

Behind the scenes at Diabetes Ireland



Deborah Condon talks to Diabetes Ireland’s five Regional Development Officers about their work, where no two days are ever the same

As a member of Diabetes Ireland, chances are you have at some stage come into contact with one of the charity’s five Regional Development Officers (RDOs). Their role is all-encompassing, from answering helpline calls to delivering education programmes and organising patient support and education events.

“Their job is health promotion and their work is hugely important for the charity. Our RDOs are in the community on a daily basis educating and supporting people with diabetes, and for many, they are the face of the charity. With the increasing prevalence of diabetes and pre-diabetes, the work of our RDOs will become even more important going forward,” commented Diabetes Ireland CEO, Kieran O’Leary.

Last year alone, the RDOs delivered 32 CODE education programmes and 35 workplace screenings. They also visited

22 schools, helping to educate staff and pupils about Type 1 diabetes.

With such a crucial role in the charity, we decided to put the spotlight on our five RDOs, in order to give people some insight into their job.

Pauline Lynch

Pauline is married with two grown up children and a four-year-old grandchild. Outside of work, she likes to walk and swim.

She has been working with Diabetes Ireland for the last 16 years, having previously worked with the HSE on a variety of development projects, including the compilation of a national database for people with disabilities and the development of the Breast Clinic at Cork University Hospital.

What does your job entail?

There is no such thing as a typical day. My job includes:

- The co-ordination of support groups



Pauline Lynch – Cork, Kerry, South Tipperary, Waterford and Wexford

(Type 1, Type 2, family support, teen support)

- The organisation of a variety of events

that raise awareness of diabetes among the general population

- Liaising with a range of healthcare professionals working in diabetes in hospitals and in the community to support education and information provision to service users
- Supporting the education of people with diabetes
- Acting as an advocate and patient representative on a range of committees
- Acting as a local representative of Diabetes Ireland in the southern area.

What do you enjoy most about the job?

I love meeting and interacting with a range of people from all walks of life and being able to connect them with the appropriate services and events.

What are the most difficult aspects of the job?

Seeing people struggling with a new diagnosis and knowing that diabetes services are so underfunded and there are big waiting lists.

What are the biggest issues facing diabetes services nationally and/or locally?

Nationally, a big issue is the ever increasing incidence of people being diagnosed with diabetes who need education, persuasion and confidence, so that they can self manage the condition alongside good medical care.

Both in the south and nationally, the lack of psychological and counselling services is a big concern.

I am a psychotherapist and counsellor registered with the Irish Association for Counselling and Psychotherapy (IACP). I started this training because I could see people struggling with managing diabetes amid limited services. I think if we can support people emotionally and psychologically, then that will empower them to seek out information and education.

Properly supported, I believe people can make the necessary changes and ultimately enjoy better health.

Pauline Dunne

Pauline is originally from Galway, but is now living in Kilkenny. She enjoys cooking, meeting up with friends and family, and getting outdoors.

She is a Registered Dietitian and has



Pauline Dunne – West/Mid-West region, including Galway, Clare, Limerick and north Tipperary

been working with Diabetes Ireland for the past six years. Prior to this, she was working as a Community Dietitian in the midlands for around 10 years.

What does your job entail?

It is fair to say variety describes my job best. It is rare that two days in the week are the same. Our helpline generates lots of queries, so returning calls and emails is my usual start to the day.

I organise and deliver structured CODE, which is patient education for people with Type 2 diabetes and pre-diabetes. Other education sessions I deliver are awareness sessions in schools, updates for health professionals, and information sessions in residential care for older people or those with intellectual disabilities.

I also write articles for a range of publications, including this magazine, the Diabetes Ireland website, and medical publications such as the *Irish Medical Times*.

I tend to look after recipes also, trying them out at home and using computer software to make sure we have the correct nutritional analysis to accompany each recipe.

What do you enjoy most about the job?

The variety of tasks means encountering lots of different people in a range of settings, including members of the public at awareness events, those attending

group education, staff and students in schools, and health professionals across lots of areas.

I enjoy facilitating education sessions, be it for health professionals or individuals with diabetes/pre-diabetes. Helping people understand how to better manage their condition is deeply satisfying.

I also really enjoy creating recipes and writing – they are a nice balance to the front-facing part of the role.

