

# Early Onset Type 2 Diabetes: Workforce insights survey summary report

Health Innovation Network  
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# 1. Background

National funding has been made available by NHS England to all Integrated Care Boards (ICBs) for the T2Day: Type 2 Diabetes in the Young Programme, a 2-year initiative (for 23/24 and 24/25) aiming to improve care for people with early onset type 2 diabetes (EOT2D), defined as the development of type 2 diabetes below the age of 40 years. The programme aims to improve care across 4 key areas:

1. Verifying diagnosis of Type 2 Diabetes
2. Supporting preparation for pregnancy or access to contraception in women with Type 2 diabetes where relevant
3. Cardio-metabolic risk management and medicines optimisation
4. Addressing unmet psychosocial needs and overall wellbeing

Through the project steering group, it was recognised that gathering insights from the workforce delivering diabetes care would be vital to establish current care and experience of health care professionals, help identify any workforce needs or support required for potential improvement changes, and to inform future work.

This summary report presents the findings from an online survey circulated to primary and community care colleagues delivering type 2 diabetes services in June 2024. Recommendations have been drawn from the insights obtained from the survey.

## 2. Purpose and scope

The purpose of this insights gathering exercise was to better understand the current experience and possible training requirements of the workforce delivering diabetes care to individuals with type 2 diabetes between the ages of 18 to 39 years, in order to support improved patient engagement and pathways/general intervention in primary care.

Gathering workforce insights aimed to:

- Discover whether there are differences between the treatment and care approaches to supporting young adults (18 to 39 years) with type 2 diabetes compared to those diagnosed aged 40 and above
- Determine confidence of health care professionals in supporting young adults with type 2 diabetes
- Understand barriers and challenges to supporting people living with type 2 diabetes between the ages of 18-39
- Discover the ways in which health care professionals feel barriers and challenges could be overcome
- Understand if there are any training needs and support required for health care professionals

Information about the wider project and link to access the workforce insights survey was circulated via local place leads and in some local GP bulletins.

### 3. Findings

Twenty (20) survey responses were analysed.

#### Demographics

Fifty percent (50%) of surveys were completed by GPs. Only 10% of the survey respondents indicated that they held a diabetes specialist role however others may have chosen not to specify this. Most respondents (65%) were working in Greenwich and Lambeth.

Table 1: Job roles

<b>Role</b>	<b>Count</b>	<b>Percent</b>
GP	10	50%
Diabetes Specialist Nurse/Nurse Practitioner/Practice Nurse	5	25%
AHP, pharmacist, managerial	5	25%
<b>Total</b>	<b>20</b>	

Table 2: Borough the respondents work in

<b>Borough</b>	<b>Count</b>	<b>Percent</b>
Bexley	2	10%
Bromley	3	15%
Greenwich	7	35%
Lambeth	6	30%
Lewisham	1	5%
Southwark	1	5%
<b>Total</b>	<b>20</b>	

#### Treatment and care approaches

Ninety per cent (90%) indicated that the site they work in does not have a different management approach or pathway for adults between the ages of 18 to 39 diagnosed with type 2 diabetes. The remaining 10% did not know.

Twenty five percent (25%) felt that their approach to providing support and/or clinical management of this age group differed to those above the age of 40. They felt they put more importance on blood glucose control and approached care more aggressively or with more emphasis and with more follow up to facilitate change and remission. They also acknowledged that sometimes the age group can be more difficult to engage due to busy work and lifestyle.

The remaining 75% felt that they provided the same care for everyone, regardless of age, and followed standard guidance and pathways (such as Clinical Effectiveness South East London (CESEL) guidance), alongside standard medication pathways. The aim to provide individualised support and good clinical management for all patients was highlighted.

#### Confidence of health care professionals in supporting young adults with type 2 diabetes

Health care professionals (HCPs) were asked to rate how confident they felt discussing a type 2 diabetes diagnosis with adults under the age of 40 on a scale of 0-10 (with 10 being very confident). Responses ranged from 6 to 10 with a mean of 8.25. The mode was 8 (40% of responses).

They were also asked to rate how confident they felt to support adults under the age of 40 to manage their type 2 diabetes effectively. Responses ranged from 6 to 10 with a mean of 8.2. The mode was 7 (35% of responses).

This suggests that while this cohort of HCPs are relatively confident in discussing a diabetes diagnosis, they felt slightly less confident in supporting the management of it.

