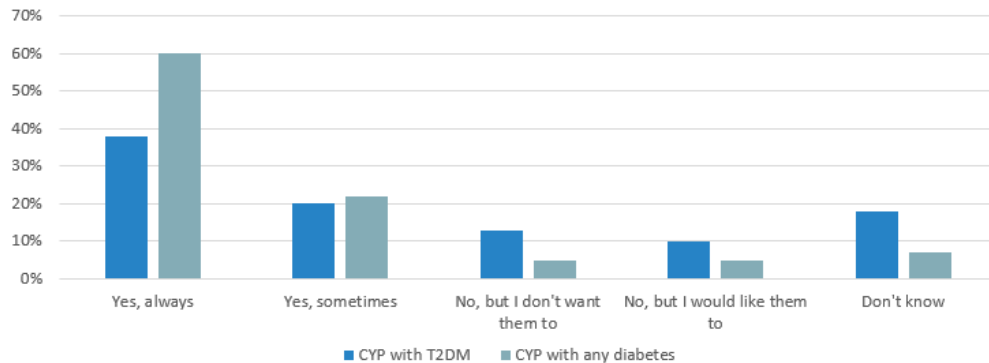
Religious and cultural beliefs

“Our diabetes team respect our religious and/or cultural beliefs”



Higher proportion of positive responses for respect for religious/cultural beliefs compared to all types of diabetes (78% to 49.5%)

“My diabetes team ensure that the staff at my school/college have the necessary information about my diabetes in order to help me”



Fewer CYP felt their school / education setting had the necessary information to help them when compared to CYP with any form of diabetes (38% to 60%)

Focus on PREMs responses for CYP & P/C with T2D

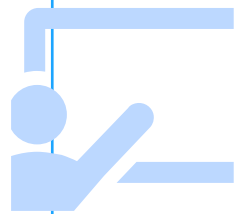
Conclusions:

- Good response rate
- Representative of T2DM population
- Overall, many positive aspects of how CYP and parents / carers experience care
- Identified areas in which there was less satisfaction to be considered when designing services in order to improve patient experience
- Improved patient experience may also benefit concordance and therefore long-term outcomes
- May be beneficial for a future PREM survey to be designed specifically for T2D

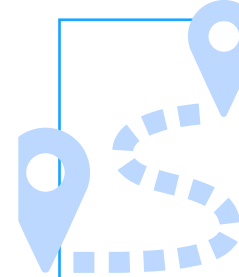
Acknowledged:

- Some PREM questions are not applicable or there was confusion from the respondent (e.g. around tech or may have initially been diagnosed with T1D)
- In order to have participated, CYP and parent / carer respondents may be more engaged with healthcare services

Task and Finish Groups



Study Day Faculty



First Year of Care

T2Digibete

Patient information on medication

INDIVIDUAL HEALTH CARE PLAN FOR A CHILD OR YOUNG PERSON IN THE EDUCATION SETTING WHO HAS TYPE 2 DIABETES

T2 IHCP



Updated Guidelines