What are the most difficult aspects of the job?

Managing the diary is most challenging. There are only so many working hours in the day and there is a lot of ground to cover. Managing peoples' expectations can be tough too. Lots of people do not realise how scarce we RDOs are, and it isn't nice to have to say 'no'.

What are the biggest issues facing diabetes services nationally and/or locally?

Nationally, the lack of resources (staff) impacts hugely on patient care. Healthcare professionals working in this area commonly experience burnout and even though we have identified the gaps through audits and reviews, these cannot be fully resolved without greater investment by the HSE.

The number of people with diabetes is rising, thus increasing pressure on already stretched services. Looking to the future, support systems need to be utilised more fully to enable and empower individuals to self manage their condition effectively.

Locally, the lack of healthcare professionals at both acute and community level is significant. For example, there is no dietetic service for adults with Type 1 diabetes in University Hospital Limerick.

Also, when staff are on maternity leave/sick leave, their posts generally aren't filled. Currently in the Limerick/north Tipperary area, there are three Clinical Nurse Specialist diabetes posts empty for these reasons, and this is not a unique situation.

This deficit has a huge impact on vulnerable individuals who need support to better manage their condition.

FEATURE



Clair Naughton – West/North West including Sligo, Mayo, Leitrim, North Roscommon and Donegal

Clair Naughton

Originally from Co Clare, Clair is married with two children. She enjoys being outdoors, hill walking, gardening and reading.

She qualified as a nurse in 2000 and has been working in the area of diabetes since 2005. She has completed a postgraduate diploma in diabetes and worked in the Diabetes Day Centre in the Mater Hospital in Dublin from 2005 to 2013, before moving to Mayo and taking up the role of RDO.

What does your job entail?

My role is really varied and there is no such thing as a typical day, which is one of the things I love about the job.

I facilitate the Diabetes Ireland CODE education courses in my area. I respond to queries we receive via the Diabetes Ireland helpline, either by email or phone. I enjoy responding to helpline calls and giving people the support and information they need.

I facilitate diabetes awareness talks in the community in a variety of settings. We do public screening to promote awareness of diabetes and early detection of Type 2 diabetes in shopping centres, marts, pharmacies and community-run health and well-being events.

I work in partnership with the local

branches of Diabetes Ireland in Donegal, Sligo and Leitrim.

I have a good working relationship with the diabetes health professional team in the hospital and the community in my area. Any service/information we provide is in addition to the services they provide on a daily basis.

I am also involved in organising our health professional conferences.

What do you enjoy most about the job?

I enjoy the variety and supporting the diabetes community. I enjoy the health promotion aspect of the job, emphasising the importance of having a healthy lifestyle when it comes to managing or preventing diabetes. And I have lovely colleagues, each one of them dedicated to their job of supporting the diabetes community.

What are the most difficult aspects of the job?

Sometimes the travel. At busier times of the year, I could spend a lot of time driving.

What are the biggest issues facing diabetes services nationally and/or locally?

Although services have improved in the past 10 years with the HSE National Diabetes Programme, there remains a shortage of multidisciplinary healthcare professionals in both hospital and community settings to deliver diabetes care.

There are waiting lists for courses such as carbohydrate counting, and a lack of access to technology, such as insulin pumps, with lengthy waiting lists in these areas.

In the north-west, it is great to see the new diabetes unit in Sligo finally get underway. However, diabetes services remain under-resourced across the north-west in all disciplines, including Consultants, Diabetes Nurses and Dietitians.

Sinead Powell

Originally from Cork, Sinead now lives in Marino in Dublin with her four sons. Outside of work, she likes to cook, run and catch up with family and friends.

She is a Registered Dietitian who has been working with Diabetes Ireland for over 12 years. She was one of the four

RDOs initially employed to set up the structured education programme now known as CODE.

Her background prior to starting with the charity was primarily based around diabetes education across primary care and the acute sector both in the HSE and the NHS.

What does your job entail?

It completely varies. I run CODE courses throughout the year across my area. I also run workplace wellness sessions, which usually consist of screening plus an education component.

I review the literature and content of our website and helpline, and I write and submit applications for funding for new ventures tackling awareness and education in the area of diabetes.