Eighty per cent (80%) were not aware of any guidelines or support available in relation to type 2 diabetes management for people who are aged between 18-39 years. The 20% who were aware of guidelines or support suggested that Diabetes UK have a learning zone for young adults with type 2 diabetes, the diabetes remission programme and CESEL guidelines.

### 3.2.1 Barriers and challenges experienced by health care professionals

HCPs were asked about their own barriers and challenges experienced when supporting this age group with type 2 diabetes. The main themes were:

**Engagement** - HCPs felt that this group were more difficult to engage with low attendance at clinics or reviews (possibly due to work, study or personal issues) and poor adherence to medication if prescribed. A reluctance to initiate medication and not being easily reached by phone were also mentioned.

**Acceptance and understanding** - it was felt that this group did not always accept the diagnosis and/or understand the need for management to prevent long term complications, perhaps due to it being harder to see the future view.

**Signposting and management support** - where to signpost to or access to more support, such as weight management and healthy living services, was seen as a barrier by HCPs. It was suggested that a wellbeing coach might be helpful to support this.

One respondent mentioned a lack of time to sit and address issues was also a barrier.

### 3.2.2 Overcoming barriers and challenges

HCPs felt that these barriers or challenges could be overcome through:

**Ease of access to appointments** - for example, including virtual reviews and weekend appointments, or the opportunity to attend any clinic near to their workplace, as well as allowing sufficient time for appointments.

**Education** - including group sessions, the importance of blood glucose control, targeted for this population and available virtually. Education of diabetes nurses to improve confidence to discuss lifestyle management was also suggested.

**Improved support** - such as the availability of early, intensive and well supported weight management interventions (e.g. remission programme), a more tailored MDT service and better awareness of HCPs of local support, groups and relevant resources. A lifestyle or health coach was suggested.

An audit of this population group to understand their barriers to attending appointments was suggested as a useful exercise to do. It was also suggested that more information to the general public, and increasing activity for all would be beneficial, as well as reducing health inequalities.

### 3.2.3 Training needs and support for health care professionals

Eighty-five per cent (85%) of HCPs indicated that they would find a training session or information about type 2 diabetes management in adults under the age of 40 beneficial.

Table 3: Training session or information need

Would you find a training session or information beneficial?	Count	Percent
No	2	10%
Unsure	1	5%
Yes	17	85%
<b>Total</b>	<b>20</b>	<b>100%</b>

They were provided with a list of potential topic areas and asked to select all that applied to them, including the opportunity to add any other topic areas they wished. Eighteen (n=18) responded to the question and table 4 presents the number of times each topic area was selected.

Table 4: Topic areas of interest

Topic area	Count
Contraception and planning for possibility of pregnancy	16
Managing psychological wellbeing and social needs	12
Optimising blood glucose and cardiovascular risk	17
Medication	12
Consideration of (mis)classification of diabetes type	16
Providing weight management support	13

Other suggested topic areas that HCPs felt it would be helpful to cover included diet, encouraging structured education, explaining diabetes (what it is and different types), and reasons/encouragement to take medication as prescribed.

## 4. Conclusions

The approach to the management and support of individuals diagnosed with type 2 diabetes between the ages of 18-39 does not generally differ to those above the age of 40. Some HCPs felt that they tailored their own practice to the individual based on their age, however the majority of respondents reported that they provided the same care for all. Most were not aware of any guidelines or support specific to this group, which aligns with our desk top research. The Diabetes UK learning zone for young adults with type 2 diabetes was mentioned however this has not been located. The CESEL guidelines suggested as a resource currently do not have any specific advice on management of young adults.

The approach of specialists supporting this age group advises a more aggressive treatment and rapid titration of medication suggesting a review and development of specific guidelines for this age group would be beneficial, alongside support and training provided for HCPs. This was reflected by the 85% of respondents who felt that training or information would be helpful. Contraception and planning for possibility of pregnancy, optimising blood glucose and cardiovascular risk and consideration of (mis)classification of diabetes type were the top three topic areas of interest.

HCPs reported to be relatively confident discussing a diagnosis of type 2 diabetes but slightly less confident in supporting the management of it. Barriers and challenges experienced by those providing care focused on low engagement and attendance of patients of appointments and medication, a perception that acceptance of being diagnosed and need to management and the understanding of what this meant for possible future complications was challenging within this group, as well as knowing

where to signpost for access to more support.

