

## Insulin Pump Therapy for People with Type 1 Diabetes – Action Plan

Action	Deliverables/Milestones	Risks/Dependencies	Lead	% complete				Completion date
				25	50	70	100	
¼ individuals with type 1 diabetes <18 must have access to insulin pump therapy by March 2013	Timeline for delivery and achievement of additional 18 young Scots receiving pump therapy by March 2013	Failure to provide staff capacity and infrastructure within timeframe indicated.						
Contribution to the achievement of trebling number of people, of all ages, across Scotland having access to insulin pump therapy by March 2015	Timeline for and achievement of additional 29 individuals with type 1 diabetes receiving pump therapy by March 2015	Current numbers are low requiring significant increase placing pressure on capacity, infrastructure and available expertise.						
To provide safe and sustainable staffing model to support provision of target insulin pump provision across both services.	Clear outline for requirements and costs associated, benchmarked with similar sized boards, to be developed.	Model not financially viable	Project Team					April 2012
	Consideration of roles required and flexibility between, ie specialist nurse and dietician.	Inability to obtain appropriate staff capacity within the timescales required.						
	Recognition of any other staffing pressures, ie providing in-reach to schools, GPs, psychology access etc	Potential of an adverse clinical outcome due to lack of trained staff and rapid expansion.						
	Joint working and collaboration between paediatric and adult service. Already evident by proposal that 'adult' team support achievement of March 2013 target.							
To deliver safe and effective service through appropriate infrastructure.	Develop group education sessions as appropriate	Ability to release key staff to support given timescales to achieve targets.						
	Explore use of telemedicine to maximise efficiency and provide equitable region wide service	Ability to identify appropriate levels of staffing and finance.						
	Implementation of reliable administrative processes to support service providers and users.							
	Consideration of need for out of hours support and potential for across board working.							
	Effective communication with key stakeholders including, patient groups, service users, GPs, schools, inpatient services and third sector groups							
To provide training and ongoing development to service providers	Harness local knowledge and experience of those currently working with insulin pumps.	Ability to release key staff to support given timescales to achieve targets.						
	Apply and spread learning from REPOSE trail and in particular clinical confidence in potential of telemedicine to support service delivery across the region.							
	Consider outreach support and training sessions for other stakeholders , ie schools, GPs. Health visitors							
	Access national, regional and any other support available to develop local teams							