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Other patients attending DNS services

Other patients attending DNS services mentioned by participants were patients with cystic fibrosis-related diabetes (n = 10) or steroid induced diabetes (n = 6), neonatal (n = 4), Maturity Onset Diabetes of the Young (MODY) (n = 4), post-transplant (n = 2), post pancreatic surgery (n = 3) patients, or with patients pancreatitis (n = 3), and those using insulin pumps (n = 3).

Other roles in patient care

Other roles in patient care were mentioned by hospital and community nurses (n = 35) and included, Diabetic Ketoacidosis (DKA) management (n = 2), endocrine patients with conditions involving the pituitary, thyroid, adrenal and other endocrine glands (n = 1), preparation for transition to adult services (n = 1), health screening for traveller groups (n = 1), primary and secondary school education (n = 1) and involvement in social care work (n = 1).

Types of clinics

Forty-four respondents reported the type of clinic they run. Most reported they ran clinics run for patients with T2DM (n = 15) or T1DM (n=11) needing review. Specialist clinics reported were pump training clinics (n = 5), clinics for GDM (n=8), pre-pregnancy/pre-conception (n = 5), transition clinics for young adults (n = 5), and paediatric clinics (n = 5).

Non-diabetic roles[1]

Fourteen respondents reported the roles they perform unrelated to diabetes, which included endocrine work (n = 4), management duties (n = 3), administration (n = 2)[2], patient advice (n =2), and teaching (n = 1).

[1] A closed question asked respondents "Do you cover roles not solely related to diabetes?" Fifteen responded "Yes" to this question, 14 of whom expanded on this in the open-ended comments.

[2] Administrative work relating to diabetes may have been seen by respondents as being different to general administrative work. When asked about time spent in administration, 58 respondents reported they spent time on this type of work, however, just 2 respondents indicated administration was work unrelated to diabetes