Reviewing how to improve access to and engagement with care is essential, along with what 'good' education looks like to ensure this fits the need of young adults. Along with better awareness to and a range of supporting lifestyle and holistic services to refer or signpost to, this would support those providing care to feel better able to provide the most appropriate and effective care possible.

## 5. Limitations

This patient insights gathering exercise successfully collected qualitative data from 20 respondents with representations from all six south east London boroughs. However, there were some limitations:

- The sample size is small and so we cannot confidently say that this represents the views of the wider workforce, however there was consistency across the responses provided.
- We were not able to send the survey directly to all healthcare providers delivering diabetes care and we do not know whether the information was circulated in the SEL GP bulletin. It is therefore likely that not all health care professionals will have been offered the opportunity to complete the survey.
- The timeframe in which this insights gathering exercise was done was limited which may have impacted on colleagues' ability to circulate the survey link and also for healthcare professionals to feel able to complete the survey.
- An online survey was the only method of data collection.
- Healthcare professionals who engaged with the process may be subject to selection and/or response bias.

## 6. Recommendations

- Provide training opportunities for healthcare professionals delivering diabetes care to increase their existing knowledge in supporting young adults with type 2 diabetes.
- Bring together an expert panel to determine current best practice in the management of early onset type 2 diabetes and consider whether an update to pathways and guidance provided is required.
- Ensure care provided by primary care and the advice and recommendations discussed by health care professional are supported, and messages reinforced, by relevant and high-quality services such as structured education, weight management etc. And that these are available and known to HCPs.
- Undertake insights gathering work with people aged between 18-39 with type 2 diabetes to
  - understand barriers to support improvements in attendance at appointments and engagement with care.
  - identify how access to appointments could be improved
  - identify how to support acceptance of diagnosis and understanding of management including medication adherence

**Note:** please see 'Early Onset Type 2 Diabetes: Patient insights report', undertaken alongside this workforce insights gathering exercise (link to report to be added once available).

## 7. Appendix: Workforce insights survey

Thank you for viewing our survey. Your responses will help us to understand your experience of providing type 2 diabetes care to people aged 18-39 years (inclusive) and inform the next steps of our work.

The responses submitted will be returned to the Health Innovation Network south London and will be anonymous. Your responses will be kept confidential and anonymous, and individual responses will not be shared outside the Health Innovation Network project team. Your responses will be combined with those of others and a summary report produced. We may use anonymous quotes in our report. Please note: The focus for the questions is people who are aged between 18-39 years and have type 2 diabetes.

- Job role  
Drop down: HCA, practice nurse/nurse, nurse practitioner, physician associate, GP, pharmacist, other (please specify)
  - Borough (you work in):  
Drop down: Bexley, Bromley, Greenwich, Lambeth, Lewisham, Southwark
1. Does the practice have a different management approach or pathway for adults between the ages of 18 to 39 diagnosed with type 2 diabetes? e.g. appointment times, duration of appointment or who sees them...  
Yes/No/I don't know
  2. Does your approach to support and/or clinical management of this age group with type 2 diabetes differ to those above the age of 40?  
Yes/No
  3. Please tell us more about your approach to support / clinical management of type 2 diabetes in this age group.  
Free text
  4. On a scale of 0-10 (10 being very confident), how confident do you feel discussing a type 2 diabetes diagnosis with adults under the age of 40?  
0 - 10
  5. On a scale of 0-10 (10 being very confident), how confident do you feel to support adults under the age of 40 to manage their type 2 diabetes effectively  
0 - 10
  6. Are you aware of any guidelines or support available to you (in relation to type 2 diabetes management for people who are aged between 18-39 years)  
Yes/No
  7. If yes, please tell us what  
Free text
  8. Would you find a training session or information about type 2 diabetes management in adults under the age of 40 beneficial?  
Yes/no/unsure
  9. If yes, what topic areas would be useful (select all that apply)

- Contraception and planning for possibility of pregnancy
- Managing psychological wellbeing and social needs
- Optimising blood glucose and cardiovascular risk
- Medication
- Consideration of (mis)classification of diabetes type
- Providing weight management support
- Other (please specify)

10. What barriers and challenges do you experience when supporting people living with type 2 diabetes between the ages of 18-39?

Free text

11. How do you think these barriers or challenges could be overcome?

Free text

12. Is there anything more you would like us to know or to tell us?

Free text