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PQ - 25837/22

Deputy Padraig O'Sullivan
Dail Eireann
Leinster House
Kildare Street
Dublin 2

To ask the Minister for Health if his attention has been drawn to the lack of services available in the Cork University Hospital paediatric diabetic clinic; if additional consultants and specialist nurses are being recruited; and if he will make a statement on the matter

Dear Deputy O'Sullivan

The Health Service Executive has been requested to reply directly to you in the context of the above Parliamentary Question which you submitted to the Minister for Health for response. I have examined the matter and the following outlines the position.

The Paediatric Diabetes Service at Cork University Hospital provides subspecialist care for 525 children with type 1 diabetes across the South/Southwest Hospital Group. There is currently the equivalent of 1 WTE (whole (full) time equivalent) Consultant dedicated to the Paediatric Diabetes & Endocrinology service (made up of 2 Paediatric Consultants with a Special Interest in Diabetes & Endocrinology i.e. 0.5 wte each), 1 WTE Dietitian in post, and up to recent weeks 2 WTE Diabetes Nurse Specialists (DNS) in post, making up the Diabetes Team.

Commencing a child on an Insulin Pump requires intensive education for the entire family with close monitoring of glucose levels and insulin doses, particularly in the early stages of Insulin Pump use. Type1 diabetes is an intensive condition to manage, requiring frequent specialist nursing phone calls, dose adjustment, guidance during intercurrent illness and outpatient appointments. This is essential to optimise health and prevent hospitalisation.

A Business case was prepared and submitted by the Hospital to the South/South West Hospital Group for additional staffing, and funding was provided for an ANP (Advanced Nurse Practitioner) and 2 additional DNSs.

The process of identifying an ANP candidate will take some time, but we are currently in the process of recruiting and appointing the 2 DNSs from a panel.

However, in order to provide safe care for the entire paediatric diabetes patient cohort, the service has to prioritise the essential components of diabetes care for all the children under the care of the service. In saying that, while our current Paediatric DNSs do have training in Insulin Pump initiation, further training is required for the New Pump System (Closed Loop System). This training is underway for the current staff and training will be immediately rolled out for the new additional staff on their commencement.

Meanwhile, the team have met to review all patients, who will be prioritized in line with each individual patient's need and international guidelines for the recommencement of the Insulin Pump service, which we hope to start towards the end of June/July depending on the delivery of the new pumps. Small numbers of children will be started initially on this new technology, to allow time to provide and assess the indirect time required to support families, but it is expected these numbers will increase once the new technology is bedded-in to the service. Plans are also in place to prioritise any children whose pump malfunctions where a warranty has expired, while a different pathway will be followed for those children whose pumps remain under warranty.

I am also advised that our consultant, Dr. Colin Hawkes, has engaged with the Cork Diabetes Parent Group (T1 Diabetes Alliance) and updated them on the prioritisation plan, which I am informed was well received.

Finally, while insulin pumps remain the highest concern for some parents, I can assure you that we remain committed to addressing the wider challenges within the service for all children who are under the care of the Paediatric Diabetic Service.

Yours sinterely

Dr. Gerard O'Callaghan

Interim Chief Executive Officer