I am also involved with:

- The Irish Men's Sheds Association
- Education around understanding of Type 1 diabetes management in primary schools
- Various initiatives aimed at the education of carers and support staff in the area of mental health and Intellectual disabilities, where Type 2 diabetes is more prevalent
- Various community initiatives across the country, for example with the Lions clubs, Traveller groups and community groups about awareness and



Sinead Powell – North East, encompassing Dublin, Louth, Meath, Cavan and Monaghan

prevention of Type 2 diabetes

- Co-ordination and rollout of one of our annual healthcare conferences, DICE, which is aimed at Irish healthcare professionals working in the area of diabetes. It allows them to come together, share ideas and keep up to date with the latest scientific evidence to support their work.

What do you enjoy most about the job?

I enjoy the day-to-day variety of my work. It is both challenging and busy, which helps to keep me motivated, and as newer research and technologies continue to become available, it empowers me to be able to continue to support and motivate people with diabetes.

I also love the educational component and the facilitation aspect of my work, even after over 20 years in this area.

What are the most difficult aspects of the job?

The lack of funding currently available in the area of Type 2 diabetes prevention by successive governments to adequately cater for the huge numbers of people that could potentially avoid the condition.

What are the biggest issues facing diabetes services nationally and/or locally?

As mentioned, the lack of funding aimed at Type 2 diabetes prevention is a major issue. We are well aware of the number of people at risk of the condition and while Sláintecare is welcome, the reality is that the amount of resources and interventions aimed at managing all types of diabetes falls far short of what is required.

We need a national diabetes register, equal access to technologies that are shown to improve care and reduce complications of those living with Type 1 diabetes, and well managed adequately resourced access to diabetes education and services across primary care.

Jenny Dunbar

Jenny has four grown-up children and has been working in the area of diabetes care and education for over 30 years. She is a trained nurse and previous roles have included working as a senior diabetes nurse specialist at St Vincent's



Jenny Dunbar – Mid-Leinster and the South, including Carlow, Wexford and Waterford

University Hospital in Dublin. She joined Diabetes Ireland in 2007.

What does your job entail?

The beauty of this job is that no two days are the same. I work from home and try to keep the balance between time out on the road and time spent at the desk.

My role involves the facilitation and continuous update of the CODE programme in the counties of mid-Leinster and the south, as well as the delivery of awareness update sessions to professionals and the public. This can include public information meetings, employee health initiatives and screening events.

I work with the RDO team on the continuing development and update of diabetes information booklets, literature and online information. I also answer calls and emails from the Diabetes Ireland helpline.

I liaise with the diabetes teams in hospital settings and keep them informed of CODE programmes in the area, as well as co-ordinating public information and support meetings with local health professionals for people living with Type 1 or Type 2 diabetes and their families.

What do you enjoy most about the job?

I really like being able to put a person's mind at rest by helping them with their queries and guiding them towards the

appropriate services and information.

Each time I facilitate a CODE session, it is like a new experience. I love meeting the group and then seeing them return, interact, and learn from each other over subsequent weeks.

I also really appreciate the support given to me by the diabetes teams in the hospitals and by those working in primary care.

What are the most difficult aspects of the job?

For me, the most difficult aspect of the role is when I receive a request for a media interview or a review article, as this is an area of my work I am not comfortable with.

At times during the year, time management can be an issue due to the amount of travel and preparation for events and meetings.

I also miss being a member of a clinical hospital-based or primary care team. It would be good to have work colleagues with me, but they are available by phone or email as the need arises.

What are the biggest issues facing diabetes services nationally and/or locally?

Services for people with diabetes have seen the addition of key supports, such as the retina screening service (Diabetic RetinaScreen) and the Diabetes Cycle of Care (CoC) for those with Type 2 diabetes. Unfortunately, access to the CoC still only remains available for people who have a medical card, despite the initial hope that it would be extended for use for all people with diabetes.

Structured education programmes are now accessible in the community for those with Type 2 diabetes and pre-diabetes, however a lack of access to foot screening and assessment reviews on a regular basis for those not deemed to be at high risk remains a concern.

For those with Type 1 diabetes, we continue to advocate for access to technology that best suits the individual's clinical needs. However we are aware of the additional workload this will bring to already understaffed hospital-based health services. Staffing levels needs to be addressed.