

PE2031/L: Provide insulin pumps to all children with type 1 diabetes in Scotland

Scottish Government written submission, 26 June 2024

I refer to your letter of 31 May 2024 seeking our response to the Diabetes Scotland 'Diabetes Tech Can't Wait' report. The Committee has asked for further information about the funding provided to support the resource and capacity required to achieve 100% of Type 1 diabetic children using hybrid closed loop technology by 2030; information on how much of the £8.8 million of new funding each health board will receive; and the sustainability of funding provided to increase access to diabetes technologies.

As highlighted in our previous response, diabetes is a priority for the Scottish Government, and we are committed to improving the care and outcomes for everyone living with diabetes. Our aim is to ensure that everyone with Type 1 diabetes in Scotland who would benefit from these important technologies have access at the earliest opportunity.

In our previous response, we informed the Committee that between 2016 and 2021 we invested £15 million of additional funding, specifically to support the increased provision of insulin pumps and CGM. A further £14.6 million was allocated in January 2022 to support increased access to these diabetes technologies as well as the new emerging CLS. This funding was in addition to local budgets and NHS Boards are expected to continue to fund provision locally to meet the needs of their local populations.

New funding for 2024 to 2025 and support for children's access to technology

As the Committee are aware, on 28 May 2024 we announced that £8.8 million of funding will be made available in 2024 to 2025 to expand access to diabetes technologies. This funding will support the increase in access for all children and young people in Scotland with Type 1 diabetes should they wish to have it. It will also allow us to continue to increase access to adults. This funding will also allow for the development of an innovative and sustainable care model which will have a digital focus.

This investment will specifically support new access, i.e. those people with existing tech access will still be covered by local budgets. The vast majority of this funding will be used on new kit, but it will also cover the costs of the national onboarding team based at the Centre for Sustainable Delivery to ensure there is additional capacity for delivery.

Allocation of funding

The new investment will allow the development of a national pathway, so for now we are not allocating funding directly to NHS boards. The plan for this phase is for funding to be held centrally and allocated based on patient need, with a focus on equity of access to technology for people with Type 1 diabetes across Scotland.

We will be encouraging all NHS Boards to utilise the national onboarding team as well as their own local diabetes clinical teams, to enable them to reduce waiting times. We are confident delivery to all children will be achieved within 18 months but it is important to recognise there are some factors (including availability of stock) which may mean this extended to 24 months.

We will soon be commissioning an executive group with key stakeholders including diabetes clinicians, managed clinical networks, Diabetes Scotland and people living with diabetes to identify the most effective future pathway for people with Type 1 diabetes.

Long-term sustainability of funding

The Scottish Government can confirm that the new funding is planned to be recurring. Prioritisation will need to take place in the 2025 to 2026 budget to make provision for this, however we understand the recurring nature of this treatment and therefore funding must follow that.

It will not be possible to deliver CLS technology to all those that want it within one year. By spring next year, we will develop a full business case for long-term investment in diabetes technology. We will also continue to develop a sustainable infrastructure to ensure we can deliver at pace and scale. This will require collaboration across all aspects of diabetes care and from industry partners.

It is important to note that the pace of delivery will be dependent on the prices secured from industry.

We understand there is still a long way to go to ensure everyone that wants access to this technology gets it, but I hope this information provides the Committee with assurances that the Scottish Government is committed to increasing access to diabetes technologies to all who would benefit.

Clinical Priorities Unit
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